



Communication Support World Network Newsletter

Special Issue: Special Education in Sub-Saharan Africa

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www.centralcoastchildrensfoundation.org

[Editor's Note: This special issue of our Communication Support World Network Newsletter attempts to share practical ideas and information about special education for children with disabilities in sub-Saharan Africa. Our intent is to begin a dialogue among those interested in this important topic, and to promote an increased exchange of ideas, approaches, information, resources, and promising practices.

Many of the items included appeared originally in our publications on assistive technology and augmentative communication in "emerging" nations around the globe (<http://www.centralcoastchildrensfoundation.org/home/augmentative-communication-world-network/acwn-newsletters/>). By putting them all in one place and adding some very important additional information we hope to shine a spotlight on specific and often unique ways in which some pioneers of special education are coping with the special problems they face.

We could not have completed this complex task without the knowledge and efforts of Nenneya Shields from the Middlebury Institute of International Studies. Her experience and energy have proved crucial to the completion of this complex and difficult task.]

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Editor's Note: For the past five years, the Central Coast Children's Foundation has worked collaboratively with Teachers College at Columbia University in support of its annual trips to Africa. These trips, mostly to Ghana, included efforts by the Columbia team (Masters Candidates in Speech Language Pathology and their teachers) to provide professional development assistance to special educators. Our foundation: (1) helps to develop classroom ideas that involve appropriate assistive technology and augmentative communication activities that are culturally relevant and economically feasible,(2) Provides travel fellowships to selected education leaders to places like Spain, Scotland, South Africa and Kenya, usually in connection with international conferences and (3.) provides material support in the form of practical and immediately useful classroom instructional materials. The following collection of five articles chronicle the various activities involving Ghanaian teachers through 2014 and on a separate trip the Columbia team made to Ethiopia in 2015. Taken together, they provide a multifaceted approach to supporting special education teachers in Africa with ideas, resources and materials that fit the context and the realities of the challenges they face. – ***Harvey Pressman***

Special Education in Ghana: Practical Classroom Resources

By Katie Lampe, Central Coast Children's Foundation

For the past four years, we have chronicled the exciting work of Master's students at Teacher's College at Colombia University with Ghanaian teachers who work with students with disabilities. Under the direction of Dr. Catherine Crowley, these graduate students in Speech-Language Pathology have led workshops, trained teachers, helped foster vocational skills and developed innovative ways for Ghanaian students to communicate and participate in community life. Check out [this video](#) about what they did.

Most recently, The Columbia team created a very useful pamphlet of low-tech augmentative and alternative communication and assistive technology techniques. Here are some of the highlights. (To access a pamphlet the Columbia team used at a weekend teacher retreat, [click here](#).)

1. AAC Market Cards: Each homemade card has a picture of a food item and an amount of money on it to denote the quantity of the food item wanted. Children who cannot speak can use the cards to buy items for their families at the local market, a common task for kids in Ghana. The cards are “laminated” using clear packing tape to make them durable and reusable. Check out [this video from Ghana](#) to learn more and see the cards put to use by Ghanaian students with communication difficulties (the video is also available in Swahili and Gikomba).



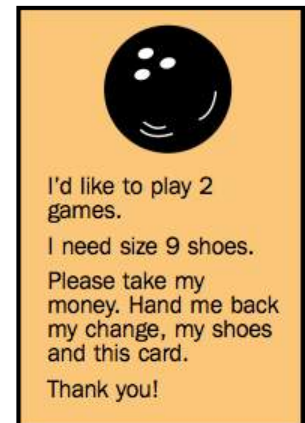
2. Communication Passports: These small booklets provide basic and essential information that people who cannot communicate verbally can share with others. They include information such as where they live, how best to communicate with them, their likes and dislikes and significant medical needs. To learn more, check out these resources:

[Click here](#) to learn more about the passports and to access templates to create them.

[Click here](#) to learn about In Case of Emergency cards. They have vital health and safety information on them that can be utilized should a person with communication difficulties encounter an emergency situation.

[Click here](#) for a template of an emergency and accident communication passport that a person with a communication difficulty can present to medical staff so they know how to best care for the person.

3. Community Request Cards: These cards allow people who cannot communicate verbally to conduct simple tasks in their community such as taking public transit, going to the market, getting help crossing the street or participating in a leisure activity. The cards contain simple instructions or requests the person can show to an employee or community member to request help.



This [website](#) explains how and why community request cards are used and how to make one yourself.

4. Talking Mats: This resource allows people to communicate by arranging cards with pictures and symbols on a mat or a digital device. As is explained on the Talking Mat [website](#), “*Talking Mats is an interactive resource that uses three sets of picture communication symbols – topics, options and a visual scale – and a space on which to display them. This can either be a physical, textured mat, or a digital space, for example a tablet, smart board or computer screen for which we have created one of the best apps for communication disability.*”

It is a clever tool to help people who cannot speak express their thoughts in a sequential and organized way. Pictures or symbols can be grouped together to tell thoughts and stories. For example, pictures representing general topics (such as, “Things I want to do today” and “Things I don’t want to do today”) are placed at the top of the board, and the person using the talking mat then places pictures or

images under the appropriate category.

Talking Mats (both the original version and the digital versions) can be purchased on the TalkingMats [website](#). There are also reports and resources available on the site about the efficacy of Talking Mats and other communication tools.

5. Narrative Social Stories: These small booklets were created to explain to people with low interpersonal skills (often individuals on the autism spectrum) how to behave in a certain situation or how and why to change a particular behavior that is undesirable. The stories can set the stage for how a person should respond when faced with an unfamiliar or stressful situation. An example of a social story might provide step-by-step actions that explain how a child should interact with other students during recess.

Check out [this video](#) to learn more. This [website from the Watson Institute](#) also has examples of narrative social stories that can be adapted for individual use.

6. Five Finger Story Retell: This tool is used to serve as a reminder for students to guide story telling. A hand is created out of paper or cardboard, with each finger representing a question that should be answered in the story. Examples of questions that may be included on the fingers include: Who was the story about? Where did the story take place? What happened at the beginning of the story? What happened in the middle of the story? What happened at the end of the story?

This [website](#) from the University of Pittsburgh has more information about five finger story retells. This [website](#) from Reading Mentors is another great resource.

7. Joint Action (or Activity) Routine: This process encourages children with language difficulties to communicate in the context of a known routine. The [TEACCH Autism Program website](#) defines joint activity routines as a “routine in which the child and the adult engage in a meaningful activity together and communicative behaviors are taught within the routine of the activity.”

An example (also from the TEACCH Autism Program website) of a joint action routine for making juice may be implemented as follows:

“This routine is built on a meaningful and motivating activity--snack! Practice steps daily over several days, using the same materials and sequence and allowing/guiding the child to actively participate.

Visual supports include the needed materials (juice mix, pitcher, spoon, etc.) and a picture array on a display board for 1 or more of the same objects/actions of the routine. If the child can only do 1 step of the activity, then only 1 picture would be displayed.

The adult uses simple language for each step, paired with the objects and pictures. When the routine is well established, disrupt it by leaving out a needed material or pausing and waiting for the child to act (verbally, with the pictures, or with the objects). This format is useful for multiple step routines.”

Joint action routines encourage communication, social skills, and cooperation between a child with a communication difficulty and his or her parent, teacher or caregiver.

8. Name Tags: Name tags can be helpful tools for people with communication difficulties to use to help spur conversation. Pictures and symbols can be added to the name tag to show what the person wearing it likes and dislikes. These pictures can serve as conversation starters to help people communicate with someone who cannot use their natural speech.

Similar to name tags, color communication badges worn on a shirt can also be used by people with communication difficulties to show if they are interested in communicating. A green badge signifies that they are looking for a communication partner, a yellow badge signifies that they only want to communicate with someone they know, and a red badge shows that they are not interested in communicating at the moment. More information about this resource can be found on this website.

To see more in-depth descriptions of each of these techniques, check out this [pamphlet](#).

ADAPTING AAC IN GHANA'S SCHOOLS **By Cate Crowley, Columbia University, New York, NY, USA**

Editor's Note: *One of the most practical and effective efforts to introduce and adapt augmentative communication tools and strategies to the cultural and economic realities of an emerging nation is taking place in the schools for children with special needs in Ghana. Supported by regular visits from teams of Columbia University faculty and graduate students over the past several years, teachers from these schools have gathered together in Ghana for an annual AAC weekend retreat.*

By introducing practical, inexpensive and culturally appropriate classroom activities, and then periodically reinforcing them, the Columbia teams have helped to make these activities a regional and meaningful part of the school day in unit school classrooms across the country. The article that follows updates this important story--- elements of which we have covered in previous issues of this newsletter. [Click here](#) to read past issues.

In January 2014, another team of speech-language pathology graduate students, led by Dr. Cate Crowley of Teachers College Columbia University, journeyed for the eighth time to Ghana. Check out [this video](#) of their trip.

Their ongoing involvement with the “Unit Schools” is one important aspect of their work there. Unit Schools are schools for students with intellectual disabilities and autism. Over the years, in collaboration with the Unit School teachers and the Central Coast Children’s Foundation (CCCF), the TC team has worked to introduce AAC in ways that are functional and effective.

One of the first AAC approaches, AAC market cards, was developed six years ago in collaboration with Belinda Bukari, one of the Unit School teachers. The parents of Belinda’s students said that they wanted their children to go to the local outdoor market to buy food for their families—a traditional activity for a Ghanaian child. AAC market cards show drawn pictures of individual foods available in the market. Three different cards are available for the three different quantities available. Parents give their children a “shopping list”, with index cards showing what they want and how much they want to spend that day. Then the students go to the market with the cards and do the shopping.

Clement Ntim, an outstanding teacher in the Nkawkaw Unit School, visited Scotland in October 2012 for a month of work experience learning from AAC experts. Clement returned to Ghana and immediately implemented the use of [Talking Mats](#) in his classroom.

Belinda and Clement have shared the AAC market cards and the communication mats with their colleagues. They presented these strategies at the 2014 Professional Development Retreats for 45 Unit School teachers, administrators of Ghana's Ministry of Education Division of Special Education, and other special and general education teachers. Over the years, these AAC strategies and several others have been introduced to the students of the Unit Schools and the students are using them in their daily lives throughout Ghana. [Click here](#) for more information.

The use of these AAC approaches, adapted so they are functional in Africa, continues to spread. With support from Teachers College Columbia University, CCCF, and the Wyncote Foundation, four of the Unit School teachers, along with Cate Crowley, attended the Fifth Annual East African Disabilities conference in Mombasa, Kenya. Belinda, Clement, and Cate spoke at the conference. The response by the East African conference attendees to Belinda and Clement's talk on their work in Ghana was simply overwhelming. Because the Ghanaian teachers adapted these AAC systems, the very challenging task of adapting AAC approaches for Africa was done in culturally responsive ways, without the need for expensive materials or software programs.

Prior to visiting Mombasa, Cate Crowley sent the video tutorials on the AAC market cards and Narrative Stories to several conference participants. They confirmed that the AAC approaches would be useful in many communities where the conference participants worked—in Kenya, Tanzania, Ethiopia, and Uganda. So while in Mombasa, Cate recorded the video tutorials in various East African languages, which have been dubbed and are now available on YouTube, [here](#) and [here](#).

The Ghanaian teachers and the Teachers College team are currently developing video tutorials on Communication Passports and Joint Action Routines for a vocational workshop on making bags out of beautiful Ghanaian fabrics. Check out a [video here](#).

The Teachers College Speech-Language Pathology group returns to Ghana in January 2015. They will be conducting another professional development retreat and AAC will continue to be the main focus.

AAC is alive and well all over Ghana, and because of the commitment of the Unit School teachers, AAC is making a difference for Ghanaian people with communication disabilities.

Another Giant Step for AAC in Ghana

By Justin Streight, Central Coast Children's Foundation

Catherine Crowley, Senior Lecturer in Speech and Language Pathology (SLP) at Teachers College, Columbia University, New York, is Director of the Ghana Project. Also traveling to Ghana in January were Miriam Baigorri, Clinical Director, Pamela Andres, Clinical Supervisor and 18 SLP Masters students. Each year for the past 5 years, the Teachers College group have gone to Ghana to provide free services for children and adults with communication disorders and to provide professional development for their Ghanaian colleagues. When in Ghana, the group works with teachers of students with intellectual disabilities in Nkawkaw and Effiduasi. They also work with a cleft palate team of

doctors and nurses at Komfo Anokye Teaching Hospital and Korla Ben Hospital. In January, 2012, they brought along a videographer. Some of the major events during the 2 week visit included:

- An AAC retreat (residential course) for Ghanaian special education teachers from 23 special needs schools
- Hospital visits
- Co-teaching with a Ghanaian teacher in a special education Unit School in Effiduasi.
- A visit to a local market to observe the successful use of AAC market cards, introduced by the students on a previous visit.
- A graduate student blog detailing experiences on the trip.

The AAC retreat

Clement Ntim from Nkawkaw and Belinda Bukari from Effiduasi are the principals of two of Ghana's Unit schools. They organised a Study Day on the uses of AAC in the classroom, which was attended by 54 Ghanaian special education teachers from 23 special needs schools and the students and faculty from Teachers College.

Ntim began the day, focusing on teaching about the uses and purposes of Communication Passports. Participants noted his obvious enthusiasm when he talked about the positive effects of personal communication passports on people's lives. Before the course, every teacher was asked to choose one person who would benefit from having their own communication passport. Ghanaian teachers and the graduate students from Teachers College worked together to develop these model passports. The teacher pictured below is sharing the Communication Passport she made. You can view the video [here](#).

The teachers who attended were full of enthusiasm and eager to apply their new knowledge. They each received a certificate of accomplishment and a bag of educational resources to take back to their own schools. For more information about communication passports, [click here](#).



*AAC Professional Development Retreat at Nkawkaw, Ghana
January 7, 2012*

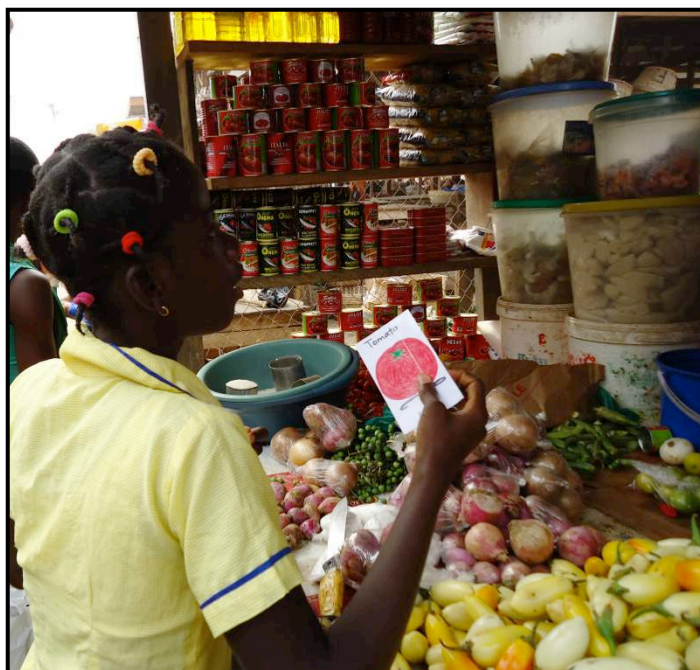
During the retreat Belinda Bukari also introduced *Name Tags* and *AAC Market Cards*. Everyone worked together and learned how to make these materials for their students.

Special Education Unit School in Effiduasi.

The Teachers College students and faculty also went to Belinda Bukari's school in Effiduasi. They co-taught with Bukari and accompanied her and her students to the market to shop. As shown in the picture below, Bukari and her students know how to put market cards to good use.

A Communication Book

Another highlight for the students was when the students met a man who had lost the ability to speak as the result of a stroke two years ago. Although he could understand and use gestures, he still experienced communication as very difficult. The man and his brother greatly appreciated a personalised communication booklet the students made. It had ways to talk about football, his favourite food and other personal interests. Initially the students were not sure if a booklet would be enough to satisfy the man and his family. They were very pleased, however, to see the two brothers smiling and enjoying the content together.



For more information about the Teachers College project in Ghana, [click here](#).

Congratulations to Catherine Crawley and Miriam Baigorri

As shown below, Cate and Miriam received the Humanitarian Award from the National Council of Ghanaian Association in recognition of their work in Ghana on behalf of people with communication challenges.



GHANA PRINCIPAL INTRODUCES AAC IN SPECIAL NEEDS CLASSROOM

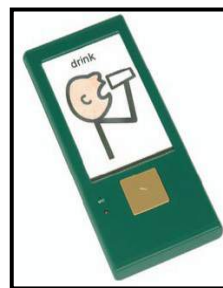
By Justin Streight

Central Coast Children's Foundation

Clement Ntim, the principal of Nkawkaw Unit School, has taken the lead in implementing a number of AAC tools and techniques in a special needs classroom in Ghana. His successes, his failures, *and* the lessons he says he has learned, teach us about using augmentative communication materials appropriately in a low-resource environment.

Working with AAC tools was particularly effective. It struck at the heart of the lingering beliefs in Ghana (and around the world) that people with disabilities have little value to society and are second-class citizens. AAC tools provide a gateway to acceptance, participation, and achievement. These students helped their families by doing the shopping. The students, teachers, shopkeepers and parents were all pleased with their efforts.

Ntim also described several classroom strategies he uses based on the equipment and materials donated to his unit school.



Talking Photo Album (TPA). Ntim uses TPAs to have students make messages with coordinated pictures, then get into pairs or small groups and have teacher guided discussions. The TPA is exactly what it sounds like: a photo album with the ability to record and play back short messages about 26 different pictures or items placed in 24 plastic sleeves. Students can practice communication skills, locate old messages, update events that occur. This makes the TPA both a learning aid in the classroom and a communication tool in the real world.

Buddy Board Communication System. The Buddy Board is another AAC tool Ntim uses both in and out of the classroom. It has a QWERTY keyboard on the front and a list of common phrases on the back. If someone wants to communicate they can do so by pointing to the appropriate letters and phrases. Since the board relies on literacy, it became an opportunity to teach spelling in a practical way by aiding symbol:sound associations. Students learned to spell simple words by pointing to letters and manipulating the board. In a few cases, Clement gave some basic pointers to parents so that the students could use the Buddy Boards in the home.

There were two complications. The first was literacy; if a student cannot spell the device is not useful as a communication system. Ntim made that an opportunity, by using it to motivate students to work on sound-symbol relationships and simple spelling. The second problem involved the CDs that came with the board. The nearest computer is miles away from the classroom, in an Internet café. The CDs were only useful to teachers and parents willing to take a field trip.

Go Talk One. The Go Talk One is another example of a low-tech assistive technology device that Ntim used to teach letters and pronunciation. It is a single message recorder with a display area for a picture and a large play button. In the classroom, students were able to record their own pronunciations, listen, and practice from there. The students were eager to use their favorite pictures. The biggest drawback was the students would have trouble deciding on what picture to use in group exercises. In those situations, Clement was forced to use a “default” picture.



Attainment Talker 24. According to Ntim, the Attainment Talker 24, which records up to 24 messages and allows for symbols, was less successful because it is proved too sophisticated for local conditions. The problem was that children quickly used up the batteries and replacements were hard to come by.

Books, instruction guides, and web materials. Print materials are of great importance. These resources enable unit school teachers to continue their self-training. Specifically, teachers found many donated books helpful. One focused on how to feed a child with cerebral palsy; another, *Developing and Using a Communication Book* helped guide teachers to improve speech and communication skills. *Communication without Speech* explained new AAC teaching and learning practices. It is important to remember the importance of these key resources in a world flooded with electronic information.

In summary, Ntim reports significant improvements in students’ speech, language and communication skills, fine motor skills, functional arithmetic skills, social skills, daily living skills, and functional reading skills, with the help of these materials.

Bringing AAC to Ethiopia

By Stephanie Harris

Central Coast Children’s Foundation

In January, 2015, Dr. Cate Crowley brought eight speech-language pathology masters students at Teachers College Columbia University to Ethiopia to learn about transcultural work, to build relationships and to work with people with communication disorders.

In an 11 day trip to Ethiopia, Dr. Cate Crowley and her team brought the techniques and tools for communication enhancement to four locations and showed how these skills can be used to better the lives of those who are autistic, disabled, or have a cleft palate.

Location 1. Nehemiah Autism Center in Addis Ababa

At Nehemiah Autism Center the team taught local teachers how to use some fundamental AAC tools and techniques. They helped create:

- **Calendars**
- **A song** in Amharic for the days of the week with hand clapping and repetition.

- Translated 70 **weather cards** into Amharic
- Showed how to teach literacy and math through **name tags**



The staff they worked with were eager to learn and in their second visit a few days later there was evidence of the tools they created having been used in the classroom.

“We could see the value of our field—the school had so much in place but was missing the speech-language piece—and we fit in like the one missing piece of the puzzle”¹

Location 2: The Ethiopian National Association on Intellectual Disabilities (ENAID)

This location was a vocational training program for adults with intellectual disabilities. The students receive vocational training but very little training in communication.

“We saw this as a perfect opportunity to help facilitate functional communication with low tech AAC (Augmentative and Alternative Communication)!” (who said this quote?)



The team decided to create a modified **market card** to help the students communicate and sell the beautiful products that they created. The students enthusiastically dove into creating their cards and through a mock market training session, became adept at their use. The proof of this was in the team

¹ Cate Crowley, <https://slptcethiopia2015.wordpress.com/author/tcethiopia2015/page/2/>

members leaving the ENAID with scarfs, dishtowels, and other products proactively sold to them by the students. To view a video of the “Sellers’ Market Cards, please click [here](#).

Location 3: Yekatit Hospital

The team spent a total of five days at Yekatit Hospital for cleft palate training. Besides attending lectures and observing surgeries, they conducted examinations and therapy sessions. After initial examinations they realized that many of the patients would need Speech-Language treatment services after their surgeries.



The team also **created video tutorials** with two of Ethiopia’s finest SLPs. These SLPs discussed how a variety of speech sounds are impacted by cleft palate, in simple, easy to understand language.



“During stimulability testing, the students all reveled in watching patients’ faces light up in pride and amazement, as they listened to themselves produce certain sounds for the first time. Truly heartwarming and fulfilling, one reason we do what we do!” (who said this quote?)

Location 4: Joy Autism Center, part of the NIA foundation and the first school for children with autism in Ethiopia.

The last stop in the trip was the Joy Autism Center.

Although there were no designated speech therapists in the staff, the school was very proactive and the team was “particularly struck by the integration of communication into all of the activities”. Here the team focused on training the staff on **Stories for Effective Communication** and the staff enthusiastically embraced the technique and expressed interest in using it in the classroom.

Teaching and Learning in a Uganda Pre-school *By Katie Lampe, Central Coast Children’s Foundation*

In January 2015, I headed out from California to a pre-school in Uganda with a suitcase full of learning materials that I hoped would fit the needs of the children and their teachers. Along the way I learned some useful lessons- about the entry points of the teachers, the appropriateness of certain basic educational technologies, and the barriers that might interfere with the smooth transfer of educational ideas from urban America to rural Africa. I got a warm and enthusiastic reception from folks I had already met on a visit in the summer of 2014, when I had spent three



weeks volunteering with a local NGO, African Community Team Support, in Mbale, Uganda. This time, I brought a variety of educational and school supplies purchased with the help of the California foundation that I work for.

All of the items, with the exception of a solar charger that we purchased locally, were things we thought would be difficult or impossible to find in Uganda. We were fairly confident that some items would be immediately useful, while others were on a trial run.

Would rural schoolteachers, who did not own a computer and may have no electricity in their homes, be able to effectively incorporate into their classroom the story telling abilities of a Kindle loaded with children's stories? Would locally available solar chargers for cell phones, tablets and lights support real needs of the school and its teachers? Would having one at school spark an interest in others in owning solar chargers? How much would they be willing to pay for them? My visit provided a sliver of information of what Nathan Muzewera, the director of African Community Team Support (ACTS), thought would be useful for his organization and community.

Books: I had discovered from my July visit that children's books were virtually non-existent in preschool and primary schools and were not readily available in town. I purchased around 30 children's books, many of which featured African characters and all of which I deemed to be culturally suitable (stories about American bed time routines would be foreign to children in Uganda, who have quite different rituals).

While I am certain that the books will be put to use, I am not certain how much the children will be allowed to interact with them. Because they were intended for preschoolers, most of the books I purchased were board books, with heavy cardboard pages. Still, in an area where books are fairly rare, I am curious if the teachers will be so concerned that the children will "ruin" the books that they will keep them locked away when not being read by a teacher. We'll find out...

Kindles: We purchased three Kindles that I distributed to three different preschools. I loaded about fifty children's books (ranging from simple picture books to elementary school chapter books like the Magic Tree House series) onto each Kindle, plus about ten books intended for adults to read. Two of the schools that received the Kindles are in very rural areas and one is in a village just outside of Mbale.



While our initial focus was on providing more reading materials for preschoolers (numerous books and studies have demonstrated how exposure to more words as a young child leads to improved learning outcomes later in life), it became quickly evident to me that the Kindles could prove to be a useful tool for the entire community.

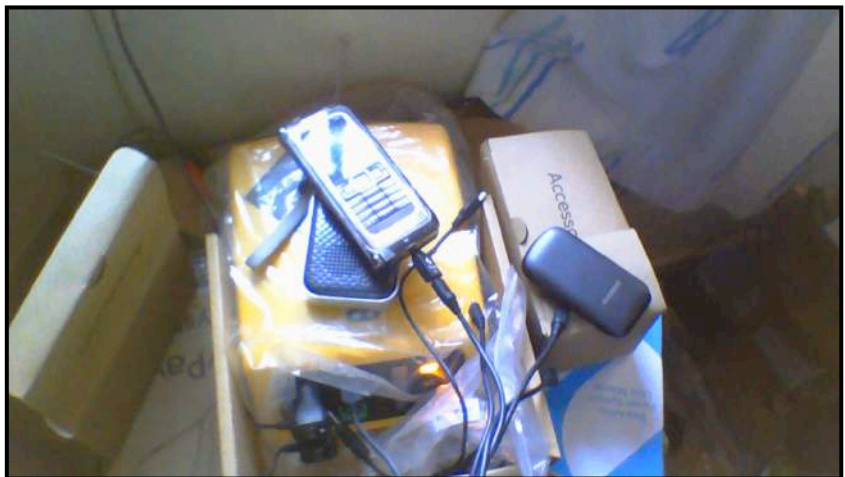
Everyone, from the children to the teenagers, to the young adults, to the elderly population, was fascinated with the Kindles. In a country, that, as Nathan put it, "does not have a culture

of reading,” the Kindles have the possibility to introduce whole communities to a wealth of literature. Children could read stories out loud to their younger siblings or to their parents, who may not be literate. Teachers could use the Kindles to access educational material. Secondary school students could load books onto them that they need to read for school.

Though the Kindles seem like (and in many ways are), the perfect way to promote literacy in areas with limited access to books, there are a few practical considerations that should be kept in mind.

- 1.) Kindles need to be *charged*. While they have a long battery life compared to a computer or tablet, eventually they need to be charged. In areas with limited access to electricity, solar chargers may be an effective solution for this.
- 2.) Kindles need to be linked to an *Amazon account* to purchase additional books. While books can be preloaded onto the Kindle and accessed offline, purchasing additional books requires an Internet connection and access to an Amazon account, and thus a credit card or bank account. Many of the people who would benefit most from the technology from a Kindle are the same ones who work in the informal economy and have no bank account. Gift cards can be purchased to buy Kindle books, but that ultimately is probably not a sustainable solution.
- 3.) Teachers will need *training*. While Kindles are fairly intuitive compared to many kinds of modern technology, teachers who have never used a computer will likely need at least some basic training before being able to use a Kindle. Additionally, since children’s books are currently not readily available in Uganda, teachers may likely need training about how to incorporate reading and story time into their lesson plans.

Solar Charger: Before heading to Uganda, I found an American company, Fenix International, which manufactures affordable solar chargers that can be used to power lights and radios (and in some cases televisions) and charge cell phones. While solar chargers are not a new invention, they have developed “Ready Pay” technology that allows a customer to “pay as you go”. Fenix currently distributes in Uganda and Tanzania.



After an initial down payment of \$16-\$64 (depending on the model), a customer can choose to pay on a daily, weekly, or monthly basis. The payments are made through MTN’s mobile money payment system, which is already widely used throughout Africa. Payments can be made even with a basic phone (internet is not necessary), and can be made as often or infrequently as a family can afford. If they are not able to make a payment one week, their solar charger will shut off, but it will turn on again as soon as their next payment is made. This flexibility enables people to slowly pay for a product that they would be unable to purchase if they had to pay the full price all at once.

Additionally, many Ready Pay customers are even making their solar chargers profitable. Mobile phones are prevalent throughout Africa, Uganda included, but access to electricity is much more sporadic. Because most solar charger models can charge several cell phones at once (one of the most powerful models can charge 15 phones in one day), people who live in rural areas with little access to electricity can ask their neighbors to pay a small amount of money to charge their cell phones via their solar charger. The only other option is often a long and more costly trip to the nearest charging station.

We provided Nathan, the director of ACTS, with a solar charger, both to use to run his NGO and as a test for us as to how well the product worked. He did not know about the product before I introduced him to it, but was thrilled to discover its potential.

Power is very sporadic in Uganda. Nathan's house is hooked up to the grid and theoretically should have power each time he flips the switch in his house. But unfortunately that's not what happens in reality. Power outages are an almost daily occurrence, and may last from a few minutes, to a few hours, to most of the day. Or, sometimes a transformer blows and it takes the electric company nearly a month to fix it.

When the power is out, the household has to function with the light of a few candles; bathing, cooking, and homework must all be done by candlelight. And Nathan's family is one of the fortunate ones that have access to electricity at all. According to the World Bank, only 14.6% of the population of Uganda had access to electricity in 2010. Many of these families rely on kerosene lanterns for light (which can be both expensive and dangerous) and could benefit greatly from a solar charger.

Tablet: People in developing countries are not exempt from the desire for the latest and greatest technology. A World Bank article discussed how tablets are becoming incredibly popular in classrooms in the developing world, even among young children.

Nathan was elated to receive a tablet to help him run his NGO. We originally had thought that the tablet might be useful in some of the preschools that ACTS has started and we had loaded it with numerous educational apps. However, it soon became clear that that would not be the best use for it. Nathan did not trust young children to properly care for the tablet and thought it would be broken in no time if he let the students use it. Instead, the tablet will be useful for Nathan to document the work his NGO is doing for grant reporting purposes (there is a built in camera and video recorder) and to communicate effectively via Skype and email. Perhaps in the future when the teachers and community have become more comfortable with technology, tablets can successfully be incorporated into preschool classrooms.

Crank powered flashlight/radio: A last minute addition to my suitcase, this turned out to be a big hit. It is manufactured to be used in emergencies where there is no power, and the light and radio both can be operated by cranking the device for a few minutes. It even can charge a cell phone- though I think one's hand would fall off from cranking before a cell phone was



fully charged. It's intended to allow someone to charge their phone just enough to make an emergency call. These devices are relatively cheap and if they were available locally (they might be, but I did not see any myself), have the potential to be extremely useful for families with no access to electricity. A few minutes of cranking would allow a family to listen to the radio or provide light for a student to work on their homework. Others models are available with *both* solar and cranking charger capacities, and we will be experimenting with their use in other African countries in the near future.

What have we learned?

We will learn more as we get feedback from the teachers who are now using the materials I brought. Of all the donations that we brought to or supported in Uganda, I suspect that solar chargers have the potential to make the biggest impact. Solar chargers have the possibility to bring power to millions of families currently off the grid. Children could do homework after the sun goes down, shop owners could stay open longer and teachers could charge the Kindles they will use to share stories with their classes.

And it is not just in Uganda that these things are available. Throughout the developing world, innovations are becoming available to connect people, enable learning, and make life easier. In Kenya, school children can do their homework by the light of a lantern that runs off of a small solar panel on their backpacks that charges on their walk to and from school. In Uganda, Kenya and Tanzania, affordable solar panels are available that can be installed on one's house to meet the household's energy needs, and some of these, too, can be paid off slowly with funds that would otherwise go to the IPC (Intermittent Power Company).

Experts bemoan the technology gaps that exist between rich and poor, and between developed and developing economies. But despite this gap, there is a significant lack of current research or development about the kinds of educational technology that can be realistically adapted to the economic and cultural conditions in a developing country. There is a growing literature about what scholars call "appropriate technology" in poor countries, but little or none about appropriate *educational* technology. (One of the top "hits" on this topic on Google is an article from 1985, before I was even born.) This suggests that there is still tons to learn about this topic and especially, how to most effectively incorporate technology into classrooms in the developing world.

Most of the most useful educational technology tools available in a country like Finland may not be available for decades to the kids in a village school in Uganda, and they may never be truly appropriate to the schools of sub-Saharan Africa. Paul Polack, a psychiatrist by training who, throughout his life, has been inventing devices for poor people to use, explains that the products he makes, "must be so cheap and effective that the poor will actually buy them, since charity disappears when donors find new causes."

As Smith and Winthrop write in an article for the Brookings Institute, "The strategy for [using educational technology] need not emulate the trajectory of educational technology use in wealthier developed nations. Indeed, in some of the most remote regions of the globe, mobile phones and other forms of technology are being used in ways barely envisioned in the United States or Europe." For example, girls in Pakistan are using cell phones to text their teachers to receive lessons when school is out due to conflict.

Technology use in the developing world raises a variety of questions that are irrelevant in many parts of the developed world. How will devices be charged? Are the teachers trained to use them? Is someone qualified to fix the devices when they break (and are the parts available for the repairs)? Is a particular technological device the best method of achieving the educational goal it is supposed to be addressing, or might the money be better spent on something like additional teachers (and thus smaller classrooms), higher teacher salaries (and presumably lower absenteeism rates) or separate toilets for girls (so that they don't drop out when they reach puberty)?

It's no big surprise that the fancy "one kid, one computer" schemes marketed to developing countries over the past decade have fizzled and sunk from the weight of their own inadequacies and grandiosities. Numerous articles (like this, this and this) have cited the less than stellar performance of initiatives like these, including the much-ballyhooed One Laptop Per Child project. Instead, smaller, cheaper and more relevant educational technologies that could be made available, in ways that fit the local economies, educational systems and culture, might be able to make both a more immediate and more lasting contribution to the teaching and learning process that currently exists in places like Mbale, Uganda.

And, we must not forget that technology alone, if not complemented with a supportive learning environment, is unlikely to have a significant effect on learning outcomes. As Francisco Mejia, the principle evaluation economist at the Inter-American Development Bank (the organization that studied One Laptop Per Child and produced a report showing virtually no learning gains) explained, "the evidence shows that computers by themselves have no effect on learning and what really matters is the institutional environment that makes learning possible: the family, the teacher, the classroom, your peers."



Report from Ghana on a 2011 Visit to South Africa

Belinda Bukari

(Belinda Bukari serves as Principal and Teacher in a school for children with special needs in Ghana, and was the first Ghana educator to introduce AAC into the Ghanaian special needs system.)

Augmentative and Alternative Communication has barely started in Ghana. After the Central Coast Children's Foundation (CCCF) granted me their Scientific Study Travel Fellowship Award, I had the opportunity to attend the ISAAC Conference last year in Barcelona. I then put my new AAC knowledge into practice as soon as I returned home.

In December last year, all the unit school teachers for special needs children received AAC training. This included the ways in which teachers could use AAC in handling pupils with communication difficulties. There were demonstrations of various assistive devices and materials that teachers might apply in their classroom teaching in order to augment their students' speech.

This year, I was given an opportunity to spend a week as a Teacher-in-Residence at a school in South Africa (Pathways - Pretoria), which provides intensive stimulation for pupils with severe disabilities. I also attended the 2nd Regional African AAC Conference, which took place in Boksberg, South Africa, where I presented a paper ("Bringing AAC into the Classroom in Ghana"), again under the sponsorship of CCCF.

I gained a lot of experience from the Pathways teachers, pupils and the facilitators. Pathways has a unique curriculum. This includes communication that entails "12 Jiffy Rules" when working with children with severe disabilities. These rules were very special to me, because they say that one must make sure that the child has some way to communicate: speech, visual displays, communication boards, gestures and/or voice output. The rules also recommend the encouragement of eye contact during communication, giving each child an opportunity to participate, and ways to draw them into activities, choice making, and opportunities to learn. I also saw classroom schedules that consisted of daily plans along with schedule analysis and organization of themes - all taught through visualization.

Communication with pupils at Pathways is multimodal and is accomplished through speaking and vocalization, gestures, objects, pictures, photos and line drawings and the use of a voice output system or communication device. When pupils at Pathways are 18 years old, they are sent to the Pathways Studios, where they are taught employable skills. I had the opportunity to spend a day with five young adults. I visited their work places and found that they were managing very well at their posts.

The main conference also featured many new ideas regarding how people are using AAC in their schools and organizations. Most of the sessions that I attended were on Education and Empowerment, since these topics are most appropriate for my situation.

My presentation on "Bringing AAC into the Classroom" interested a lot of people. The key topics of my presentation related to the AAC training of all unit school teachers in Ghana, parental education on the use of AAC, the practical steps we are taking to introduce AAC to the universities and other stakeholders, the marketing of AAC cards and curriculum name labels that we currently use, and an explanation of our use of the Basic Communication Package developed in South Africa. ISAAC President Erna Alant pledged her support in donating AAC materials to our school.

I also attended a research seminar with the theme "Ethical Consideration in Research with People with

Disabilities.” Researchers presented papers on Ethics and Communication, Considering Risks and Benefits for people with Disabilities and many other interesting topics.

The conference and my Pathways residential experience have equipped me with many new ideas, and I will use any opportunity I get to educate teachers, parents or anybody who needs to understand how AAC can be utilized. I hope also to spread the concept further now that I am enrolled in a new graduate program: Disability, Rehabilitation and Development. Ghana still has a long way to go in the field of AAC and I urge everyone to find a way to help us to spread our message. Ghana and I are grateful for the support that CCCF has provided to this end.

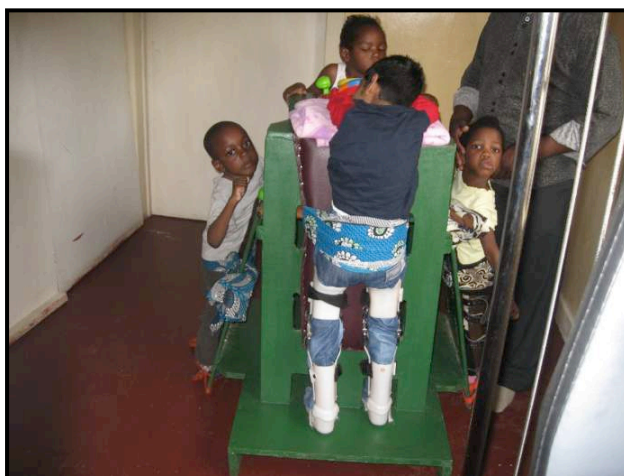
Belinda Bukari. belindabukari@yahoo.com

Malawi Update: Victor Musowa Makes Progress in a Number of Exciting Directions

by Katie Lampe, Central Coast Children's Foundation

The Blantyre School and Clinic is the only one of its kind in the region. The school offers services to students such as physiotherapy, speech therapy and occupational therapy. Breakfast, lunch and a snack are provided to all students, thanks to a grant that funded a school feeding program (read about the benefits of school feeding programs [here](#)).

Recent funding has also allowed them to buy wheelchairs for some of the older children and special chairs for others (as noted in the following article). Victor has also been able to purchase therapy equipment like splints and walking frames.



There was lots of good news from Victor over the past year. One exciting development is that the school recently enrolled its 50th student. Especially impressive is the fact that the three latest additions were babies--one with Down syndrome and two with cerebral palsy. It is extremely uncommon for children this young to go to school in Malawi, even if they don't have disabling conditions. Beginning therapy at such a young age should have profoundly positive affects for these children.

Victor has also decided to open the school on the weekends for the growing number of children who are on the waiting list. He has hired another rehabilitation technician to coordinate the weekend activities.

Because of space limitations, the school cannot currently accept the more than 60 children on their waiting list. However, Victor recently talked to the Blantyre City Council, whose members expressed an interest in helping to build a new, bigger school that could serve the needs of the many children with disabilities in the area who currently spend their days on the streets, begging for money.

Another piece of good news is that Victor's school has received a grant from the American Embassy.

The grant funded the construction of a playground at the school by [Sakaramenta](#), a Malawian social enterprise that makes bikes, bicycle ambulances, and playground, school and hospital equipment. You can see the students enjoying their new playground in [this video](#). Victor is currently working on adding an adaptive swing to the playground.

Victor's school also has had lots of visitors in the past few months. The NGO Mary's Meals came to learn about their feeding program. Mary's Meals hopes to use a similar model in other feeding programs in Malawi. Also, students and audiologists from Arizona State University ran a two-day clinic at the school and gave hearing aids to 67 people.



In other news, Victor was recently elected to Malawi's Parliament. He is excited to be able to use his influence to advocate for children with special needs in Malawi, while also continuing to play an integral part in running the school. Victor would like to pass along his sincere thanks to everyone who has donated to help make his program a success:

"Special thanks to those who are giving for the first time, thanks so much, it is because of you and all friends we are able to provide decent meals to kids with special needs who come to the school."

- Victor Musowa

12 Chairs Project, Malawi

By Katie Lampe, Central Coast Children's Foundation

Until recently, students with disabilities at the Blantyre School and Clinic, who benefit from adaptive seating at school, were not able to see the world from an upright vantage point once they left school and returned home. Many of the children come from impoverished families who cannot afford the therapy equipment that the children need. As a result, children often spend their time at home lying on the floor, disconnected from family life. But, thanks to recent funding from an American foundation, this is all about to change.

In our December 2013 newsletter, we wrote about Victor Musowa, a rehabilitation technician in Malawi who started the Blantyre School and Clinic for children with disabilities. The school recently received funding to send 12 therapy chairs to the homes of children who require adaptive seating support at school. The chairs, constructed from local materials by a local carpenter, allow children to sit upright, making it easier for them to swallow when eating, and making it possible for them to share in family life.

Twelve children, ten of whom are preschoolers, were selected to receive the chairs. The children will now be able to sit up and more readily interact with family members. Victor's school and its adaptive chairs were recently featured on a local television station, and since then the demand both for a place in his school and for therapy chairs has skyrocketed.

Victor recounted a story about a mother who hiked for five hours to bring her daughter to the Blantyre clinic. The girl was very upset when she arrived at the school, and Victor asked if the girl had had anything to eat that morning. The mother became very frustrated and replied that the girl has a hard time swallowing food and often choked when being fed. Victor put the girl in a therapy chair with a harness and she was immediately able to eat without choking. Victor gave the mother the chair to take home. Thanks to the new funding, more children will be able to benefit from these therapy chairs in their homes as well as at school.

School Feeding Programs for the “Neediest” School Children in Developing Countries: Do they Ignore Children with Disabilities?

Charlotte Carr, Central Coast Children’s Foundation

[Editor’s Note: Through her research, Charlotte Carr discovered that although issues related to malnutrition were being addressed in many school feeding programs in African countries, these programs often did not include any children with special needs and functional challenges.

She noted that attitudes about people with disabilities are beginning to change. More children with disabilities are being enrolled in schools today. Carr cites the stories of two schools and two Victors, who have never met. One school is in Tanzania and the other is in Malawi. Victor Kasembe is the lead teacher at the Secei Elementary School for Children with Special Needs in Tanzania; Victor Musowa is the Founder of The Rehab Clinic and Education Centre in Malawi.

Recognizing that many students were undernourished or malnourished, both men worked to implement a school feeding program with support from organizations in Canada and the United States. The results are remarkable. Student who have attended are doing better in school and more families are hoping to enroll their children. Charlotte Carr is planning to take the results of her research to advocate for more attention to school feeding programs for children with disabilities in poor areas around the world.]

School feeding programs that target the most undernourished and underfed children in developing countries too often bypass hungry and malnourished children with special needs and functional challenges. How can this be?

Descriptions and discussions of school feeding programs in very poor countries consistently emphasize providing such programs to the “most vulnerable” children in a society. However, there is little to no emphasis on providing these programs to children with special needs. In many African countries, for example, children with special needs and functional challenges are only just beginning to go to school. Children who do not attend school are more likely to be malnourished. In fact, school feeding programs often result



in more children enrolling in school, and more children eating healthy food. For children with special needs, the benefits of school feeding programs can be far reaching.

The two main goals of school feeding programs are to provide children with access to (1) food and (2) schooling. School feeding programs have proven to be an effective way to achieve these goals. Children who are malnourished are impaired not just by hunger; malnutrition leads to mental and physical stunting. Malnutrition is different than hunger, in that while hunger is caused by a lack of food, malnutrition is caused not only by a lack of food, but by eating the wrong kinds of food. Malnutrition affects the overall health of a person, not only handicapping them, but by putting them at risk for other health issues. (1)

Currently, programs that connect malnutrition to disability are seeking only to prevent children from *becoming* disabled. This viewpoint looks at disability as a *consequence* of malnutrition, which, although true in many cases, ignores children who are born or acquire a disability. Disability can be a risk factor for malnutrition. (2) (3)

Malnutrition affects educational attainment and can cause children to perform poorly in school. The health status and nutrition level of children greatly influences how well they are able to learn. Children who are malnourished and hungry will not do as well as their well-nourished classmates. These children have lower levels of energy, shorter attention spans, and nutrient deficiencies, which can lead to physical and mental impairments. (4)

School feeding programs can reverse the harmful effects of malnutrition. Implementing school feeding programs in schools for children with special needs can benefit them in a number of ways. For example, the provision of free meals encourages many parents to send their children to school. Therefore, offering a free meal to children with special needs may encourage more parents to enroll these children in school. Healthy meals can help combat the negative effects of malnutrition and increase the child's capacity to learn. Being healthy and receiving an education can also have a strong positive effect on a child's ability to earn money in the future.

Another positive benefit for children with special needs and functional challenges is that school feeding programs promote inclusion in their communities. Not only are these children out of the house and in a supportive community setting, but community members can also interact more with them and gain a better understanding of them.

Examples of schools already implementing well-run and effective nutrition and feeding programs include the Rehab Clinic and Education Centre in Blantyre, Malawi, and the Secei Elementary School in Arusha, Tanzania. These schools are running feeding programs in communities that have next to no services available for children with special needs. These programs were established a few years ago and have wonderful and optimistic stories of success as a result of these interventions. These schools demonstrate how to implement effective programs and the tremendous benefits on the children who participate.



- Founder of The Rehab Clinic and Education Centre in Malawi, Victor Musowa cites their school feeding program as one of the great successes of his centre. Musowa says, “It started when we noticed that some of the children showed up at school and cried for hours, and some came with evident malnutrition ... due to no food in the household or because of feeding problems because of their disability.”

Musowa recognized that many children in the school were unable to fully participate in class because they were malnourished so he began the school feeding program to provide lunches for all the children at the center. He was able to keep program costs low, at only \$100 a year per child. The Rehabilitation Clinic and Education Centre currently has 47 children attending, with 42 children on the waiting list.

- Victor Kasembe, who for several years has conducted a school feeding program at the Secei Elementary School for children with special needs in Tanzania, expects the demand for enrolment in the school and his school feeding program to continue to increase. Currently there are 65 children enrolled, and Kasembe says, “The waiting list is almost double the number of the current kids. The number of these kids is expected to increase, as the behavior of alienating these kids is starting to fade away among the people, so the eagerness of educating them is expected to be high.”

These schools are examples of successful feeding programs. In addition to addressing the nutrition needs of children with disabilities, they are motivating families to send their children to school. The word has spread and now many more children want to enroll in these schools, but there is a lack of funding. With more funds, more children could be admitted, and more food could be provided. Initiatives like these need support. Currently, these schools are some of the only services for children with special needs in their countries. There are only a few organizations currently involved in trying to help.



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Building for Generations in Tanzania

by Cory Ybarra, Santa Cruz, California

Tanzania. "Give Us a Chance and See us Perform." These words were scribbled on a piece of paper hanging over the door of a small overcrowded classroom at Secei Elementary in **Tanzania**. All the students had special needs, ranging from severe involvement to simple learning disabilities. Other children, who were unable to even make it to the school site, received home visits from Victor and Tuzzie, the two teachers who taught parents ways to work with their children. The special needs classroom was threatened because the Secei Elementary School was overpopulated and they needed the space for "typical" students. The government had allotted the teachers of special needs students a piece of land, but they had to raise the money to build on it. Three years had passed with no donors in sight.

Building for Generations gave them that chance. We were able to raise money to build a three classroom block for students with special needs and an auditorium to serve the entire school. The Naurei Special Needs Unit now serves 70 children. Many are integrated into the regular elementary classrooms. Most importantly, they all have a place and a home that is theirs.

For more information about Building for Generations, visit www.buildingforgenerations.com or e-mail Cory Ybarra at coryybarra@aol.com

Yellow House in Kenya

by Bea Staley, Columbus, Ohio

Bea Staley has volunteered in Kenya since 2006. She is currently working on her doctoral degree in the School of Teaching & Learning at the Ohio State University. Both Bea and Mike Terry are ex-VSO volunteers who currently provide speech therapy services for Mombasa Children's Therapy Centre. Bea believes that blues are bluer and greens are greener in Mombasa and plans to move there for her dissertation research late next year.

This article provides an overview of speech language pathology (SLP) service in East Africa, as well as some perceived needs about augmentative and alternative communication (AAC). Both the strongest professional presence and most of my experiences are in Kenya and while I write about volunteer opportunities for SLPs, the information may extend to other health and education professionals.

Kenya's current population is around 38 million, and global disability estimates suggest around 10% might be disabled (WHO, 1989). According to United Nations only 3% of people with disabilities who live in poverty receive the rehabilitative care they need (Groce, 1999). Hartley (1998), extrapolating from her work in community based rehabilitation in Uganda, found that 98.8 million people in less developed countries have communication disorders and could potentially benefit from services. Volunteer SLP's can help meet the immediate needs of these people until longer-term solutions are found.

In Kenya over the past two years, an average of three therapists per annum has come to stay from two weeks to three or more months. Kenya currently has 10 qualified practicing SLPs so this is a significant increase in potential service provision.

Speech therapy is an emerging profession in much of Sub-Saharan Africa. There are some SLPs in Togo, Ghana, Zambia, Sierra Leone, Senegal and Nigeria. Kenya has a handful of permanent SLPs as well as a rotating number of long-term volunteers through Voluntary Services Overseas (VSO). Tanzania has two qualified practitioners and one is working in the field.

The only regional SLP training program is at MacAfee University in Uganda and its first cohort of students is scheduled to graduate in January 2012. The current challenge for VSO, the primary organizers of the program, is to lobby the Ugandan government to recognize the field and create positions for the new graduates.



Bea during a community assessment day in the Killifish district

Experience has shown that many parents are ill-educated about their child's ability to develop communication and frequently don't understand or believe that their child can understand language because he or she doesn't talk.

The District Education Assessment Resource Centers (EARC) act as a clearing house for Kenyan children with disabilities. Parents bring their child to the center for assessment (or the EARC staff goes out to communities) and a formal referral is made for an appropriate school program which the EARC

staff are expected to establish and support. Some children are kept home from school because they can't talk. Furthermore, children with mild disabilities who are not succeeding in school are said to be lazy or naughty. Children who do make it to an EARC have significant impairment and multiple areas of concern.

One of my personal goals in my work with both the EARCs and Mombasa Children's Therapy Center is to increase community awareness of disability and decrease the age at which children are referred. For example, the average age of first visit to Mombasa EARC today is 10 years old (based on the records of over 3000 children).

Helping Parents and Professionals accept AAC

Parents in Kenya, like everywhere, remain hopeful their child will start talking so when a professional suggests AAC they may feel let down. Mike noted that he finds it is hard to persuade people to 'take these things up and use them'. Mike implements AAC with children from 2 to 16 years and encourages parents to use gesture and communication books with relevant pictures. He estimates that half of the children he works with also have receptive language difficulties so he's used AAC to help them express themselves and build up an understanding of routines (e.g. go home, toilet) by emphasizing the link between picture (or object) and routine. He notes, however, that because of limited follow up, implementing AAC with children in his community is rarely successfully.

Also of note is that although SLPs in Kenya do not currently train on oral motor exercises, every speech therapy program run by an occupational therapist or a teacher predominantly focuses on oral activities. Despite research to the contrary, people continue to ask children to blow balls of paper across a table and report this as speech therapy. Unfortunately for the children of Kenya, the Kenyan Institute of Education once promoted 'speech kits' - a large wooden box that contained feathers, balloons and a mirror. These are constantly in demand. For practitioners who lack training, these speech kits seem to be comforting because they are tangible despite the fact that there is no relationship between oral motor activities and children learning to talk.

'Information on how to adapt your own computer for a disability would be helpful, as well as where to get accessories (e.g. adapted keyboards). Our stroke/ brain injury patients in high level jobs need some sort of computer assessment as part of the assessment for their return to work needs. There is currently no- one properly qualified to do this. Furthermore, we do not have any equipment to try people on. For example, we thought one client could probably benefit from a Lightwriter, but it would have been nice to try it and see if they liked it before they ordered it from overseas. On the low tech end, many EARCs and clinics could benefit from examples of low technology AAC including communications books, memory books, talking mats. Though there are problems getting hold of basic stuff like suitable Velcro for creating talking mats.



Emma Shah training occupational therapists

Technology development for developing countries is important but beyond the expertise of most practitioners. Several copies of Boardmaker are available in Kenya, but are underused. Mayer Johnson gave permission for distribution of limited sets of symbols to participants of the 2009 East African Speech Therapy conference. Participants could request a list of symbols needed but only one person (an SLP) has requested it. The intention was for caregivers and related service providers to make use of the resource.

Emma discussed issues surrounding the Servox (an electrolarynx) used by laryngectomy patients. She said that users are scared that robbers will approach them and will shoot them while they are reaching for their Servox in their pockets so they can speak. If they wear the device around their necks, they are concerned thieves will mistake it for a mobile phone and try to steal it. Also, the device and its batteries are expensive. Finally, people without electricity (most of the population) have to travel long distances and pay money to get someone to charge their device, often leaving it there and coming back another day.

Next steps. I implore members of the greater AAC community who are interested in working in East Africa to consider coming and establishing a regional plan for training, support and service provision in low tech AAC for rural communities and high tech AAC support and services for urban communities. The East African Speech Therapy conference in January 2012 is a good forum for this. To get involved, please consider the following.

- To volunteer at Makerere University, please contact them at speechuganda@yahoo.com.
- To volunteer in Kenya, please contact me at bea.staley@gmail.com. Plan to spend a minimum of 2 weeks at a site. Also, go to <http://bea-yellowhouse.blogspot.com> to get additional information. I am confident that Dorothy Mvoi (see picture below) and her team of educators at Mombasa Children's Therapy Centre will welcome volunteers to train parents and teachers as well as spend time in the clinic. Accommodation in Mombasa can be arranged with a family (own room) or at Mombasa Polytechnic (\$10 per night). Attend and present at conferences. Some upcoming events include:

- a. The Pan African Reading conference sponsored by the International Reading Association in Botswana July 2011 <http://6thpanafricanrfa.blogspot.com/>
- b. A hands-on workshops for educators about using AAC to support literacy.
- c. Fourth East African Speech Therapy conference in Kampala, Uganda January 2012. Please email Helen Barrett helen.sltuganda@yahoo.com for more information. South African Speech Language and Hearing Association (www.saslha.co.za)
- d. Volunteering with Voluntary Services Overseas (VSO). I highly recommend contacting VSO and volunteering. Canadian and American volunteers can contact them at [VSO](#) and [CUSO](#). Others should check their website for local recruiting information. VSO's positions are typically 'skill sharing' or training positions with the goal to create a sustainable impact once the volunteer has left the country. VSO volunteers receive housing, benefits and a monthly stipend as well as fantastic instruction on using participatory training methods.

Relevant Volunteer Opportunities: Yellow House Children's Services, Kenya

Please learn more about Yellow House Children's Services at the following link:
<http://www.yellowhousechildrens.org/people.html>

Above we mentioned Dorothy Mvoi (clinic director). Dorothy has the patience of a saint and a wealth of knowledge and experience working as a special educator. She has been working at the Educational Assessment Resource Centre (EARC) in Mombasa district for many, many years. Add to that the years she spent as a Head Teacher at an Elementary School. Dorothy spent two years working alongside a VSO speech therapist and currently sees children with speech and language delays at the EARC. The Mombasa Children's Therapy Centre is actually Dorothy's dream and vision and we hope it will thrive under her leadership.



Pioneering Preschool Education in Uganda

By Katie Lampe, Central Coast Children's Foundation



In the summer of 2014, I spent three weeks volunteering with the NGO African Community Support Teams (ACTS), in Mbale, Uganda. I found out about the organization through the website Workaway, an online platform that connects volunteers and travelers to volunteer opportunities around the world. My friend and I arrived in Uganda with only a vague idea of what we would be doing, but immediately upon meeting Nathan and Freddie, who run the organization, we were blown away by the work they are undertaking.

ACTS was started in 2009 to help the communities surrounding Mbale. Under the leadership of Dr. Nathan Muwereza (who grew up in a rural area outside of Mbale and recently moved back to the area after completing his Ph.D. in Germany) and Freddie, a DJ at Mbale's local radio station and somewhat of a celebrity in the area, the organization is thriving.

ACTS is currently working on several projects around Mbale. One of their main efforts focuses on providing preschool education to poor children in the area. As in many places around the world, the Ugandan government does not fund preschool education, so it is up to communities to build these programs. There are still very few in poor countries in sub-Saharan Africa.

While at university in Germany, Nathan secured a grant from Go Ahead to start an innovative program in the village where he grew up. He hired local community members who have some secondary education, but no formal teacher training, to serve as the preschool teachers. They teach classes in the morning (preschool in Uganda usually ends around noon) and then, thanks to the grant, attend teacher-training classes in the evenings. The preschool is currently housed in a local church building (see first photo), though construction is under way for a new, larger, preschool for the children. A preschool has also been started in the town where Nathan now lives, just outside of Mbale.



ACTS also has a program to support community members who are living with HIV/AIDS, who often have been abandoned by their families because of their disease. Volunteers visit the patients once a week and bring them fresh fruit, soap, lively conversation and encouragement to take their medication.

Many of the patients have shown marked improvement as a result of this program, and some have even returned to work.

ACTS also supports local community organizations such as Doko Family Care Preschool and Primary School and Mugiti Community Farm.

For more information about ACTS and the amazing work they are going, visit their [website](#). For specific questions or to support the organization, you can contact Nathan directly at afriteams@yahoo.co.uk.

AAC In Namibia: A Mom Advocates For Her Son

By Petra Dillman



My son – Michael - is 25 now, ¼ of a century ‘old’. He was diagnosed with an Autism Spectrum Disorder (ASD) when he was 2 ½. It was very lucky that he was diagnosed, as South Africa is generally very far behind in ASD knowledge and services.

For quite some time now, I have been dabbling with AAC to enable Michael to have a functional communication system. We have symbols and signs, we understand him, he can point, he can show, and he has some idiosyncratic vocabulary. However, I’ve found that it’s difficult to implement something when one does not have professional back up and know-how on site, and when teachers and the community think that a communication system is a fine idea but not for them to follow or develop, because “their” children are all ‘verbal’.

Let me start at the beginning: Our first encounter with AAC happened through Unica School for ASD children in Pretoria, South Africa, where we met a wonderful Speech Language Pathologist, Ilze Pansegrouw, and where we received instructions and pages of symbols to cut out and to cover with sticky plastic (no laminators in those days). At that time we were at Unica as outpatients (as we were living in Harrismith, 300 kilometers away), visiting every three months for follow-ups.



In 1994 we moved back to Namibia and luckily had the opportunity to attend a feeding and symbol

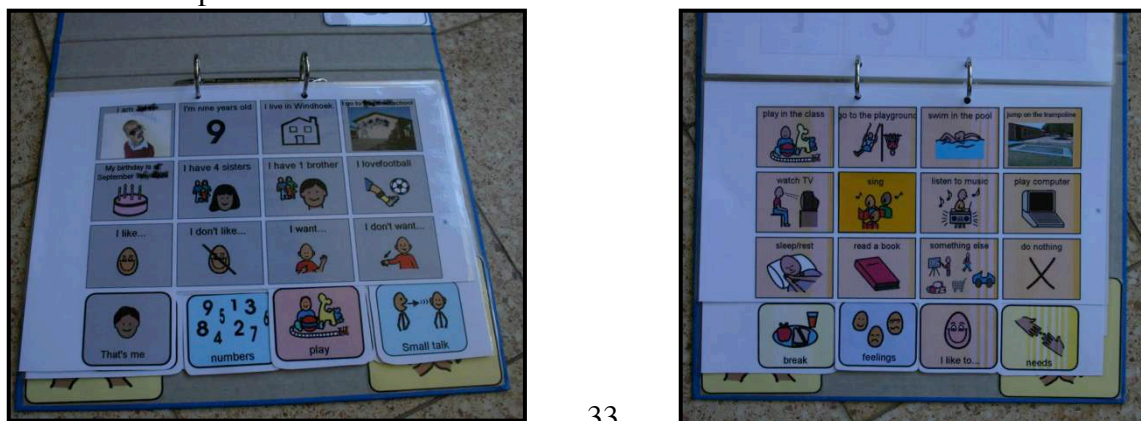
workshop organized by CLaSH (Children with Language, Speech and Hearing Impairments), which concentrates on children with hearing issues. We met Juan Bornman from CAAC (Centre for Augmentative and Alternative Communication) at the University of Pretoria, South Africa, who was the presenter, and we were introduced to communication boards. Immediately thereafter I ordered the Boardmaker program and two books on Communication Displays for School and Community Environments.

We continued to make boards and communication books for Michael. We tried to implement the system for other children in his special school, but it never went beyond his class. The other teachers just thought this was only for the ASD class, and not relevant for their learners. It also seemed like too much effort to implement for their wheelchair learners with cerebral palsy, who they presumed also had a mental disability, despite the fact that these children had bright, interested and open faces, eyes and expressions.



I attended the SAALED conference ([The Southern African Association for Learning and Educational Differences](#)), which included presentations by Vicky Casella from the Bridge School, and Gail van Tatenhove and Stephanie Taymuree from the USA, among others. I also met Celeste of Inclusive Solutions South Africa.

Afterward, I was able to order some talker resources for the local school. Unfortunately, not everyone was as excited as I was, and the materials sat and gathered dust. Every time we had a German volunteer or intern interested in AAC they were taken out and used, only to be put back in the safe when they left because of fear of breakage or theft. Communication folders made for three of the children were also kept in the school, even after the children had left, to be used as demonstration material, but were never shown or used or duplicated.



We continued to use boards with symbols for various situations to communicate with Michael. A Picture Exchange Communication Specialist (PECS) trained Speech Language Pathologist volunteer worked through the stages with him. I was glad to see that without the formal PECS approach Michael was able to finish the ‘course’ within two weeks instead of the envisaged four weeks. This made me realize that it is okay to go at your own pace in your own time, and that one does not have to spend a large amount of money for expensive, trademarked training.

Continuing with our ‘AAC for Namibia’ mission, we held several workshops (ranging from one day to three days) in Windhoek and Swakopmund, with a volunteer SLP from the UK, and with SLPs from Unica School in Pretoria. We built communication books and communication boards for various children, but, without the parents’ commitment, it was difficult to form a relationship or to continue to build on the communication boards. Lack of funds for making materials was also a major problem.

Another issue was language. English is not the native language of most children in Namibia, or even their second language. Educating parents about the importance of AAC often means educating them about the importance of education, the right to have a voice, and the assumption of competence with respect to their child.

Over the years we have had TEACCH workshops, Autism Spectrum workshops, Makaton workshops, seminars and workshops on behavior, and communication and other issues regarding child development and parenting. We have also organized class assistant training, parent training, professional information sessions, inclusive education workshops, differentiating instruction workshops and more, always feeling that we were just scraping the tip of the iceberg.



Fast-forward several years: Buying an iPad for our son and seeing his progress started to really get me going. The German Facebook page ‘[unterstützte kommunikation](#),’ which I joined in 2012, had further fired me up in what is possible regarding AAC and resources, symbols and devices (paper and other). Finally, in 2014, it appears that after a lot of hard work, awareness raising, persistence, AAC Facebook communication pages and excitement over what can be done with AAC, we are finally making headway.

Between February and June we received a number of donations earmarked for training and resources. I ordered more books on AAC – mainly practical books, with lots of visuals so that teachers and others can see what is explained. Examples of book topics included AAC in schools, *Speaking Out* book by CAYA, achieving communication competence, assistive technology in public schools, and more.

In June I had the opportunity to attend a one-day Visual Scene Display workshop by Kathy Drager of Penn State University, at the Center for Augmentative and Alternative Communication (CAAC) in

Pretoria. Being in the fortunate position to be able to afford a certain amount of travel out of my own pocket (no organization funds have ever been used to fund conference or training trips), I was also able to attend the Lisbon ISAAC conference in July.

What an experience: a week of AAC, and the opportunity to attend a one-day workshop with Jane Farrall. The conference program was very full, sometimes with eleven streams to choose from. I enjoyed each and every presentation and learned a lot. The conference was aptly named “Discovering Communication”. As a first-time ISAAC delegate, I was literally discovering communication. As a parent of a non-verbal adult with Autism who has dabbled with AAC in the form of photos, symbols, *etc.*, I thought I knew quite a lot. I was so pleased to discover that there was so much more to AAC than I thought.

Meeting professionals that I had so far only read about, getting new ideas on how to adapt materials and how to teach language and how to think out of the box was a fantastic experience. Hearing and seeing AAC users in action had me in tears, wishing that our teachers or officials from the various Ministries of Education, Social Services and Health could have been there too, to see what is possible.

Another highlight for me was the attendance of the ISAAC BUILD committee meeting, where we met other delegates from emerging AAC countries. Again, it was amazing to see how willing people are to share their knowledge and resources. I managed to get a DVD – a gift from Denmark – with a number of moving stories and information on ALS (very pertinent at the time because the ice bucket challenge was raising so much awareness). We also received a copy of the DVD of the CAAC (Pretoria University) resource book, which contained so much valuable information. Printed out, it is a very fat folder which provides background info on AAC, information on various types and methods of AAC to determine suitability of which resource for which user, resources to print out, ideas to make your own resources, ideas on how to adapt materials for individuals and much, much more.

Speaking of free resources: At the ISAAC BUILD meeting, everyone received an information page from Dorothy (Dot) Fraser, explaining that there is a 30 page document, prepared by Harvey Pressman, Central Coast Children's Foundation, with up to date links and resources from all the past issues of ACWN newsletters. These resources and newsletters give a good overview and are a great source of information. They are all available and free to download [here](#).

I committed to take charge and build up the [ISAAC Build Facebook page](#). I depend on everyone's input, questions and ideas to make this work. This means ‘liking’, ‘following’ and ‘sharing’.

In October we received an amazing gift – a number of *Step by Steps*, *Go Talk Nows*, switches and books about how to use them, all at a value of \$1800. All this was thanks to having met Katrin Salziger and Martina Schaefer of Prentke Romich Germany (PRG) at the ISAAC conference in Lisbon. Additional thanks are due to Katrin, who organized the donation and the free transport to Namibia.

By attending free PRG online webinars I am learning a lot about AAC and talkers, and how to adapt materials or books for interactive work or for individualizing for each user.

This year, the Namibian Inclusive Education Policy was finally launched, and the Ministry of Education is implementing, or piloting, programs in various regions. Many obstacles and issues need to be addressed and overcome or adapted. The policy aims to meet the needs of the individual. For

example, inclusion does not only mean “mainstream,” but looks at educating in the least restrictive environment. It aims to educate according to interest and ability from a young age, with the vision that learners will become as independent as possible in an accepting and informed society.

Slowly, *very* slowly we are building our bridges between user, parent, teacher, society and the real and virtual world of AAC. On my to-do list is reading the previous newsletters of ACWN, especially the ‘market books’ from Ghana - an excellent idea that could be adapted for Namibia or South Africa. Armed with all the resources and knowledge as described above, we are on a road to discovery and success regarding AAC in Namibia.

Nevertheless, we can only do this with help from the international community. Our current wish list includes a crimping and plastic spiral binding machine and spirals for making communication materials, and funding for paper, ink, copier, laminator and more. We also need funding to employ professionals to teach teachers and parents and funding to be able to have Internet access so that we can spread training via webinars.

We are always in search of partnerships with International Round Table, Rotary or the Lions (to team up with our local clubs). It is difficult to become sustainable in a society where 40% are unemployed, another 40% are youth with no chance for a career or a realistic independent future and the country’s 650 NGO’s and DPO’s depend on donations from the commercial sector, comprising only 20% of the population.

Petra Dillmann – email: autnam@iway.na

Of Note:

Communication Passports

A powerful communication tool that is currently being used to aid children with autism in Ghana is called the Communication Passport. These are laminated booklets with pages of information about the child (likes, dislikes, favorite foods, medical conditions, mannerisms, emergency contact information). The passports are custom made for each child and are to be kept either in their backpack or worn around their neck for easy access in daily situations. Communication passports are a great way to facilitate communication and make interactions easier for these children, as well as keep them safe in unfamiliar situations. To learn more about these passports and other work being done in Ghana, please [click here](#).

Social Stories

Another great resource from the [Teachers College at Columbia](#) University is the Social Story activity. This video instructs teachers on how to create story booklets to help change behaviors that they find are disruptive to the learning environment or a hindrance to their students. These booklets are easy to read and complete with illustration for the student. They have proven effective for students with intellectual disabilities and autism. To watch the video and learn how to make your own, [click here](#).



AAC Market Cards

[Click here](#) to watch the video highlighting the successes of market cards in Ghana with instruction from the Teachers College at Columbia. For several years, AAC market cards have been used to help children with autism, intellectual disabilities and cerebral palsy participate in their local market and facilitate communication. Being able to participate at the market is very empowering for these children. Market Cards have been a wonderful tool in Ghana and can easily be used with children in other areas.

Kenyatta University

[Click here](#) to learn about Kenyatta University in Kenya, which was the first in East Africa to grant bachelor degrees in special education. The university strives to make inclusive quality education accessible to all individuals, including those with disabilities. Their mission and objectives include enhancing the self-reliance, job-readiness and overall quality of life for learners with disabilities and to produce highly qualified special educators who can achieve this in the classroom. They are leaders and advocates for quality services for the disabled and engage in research at the benefit of such persons. There are many opportunities for students from other African countries and abroad to enroll in their programs.



Rwanda 800 Disabled

“Children with disability need to be supported and not stigmatised, this is the duty of every Rwandan.” And yet in Musanze, Rwanda only one school with 70 open chairs is available to the 840+ children with disabilities. This school is run by the local NGO, Fair Children and Fair Youth. Based on surveys, about a fourth of the disabled youth are ready to be in school now but have nowhere to go that

can accommodate their special needs. Establishments such as the Kigali Institute of Education and the School for Post-Graduate Studies plan to incorporate trainings for teachers to address this issue, but more awareness and emphasis on quick action is needed. [Click here](#) to read more. Visit this site to learn more about [Fair Children Fair Youth in Rwanda](#).

Fair Children Youth Foundation, Rwanda

[Fair Children Fair Youth in Rwanda](#) is an NGO in Musanze, Rwanda committed to supporting women, children and youth. They focus on the educational, economic and psycho-social well-being of these individuals through community-based initiatives. Such initiatives include literacy training, special education for children and youth, community awareness, emergency support for orphans in shelters, women's income generating cooperatives, etc. Their motto is strong mothers- strong children- strong community initiatives.

Academic Star, Nigeria

The following is a report from Cross River State, [Nigeria on Developing Beginning Reading Skills among Primary School Pupils](#). Reading through the abstract allows for a great introduction to the purpose and results of the study which provided guidance on how to “effectively teach reading as well as improve their understanding of the nature of the reading process”. This report provides great insight on how to redirect teaching methods to allow for better results from students, offers specific proficiency tests which can accurately assess the needs of the student.



Kwara State School for Special Needs, Nigeria

[The WellBeing Foundation](#) works closely with education initiatives to bring better facilities, resources and support to institutions such as the Kwara State School for Special Needs in Kwara, Nigeria. The Foundation has provided the school with modern special education equipment and infrastructure including three Braille machines and a Coaster Bus for transportation on outings. The school itself holds 450 students between the ages of four and 18 years and trains student to become economically independent upon graduating. Their goals are to challenge students academically and help them realize their potential. Click here to read a relevant article on the [School for Special Needs](#) and students' journeys.

TC SLP Ethiopia

[The Teachers College at Columbia](#) embarked on a [trip to Ethiopia](#) from December to January, where they met with teachers and observed classrooms at institutions such as the Nehemiah Autism Center and the Joy Autism Center. They met with administration and assessed the school's curriculum and potential needs. Meetings were held with parents and in the community to provide training on how to



use the [communication passports](#) and [social stories](#). Teachers provided cleft palate therapy and other visual aids such as calendars, name tags and visual schedules were introduced to the classroom. [This blog](#) chronicles and identifies the key successes of this trip and the transformative effect on the classrooms and students through use of the proven resources brought by the teacher's college. All resources were provided in the local language, Amharic.

Reading and Research Source, by Joseph Agbenyega

[Click here](#) to find an informative resource on Early Childhood Education in Sub-Saharan Africa. With Early Childhood Education on the list of pressing reform needed in many sub-saharan African countries, we must first assess what areas need the most improvement and find feasible solutions the problem areas and then work on widespread implementation. This research outlines the background and contributing factors to the inadequate early childhood education status and the negative impact in other areas of society that all lead back to this issue. More knowledge about the realities of the problem will allow us a better vantage point from which to propose innovative and successful responses.

Cerebral Palsy Africa

Cerebral Palsy Africa (CPA) provides courses for parents, therapists, and equipment makers who benefit children with cerebral palsy in Kenya. Through these trainings, equipment has been provided for children to use at home. CPA recognizes that there is a big need for therapist and specialist training in Kenya, where many occupational therapists work in the field without having any professional training. With a growing number of children with cerebral palsy in Africa, CPA is partnering with NGOs in multiple cities to provide training and reach a wider community. The parents' course, therapist course and community-based rehabilitation course are the shining light of this organization and you can read more about the work they do by [clicking here](#).



Open Doors Special Education Centre in Nigeria



This [Mission Africa](#) article highlights the [Open Doors Special Education Centre in Nigeria](#) which educates children with physical or learning disabilities and provides them a safe haven and creative center in an

area where they are often shunned by their community with no option for schooling. Open Doors provides classes such as workshops for literacy skills development, physiotherapy classes and vocational training. Mission Africa supports Open Doors with resources and staffing and does similar work in other parts of Nigeria, Burkina Faso, Chad and Kenya.

SNEAR

The [Open Society Initiative for Southern Africa](#) wrote an informative article about Special Needs Education: Action for Real Change ([SNEAR](#)) in Malawi, which provides insight into the on-going challenges and improvements that special education faces in sub-saharan Africa. Whereas the Malawi Growth and Development Strategy of 2006 and the Malawi Government National Education Sector Plan places emphasis on equal access to education for girls and children with special needs, realities of abuse and neglect continue in many parts of the country. This article highlights the challenges in the Dowa district and introduces the Basic Education project that directly benefited over 400 children between 2009 and 2010. The project continues to take initiatives to improve the well-being and future of these children. Awareness of these issues is important, because with awareness comes more action and potential solutions. [Read more here.](#)

Kakunyu School Uganda

[Kakunyu School](#) in Uganda provides special education to children 6 years and younger. The school started in 2005 and has opportunities for admission on an annual basis. When it comes to early education, it is one of the only of its kind in Uganda. Their goal is to improve “the cognitive skills of children with intellectual disabilities and other related learning difficulties”. The Kakunyu Parents Group offers a support group and their mission is to increase the children’s self-reliance. The school has many activities including rehabilitation services, agriculture and hand craft vocational skills training and community meetings. To learn more, [click here.](#)



CBM Kenya

[CBM Kenya](#) partners and collaborates with local organizations who are providing community-based services. Partnering with over 20 local and global NGOs, CBM is able to reach over 400,000 people in Kenya. CBM works directly with people with disabilities and in alliance with other organizations in order to implement programs that promote inclusion and participation on behalf of people with disabilities. CBM also works to raise awareness and directly with equipment and appliance manufacturers who distribute products for people with disabilities. Click here to learn about their [recent news.](#)



African Child Forum, Ethiopia

By [clicking here](#), you can download a document provided by African Child Forum with the case study

of educating children with disabilities in Ethiopia. Previous studies estimate that Ethiopia has up to over 3 million school-aged children with disabilities but that less than 1 percent have access to education. This resource outlines this issue and provides insight into the work towards policies of inclusion.

AbleChildAfrica

AbleChildAfrica works for the goal of seeing “a world in which all disabled children are fully included as equal members of society and are able to achieve their full potential”. They do so by working with partner organizations in Africa that are doing work in communities and implementing change. AbleChildAfrica works with legislation and policy for the benefit of children with disabilities in Africa while also providing services such as consulting and trainings. They currently work in Uganda, Tanzania and Kenya. To find more about their services and their charity opportunities, please visit [this link](#). Be sure to watch the short video at the bottom of the page.



Pathways-Pretoria

Pathways Pretoria was founded by parents looking for solutions to the lack of adequate facilities and other infrastructure for their children with disabilities in Pretoria, South Africa. The Center provides services to children with speech impairments, blindness and visual impairments, hearing impairments, autism and severe mental or physical disabilities. Over half of their students have two of the aforementioned disabilities. The Pretoria school serves 70 children and 40 young adults and is the largest of the six Pathways schools in South Africa. They not only have a center, but also a studio, a group home residence for young adults, and outreach and training sessions. Learn more about Pathways [here](#).



Comprehensive World Bank Report- Early Childhood Care and Development in Sub-Saharan Africa

“[Africa’s Future, Africa’s Challenge](#)” is a World Bank report, which focuses on Early Childhood Care and Development. The report covers a broad range including the current trends in Early Childhood Development across Sub-saharan countries. It outlines specific education policies, including their

proposed evolution in the years to 2015, the deadline to meet the Millennium Development Goals. Reading through this in 2015 as the deadline nears will allow teachers, policy-makers, parents and all stakeholders to assess progress made and inspire continued development. This report is filled with data and figures that help communicate the scope of current efforts.

Community Based Child Care Centers- Malawi

The Malawi Government worked in partnership with private organizations to build [community-based child care centers](#) across the country. Researchers conducted to evaluate how these community-based child care centers function at the core. The evaluation concluded that the child care centers have positive and profound impact. The centers provide nutritious meals, play and curriculum particular to development needs. These community-based programs gave more educational opportunities to the growing number of orphans. The evaluation encourages further investment in early childhood development for similar communities.

UNICEF Supports Inclusive Education Model

In this article, [UNICEF](#) writes in support of inclusive education in Rwanda. Children with disabilities should not feel isolated in school. The Murama school program has been working towards inclusion. Going a step further, the school plans activities that provide more insight for non-disabled students. For example, “sit-ball” is a version of volleyball that they play. Sit-ball allows for non-disabled students to better appreciate what it is like to not be able to walk or run and engage in sports. Peer and community mentoring programs have also proven largely effective. This celebrated inclusive education model is improving the lives of children with disabilities. With a better start in school, these students have a higher potential as they grow.



Tony Elumelu Foundation

The [Tony Elumelu](#) Foundation has four programs. They include policy, entrepreneurship, leadership and community development. These programs are intended to empower rising generations of African talent. African Entrepreneurs can apply for counsel and financial support. This website is useful as it gives updates on current policy and issues on the continent. It also pinpoints key investors in particular sectors, such as education.

Rights of Children with Disabilities

UN reports on [UNICEF](#) stressing inclusion of children with disabilities. These children need to be in school, as do all children. Once they arrive, they need to be welcomed with accommodating and inclusive practices. But, as of 2012, only 30 out of 55 African countries had ratified the Convention on the Rights of Persons with Disabilities (2006). UNICEF continues to work to train teachers and provide the right materials to support inclusive education across African nations.

Additional Information:

Occupational Therapy in Madagascar

By Nenneya Shields

In Madagascar, Anri-Louise Oosthuizen is undertaking a unique initiative to provide disadvantaged and disabled young people with low-cost assistive devices. Such devices include quadropod walkers, prone and supine positioning devices, and standing frames. The prototypes were manufactured in local shops starting in 2011. By 2013, dozens of devices have been provided to those in need. This year, Madagascar Occupational Therapy has begun a partnership with ANANI center in Antananarivo and Timion in South Africa to further develop the prototypes.

Madagascar Occupational Therapy provides therapeutic services and educates local occupational therapists on the most effective practices and interventions, as well as how to use the low-cost devices. They focus on Community-Based Rehabilitation, where occupational therapy is established as an evidence-based science. The vision is to make the devices available across Madagascar with an easy manufacturing process and simple design. Below are some pictures of the development process and the devices in use. (Click [here](#) for more info)

Videos:

Inclusive Education In Uganda

“Shake, shake the mango tree. One for you and one for me.” At the Uganda Society for Disabled Children supported primary school in Uganda, children with disabilities join in the class songs right next to their classmates without disabilities. And it’s not just singing. Throughout the whole day, the school promotes inclusion among all the students. In a country where people with disabilities are so often excluded from mainstream society, the school actively works with the local community to identify children with disabilities and enroll them in school. “We want our school to be a model school,” says one teacher. Another teacher adds that the inclusiveness of the school promotes a positive learning environment for *all* the students. He explains that students without disabilities are encouraged by the successes of the students with special challenges. “If Malcom [who has a disability] can learn... let me also put in much effort to learn so much.”

You can check out this inspirational video about the school here, and also learn more about the organization AbleChildAfrica, which works with disabled children and young people in Africa, [here](#).

Speech Language Therapy in Uganda

Speech and Language Therapy is a new profession in Uganda. The first degree course began in 2008 at Makerere University. With the availability of more skilled professionals, more people in need have access to speech therapy and more lives are being enriched in Uganda. Click on this link to watch a clip about the participants’ transformative journeys. To find out more about this organization and how they

are changing lives, please visit this [link](#).

More About Yellow House in Western Kenya

Yellow House provides speech and language therapy services to children with disabilities in Western Kenya, in collaboration with locally registered community based organizations. Yellow House defines some of its key goals as: (1) to offer free and affordable rehabilitation and educational support services, (2) to help make speech-language and other rehabilitation services an integral part of education in Kenya, (3) to provide books and locally produced education materials to individuals, teachers and parents of children with disabilities and (4) to foster better understanding and treatment of children with disabilities through training opportunities for health care workers, parents, teachers, *etc.*

Yellow House focuses on creating a better present and future for the children and helping to provide a culture and community that allows these children to excel. Recent newsletters and event details can be found on their website at [this link](#), and a short informative video about Yellow House and the work they provide can be [viewed here](#).

Low-tech Materials for Speech Language Pathologists

What do Velcro, duct tape and colored markers have in common? They all help Gail Van Tatenhove, a speech language pathologist who lives in Florida, do her job. Check out [this video](#) to learn about some other low-tech materials that Gail uses that may be available in developing countries.

Handicap International

Handicap International (HI) has just released the first part of a new series of short videos titled "Six questions on inclusive education." The films present the opinions of Handicap International staff and local partners working on the inclusion of children with disabilities in education in Burkina Faso, Madagascar, Niger, Senegal and Togo. Click here to watch the [video](#).

Futbols (Soccer) Balls Facilitate Inclusion in Ghana

One World Futbols recently created a mild sensation at the January 2013 professional development retreat for special needs teachers in Ghana. This event was organized to transmit locally relevant AAC strategies and tools to special education teachers. The specially constructed "futbols" are designed to last much longer than regular soccer balls. It was soon obvious that they could lure regular education students into contact with students with special needs on the playing fields. The donation of the "futbols" was part of this year's third annual retreat. Public Affairs Officer, Sara Stryker from the US Embassy in Accra, joined the retreat and lent her support to Columbia University's ongoing efforts. Most importantly, the kids loved the soccer balls. One World Futbols gave students with disabilities a chance to interact and play with peers from the general education school. The contribution of a simple game of soccer toward greater inclusion should not be underestimated. Check out how futbols encourage greater inclusion by [clicking here](#).

Resources:

Inclusive Education Where There Are Few Resources

An estimated 72 million children around the world are excluded from their rights to education. Many of these children live in impoverished conditions, have disabilities or are from minority groups. Susan Stubbs writes this highly informative article, “Inclusive Education - Where There are Few Resources” on the state and context of inclusive education today, particularly in ‘southern countries’ and the developing world. Stubbs proposes in-depth techniques, offers various case studies, and analyzes common challenges to providing education for all. Read more [here](#).

KiRA International

KiRA International is an organization based in Germany that focuses on children’s rights on the African continent. It is involved with many projects and programs in numerous countries in West and Central Africa that work to implement basic rights for children. KiRA has worked with, and for, children with disabilities in countries such as Ivory Coast, Togo and Guinea. To learn more about this organization, visit this [website](#).

**Vous trouverez plus d’informations sur des projets, comme celui en Côte d’Ivoire, [ici](#).*

Teaching Learners with Multiple Special Needs

[Click here](#) to find out more information about teaching children who have multiple special needs and who need tailored and specific instruction or assistive technology. You will find examples of effective techniques, as well as how to construct low-cost, low-tech or no-tech devices such as communication boards. Scroll down to the blog archive at the bottom right to find posts about specific topics.

Guide to Picture and Symbol Sets for Communication

The use of pictures and symbols to help teach children with communication challenges is very effective, but it is important to know how to use them and which kind of images are ideal. The following guide ranks certain pictures and symbols by preference and gives direction and comments about where to find them and how to present them to your learner. Find out more [here](#).

AAC Resources on the Internet

For a very comprehensive list of AAC resources that can be found on the Internet, please access the following guide. Resources are listed alphabetically with their URL, a description of the resource itself and also key information about the kind of information or downloadable content you will find at the listed URL. For more information, [click here](#).

Other Ways of Speaking

Other Ways of Speaking, by the Communication Trust in the United Kingdom, is an excellent, simple, clear, colorful 52-page booklet that introduces the basic ideas of AAC. The contents include sections on 1.) Why should I read this booklet? 2.) How does communication work? 3.) What is Augmentative and Alternative Communication? 4.) What are some of the different ways to support speech? 5.) What are the benefits of using alternative ways to communicate? 6.) How can I support someone who uses Augmentative and Alternative Communication? You can download this publication [here](#).

Informative Blogs

The [AAC in East Africa blog](#) will tell you of Joanne Fry's experiences in Tanzania and Kenya. Not only will you be able to read about the AAC workshop Joanne gave in Mombasa but you can also read about her train journey, the new friends she met during her travels, animal life and the recreational activities that are enjoyed by everyone. She shares her experiences in this blog.

Final Thoughts: A number of non-governmental organizations, government agencies and foundations profess to provide support for the "neediest" children in Africa. Their support, however, extends far too rarely to children with disabilities.

One result of this neglect is that the projects and programs that do exist are scattered, unconnected with each other, and too often trying to re-invent the same wheel.

Our hope is that by launching this newsletter we can make a small dent in the situation whereby each individual effort to provide education to children with disabilities exists in its own silo, with little sharing of what works, what doesn't work, and what useful outside resources are available to help achieve better outcomes. (In the future, one of the areas we will be focusing on is the way low-cost, low-tech resources can support African schools and educational ventures, so we are currently experimenting with the use of low-cost solar energy systems, which enable schools to use such resources in areas with less stable electricity.) But that hope is unlikely to come to fruition unless our readers are willing to come forward with drafts of articles, suggestions for content, references to resources and connections to people and places that can provide ideas for new approaches and new solutions to the many obstacles that confront efforts to provide adequate schooling and service for some of the very neediest children in Africa. Please send us ideas for future article topics, any new resources and contacts of other authors of articles relating to this subject matter. Send us your thoughts at: nshields@miis.edu.