

Evaluation Report

Strategic Evaluation Zambia Inclusive Education Programme (ZIEP) Zambia

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prepared by

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Steve and Jan McCall



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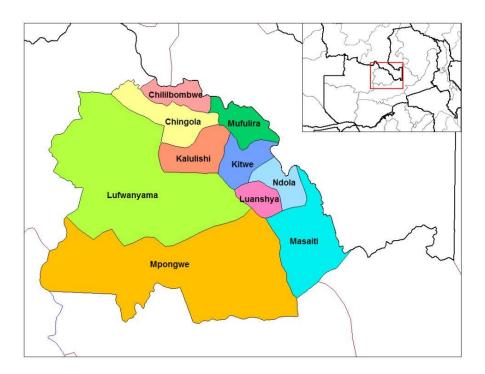
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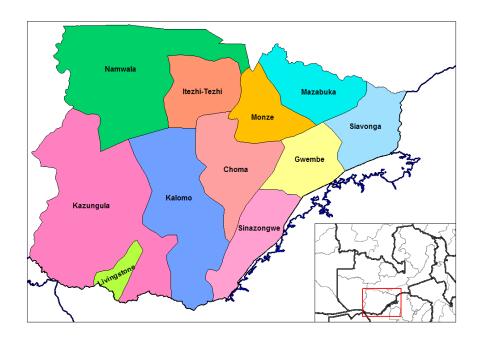


ZIEP DISTRICTS VISITED IN THE EVALUATION

COPPERBELT DISTRICTS - MUFULIRA and NDOLA



SOUTHERN DISTRICTS - CHOMA and MAZABUKA





LIST OF ACRONYMS

DEBS District Education Board Secretary

DSO District Standards Officer

ECC Early Childhood Centres

ECCDE Early Childhood Care Development and Education

FGD Focus Group Discussion

HI Hearing Impairment

IE Inclusive Education

INGO International Non-Governmental Organisation

INSET In-Service Training

KII Key Informant Interviews

LCTH Lusaka College for Teachers of the Handicapped

PI Physical Impairment

MOE Ministry of Education - full name: The Ministry of Education Science

Vocational Training and Early Education (MESVTEE)

NGO Non-Governmental Organisation

ROM Results Oriented Monitoring

RE Refractive Error

SENCO Special Educational Needs Coordinator

TOR Terms of Reference

VI Visual Impairment

ZAMISE Zambia Institute of Special Education

ZCO Zambia Country Office

ZIEP Zambia Inclusive Education Programme

ZOCS Zambia Open Community Schools

ZAFOD Zambia Federation of Disability Organisations



1 EXECUTIVE SUMMARY

DESCRIPTION OF PROGRAMME

This end of term evaluation is designed to assess progress of the Zambia Inclusive Education Programme (ZIEP). ZIEP was initiated in 2011 as a three year programme to strengthen national capacities for inclusive education with a budget of 588,319 Euros (75% EU 25% Sightsavers). The project focused on improving access to quality education provision for children who are blind, and children with low vision and refractive errors. It targeted 615 children who are blind, who have low vision or refractive errors and was implemented in eight districts: the Mufulira and Ndola districts of Copperbelt Province and the Kazungula, Monze, Choma, Kalomo, Livingstone and Mazabuka districts of Southern Province. The programme partners were The Ministry of Education (MOE), Zambia Open Community Schools (ZOCS), ChildHope, The Zambia Federation of Disability Organisations (ZAFOD) and Sightsavers.

The key programme goals were to:

- improve access to quality primary education for blind and low vision childrenand children with refractive error as close to their homes as possible
- influence MOE policy and practice in inclusive education (IE)
- improve coordination for inclusive education
- develop positive attitudes towards, and increased support for IE

The main activities of the programme involved:

- strengthening national coordination for IE through lobbying and consultative planning meetings and improving district coordination for IE by strengthening district monitoring and information systems
- providing training and awareness raising for administrators, teachers and communities
- improving access to quality education for children with Visual Impairment (VI) and children with refractive error through the provision of specialist learning materials, equipment and aids

ZIEP's outputs are summarised in the Table 1 below:

TABLE 1 Outputs of ZIEP

Outputs	Year 1	Year 2	Year 3	Gender	Total
Children	6	60	862	Male 492 (53%) Female 436 (47%)	928
Specialised Teachers	16	16	13	Male 8 Female 5	13
Regular Teachers	46	0	767	Male 447 (55%) Female 366 (43%)	813
Sensitisation	1518	1202	1863	Unknown	4583
IEC materials Radio Programmes	3000 13	1550 8	1300	N/A N/A	5450 24



The evaluation finds that the key goals of ZIEP have been met to at least a satisfactory and, in some aspects, to a high standard. Some elements of the programme have the potential to provide reference for effective practice in other environments. ZIEP overcame initial difficulties to score well on relevance, effectiveness and impact, reaching 928 children with VI and refractive error against an initial target of 615 and meeting or exceeding its ambitious training and awareness raising goals. Ongoing activity should serve to consolidate efforts that were continuing at the time of the evaluation to improve coordination for quality education.

EVALUATION OBJECTIVE/QUESTIONS AND PURPOSE OF THE EVALUATION

The evaluation sought to verify the achievement of intended results and outputs described in the project proposal and in the ZIEP logical framework, and measure the extent to which ZIEP has strengthened capacities for inclusive education in Zambia.

The evaluation also sought to identify examples of best practices that can be replicated in other development interventions. The framework for the evaluation is the questions defined in the Terms of Reference (TOR) for this study.

BRIEF DESCRIPTION OF THE METHODS/ANALYTICAL STRATEGY

The data driven analysis was conducted within a collaborative context, facilitating opportunities for stakeholders in the programme to reflect freely with the evaluation team on ZIEP's effectiveness in meeting the programme goals. The evaluation used quantitative and qualitative data collection techniques in order to address the themes outlined in the Terms of Reference (TOR) and the issues raised in the review of documentation, and in particular in the EU Result Oriented Monitoring (ROM) Report (2013).

Preliminary desk research on the background of the programme was used to contextualise the study and to establish study questions relating to the relevance and coherence of the programme. Data were analysed from ZIEP documents, relevant literature and publications.

The effectiveness and impact of the programme was primarily assessed through fieldwork, which also provided opportunities to evaluate the programme's coherence and the quality of its coordination and efficiency. Data for this phase of the evaluation were gathered through questionnaires, focus group discussions, semi-structured individual interviews with key informants, observations, inventories and case studies. Interviews and discussions were annotated by hand as they occurred and digitised shortly afterwards.



SUMMARY OF MAIN FINDINGS

A. RELEVANCE

The ZIEP programme is relevant to local and national development priorities and practices. There are well established special schools and Units in Zambia and a long history of specialist teacher training through the Zambia Institute of Special Education (ZAMISE), and there has traditionally been a strong focus on children with complex needs such as severe sensory impairment and severe learning difficulties. This focus on complex needs remains in some aspects of national development policies and there is a need to push the agenda on towards promotion of inclusive practices in mainstream schools that cover a wider range of children with additional needs. ZIEP has added value to local and national development policies in relation to inclusion by moving the agenda on towards a better understanding of inclusive practices, particularly at a local level.

The beneficiaries of the ZIEP strategy were predominantly children with visual impairment and children with refractive error, however teacher training and awareness raising at a district level also helped promote the interests of children with other needs. By tapping into the new decentralised structures in education such as school clusters, ZIEP was able to impact directly on practice in schools of different types.

For all the reasons given above, the programme relevance is rated as Highly Satisfactory.

Relevance

Rating: Highly satisfactory:



B. EFFECTIVENESS

The evidence seen suggests the programme has substantially met its key objectives, of:

- improving access to quality primary education for blind and low vision children and children with refractive errors as close to their homes as possible
- influencing MOE policy and practice in inclusive education
- improving coordination for inclusive education
- developing positive attitudes towards, and increased support for, inclusive education

ZIEP has promoted changes in practice that have resulted in the education of children with low vision closer to their homes. Equipment such as low vision aids has improved access to education for children with low vision and refractive errors. Children who are braille users have improved access to braille.

ZIEP has influenced the MOE to take account of the needs of children who are braille users in curriculum planning.

There was evidence in the districts that were visited to show that resources such as



bicycles and motorbikes are facilitating the coordination of inclusive education and that the inclusive practices have increased at district level and at the level of school clusters.

There is persuasive evidence of effective intervention to increase support for inclusive education among teachers and communities. Teachers who have been trained remember their training and are able to use the skills in the classroom. The teachers can provide specific examples of how to modify their teaching styles to make them more inclusive.

Parents of children with disabilities are able to explain how training has changed their behaviour to include their children in village life. There is ongoing work to consolidate improvements in coordination for IE at district level (eg database) but, on the basis of the achievements above, a Highly Satisfactory rating is merited overall.

Effectiveness

Rating: Highly Satisfactory:



C. EFFICIENCY

In spite of the slow start, largely caused by inadequate project start up planning, programme implementation in the final eighteen months was impressive. There was effective leadership shown by the Sightsavers Zambia Country Office team, the partners took ownership of elements of the programme that met with their strengths and expertise and they worked together effectively to meet the ambitious targets for delivering training and raising awareness.

The modifications to the original bid agreed with the funders (eg the inclusion of children with refractive errors) meant that some elements of the programme were telescoped into a short timeframe. There remain some 'snagging' activities that will need continuing attention eg in relation to the provision of software for embossers and the delivery of spectacles to some children who have been refracted but Sightsavers has indicated that these areas will be addressed before project close.

Financial resources were used effectively to fast-track the refraction element of the programme and key national and local individuals with appropriate expertise were co-opted into the programme as necessary. An extension to the programme was necessary to consolidate achievements and for this reason, the efficiency of the programme rates as satisfactory rather than highly satisfactory.

Efficiency

Rating: Satisfactory:



D. IMPACT

The main changes produced by the programme include:



- a higher profile for inclusive education at a local level in the districts covered by the programme and an increased willingness in schools where teachers have been trained to take responsibility for children with disabilities
- a change in the role of special schools and units for children with visual impairment. The programme has helped schools for the blind focus their expertise on children who are blind and who need to learn through braille and has improved opportunities for access to braille for these children.

ZIEP has made it easier for special schools and Community Schools to engage in outreach work that delivers training to mainstream schools and helps identify children with disabilities in communities.

It has facilitated the transition of children with low vision towards education in local mainstream schools through advocacy and the provision of low vision aids. This represents a significant and lasting change.

It has identified a group of children whose needs have previously gone unmet. Hundreds of children with refractive errors have benefitted academically and socially as a result of the prescription glasses.

ZIEP has increased the institutional learning and expertise in inclusion among the partner organisations

The perception of ZIEP among its beneficiaries appears uniformly positive. Impact on beliefs and practices at a district level appears effective. There is evidence that the project has influenced the practice of other NGOs on educational inclusion. For example Leonard Cheshire Disability has replicated elements of ZIEP in its own work. More work needs to be done to influence change at policy level and efforts should focus on advocacy for the development of a national implementation plan for inclusive education but on the evidence of the findings above, a Highly Satisfactory rating for the impact of the rating is fully deserved.

Impact

Rating: Highly Satisfactory:



E. SUSTAINABILITY

The programme appears more closely integrated into local and district level education system planning because the plans and budget are developed by the district teams and are then fed into the national system planning. This is a direct result of the decentralisation of education. At a local level the programme offers a good fit with district and community systems of organisation and management. National system planners have been supportive of ZIEP although the plans for a national symposium on Inclusive Education have yet to be realised.

It should be possible to sustain the gains of ZIEP because of the continued



engagement of the partners in the districts where ZIEP operates. Sightsavers has well established links with the districts through its eyecare programme and other partners such as ZOCS and ZAFOD have links across the country where the institutional learning developed by the programme can be applied. The challenge will be to embed the gains at a district and local level into national planning and to evidence the success of the ZIEP strategies in promoting access to education and the educational attainment of children with disabilities through an effective database that captures improvements in children's access and attainment.

There are questions about the long term sustainability of the support for children with refractive errors and specifically the provision of glasses to children with refractive errors. This is an innovative but logistically complex initiative that has brought real gains to children who have received glasses. It has afforded valuable institutional learning among the partners but would require substantial additional funding to sustain, and a review of the programme results and a cost benefit analysis would be needed before the programme could be scaled up.

For these reasons a sustainability rating of Satisfactory rather than a Highly Satisfactory is suggested. However if ZIEP can embed the database into national and district planning systems then a Highly Satisfactory rating would be merited.

Sustainability

Rating: Satisfactory:



F. COHERENCE/COORDINATION

ZIEP has created synergies with other programmes at district level in the areas where it has operated.

The programme has served to link Community Schools that have a tradition of including disadvantaged children directly to organisations within districts for and of the disabled through links with ZAFOD and ChildHope. The training has helped link together special schools with mainstream provision. The programme of refraction and the assessment of children with low vision has increased expertise in an area that previously received little attention and created direct links between District Education Board Secretaries (DEBS), schools and services that have the potential to benefit children with low vision nationally over time through strengthened links between health and education.

ZIEP has built around existing provision for children with disabilities, taking a balanced view and seeing strength in a continuum of provision that includes special schools, specialist units attached to mainstream schools, state and Community Schools all working together at a zonal level.

ZIEP has been coordinated with district level initiatives. It has built on some earlier government initiatives such as INSPRO (Inclusive Schooling Programme) and the training of SENCOs (Special Education Needs Coordinators). There are opportunities for possible links with work of other agencies that are operating in



Zambia. For example, the evaluation revealed that VISIO, a Netherlands based organisation, are involved in plans to develop low vision training at ZAMISE and that there is a major project in the Western Province related to inclusive education that is supported by the MOE and the Finnish government. As stated earlier, ZIEP has already helped influence the practice of Leonard Cheshire Disability and this opens up possibilities for further collaboration.

A key element of ensuring ongoing support and monitoring of the ZIEP activities is the database that was planned to be established at district levels. This is one of the areas of the programme that needs further development due to a combination of a late start, a lack of technical expertise among senior teachers and administrators at district level and the lack of appropriate technology. This is an aspect of the programme that will need continuing attention and further training sessions to ensure that the software that has been developed and supplied is used to capture the progress of children involved in the ZIEP interventions.

The satisfactory rating for Coherence/coordination reflects the fact that ZIEP has met most but not all of the criteria in this area.

Coherence/co-ordination

Rating: Satisfactory:



G. SCALABILITY/REPLICABILITY

There is evidence that some elements of ZIEP are already being scaled up through the work of other NGOs such as Leonard Cheshire Disability. Some of the key elements of the programme are replicable and merit replication and further investigation, specifically:

- the work on children with refractive errors has potential for influencing practices in eyecare and education internationally.
- the concept of focusing intervention at cluster level is a strength replicable in other countries.
- the focus on Community Schools is innovative and worth additional investigation.

The reason a Satisfactory score has been given for Scalability/Replicability reflects the fact some key elements of the programme strengths such as the work with clusters is specific to the Zambian system, and without further research and evaluation the work on refractive errors cannot be considered replicable at present.

Scalability/replicability

Rating: Satisfactory:





KEY RECOMMENDATIONS

The key recommendations arising from the evaluation are for the partners to:

1. Draw up lessons learnt from refraction exercises and continue to collect data on attainment of refracted children.

The screening of children in mainstream schools for refractive errors is a particularly interesting element of ZIEP. In most countries in the South there are many children with refractive errors in mainstream schools. Children who have refractive error are often effectively excluded from aspects of education in the mainstream classroom. For example children who are very shortsighted may not be able to read from the chalkboard and children who are longsighted may find it uncomfortable to read from books for prolonged periods. This is likely to impact on these children's academic performance and ultimately their school attendance. With the correct prescription the refractive errors can normally be corrected to normal. There are findings in the ZIEP programme that deserve further investigation, specifically in relation to the impact that refraction has on academic attainment and social inclusion and to the issues raised by the implementation of large scale screening and the management of the process of sourcing and distributing glasses in rural areas.

Valuable lessons have already been learnt about the need to provide guidance to children, parents and teachers about what spectacles and low vision devices are for, when they need to be used and how they should be stored and maintained, also of the need to take into consideration the robustness of spectacle frames when they are prescribed for use in the classroom and playground.

This aspect of ZIEP merits follow up and further investigation, perhaps through a joint health/education funded longitudinal study that tracks children who have received spectacles and provides a cost/benefit analysis of the correction of refractive error.

2. Develop a strategy for deployment of ZAMISE trained teachers at Community Schools – input at community and zonal level.

The ZIEP programme funded 13 teachers from Community Schools to attend a two year training programme at ZAMISE for teachers of the visually impaired. The role that these teachers will perform when they return to their schools is not well understood by the teachers themselves or by the DEBS in the districts where these teachers will work. In order to maximise the effectiveness of their training, these teachers will need opportunities to be released from their responsibilities as class teachers to contribute to the development of IE practices in their districts. This work might take a range of forms including providing in-service training; advice and support for colleagues working with children with additional needs in mainstream classrooms; outreach work in communities to raise awareness and identify children with disabilities out of school; and the orientation of regular classroom teachers in inclusive practices.

Unless there is direction from national and provincial level administrators and a consensus among education managers and administrators about a sustainable strategy for the deployment of these teachers, there is a danger that these teachers



will not be able to use their new skills and expertise.

3. Follow up the development of the ZIEP database to ensure that all districts covered by ZIEP incorporate the facility into their practice.

The database developed and distributed by ZIEP has the potential to impact positively on the capacity of districts to track the recruitment, retainment and the academic attainment of children with severe visual impairment. The database also has the capacity to be extended to children with refractive errors who have been treated by the programme, in order to measure the impact over time of refraction and the effectiveness of the spectacles provided to them. The database also has the capacity to be extended to capture information on children with other disabilities. Linking the information in this database to existing databases kept at provincial and national level may help to provide a better understanding of the coverage and effectiveness of education services for children with disability in the country as a whole.

4. Provide the MOE with lessons from ZIEP that can help promote inclusion in other districts at no cost.

There are elements of ZIEP that merit replication in other districts outside the ZIEP areas. Some of these can be applied at low or no cost. One example would be to exploit the potential the cluster system to promote understanding among teachers in mainstream schools of issues of IE. It would be possible for example to make discussion of inclusion issues a required component in termly zonal level In Service Training (INSET) meetings for teachers. The experience and expertise gained by ZIEP in the training of teachers in mainstream schools could be captured in the guidance manuals for potential trainers in other districts. A simple guidance booklet could provide trainers with advice about the organisation, content and delivery of training to mainstream schools on inclusive education. The content should focus on how teachers can be encouraged to change their classroom practices to make them more inclusive and how schools can adapt their environments to welcome all children.

Similarly, building on the ZIEP expertise gained in training in communities relating to the inclusion of children with disabilities, templates for awareness raising sessions could be distributed to other NGOs and agencies involved in similar work in other regions of the country.

5. Continue to develop a pan-disability approach in the work of the partners that takes account of children with additional needs already in mainstream schools.

Although the main focus of the ZIEP programme was on children with visual impairment and refractive error, elements of the programme, such as training in mainstream schools and community awareness raising, addressed the wider issues relating to other children with different forms of complex disability. Perhaps crucially, the training provided some guidance about the classroom management of children in mainstream schools who have additional needs, which although not severe, impact on their attainment. This group includes children such as those with moderate learning difficulties and children with emotional and behavioural difficulties. There is still a pervasive focus on children with complex disabilities in the dialogue on IE education in Zambia, and ZIEP has demonstrated the need for agencies that work in



disability to extend the scope of their work to promote understanding of the broader range of children with additional needs who are, and always have been, in mainstream classrooms.

6. Continue to influence change in specials schools and units that will enable them to share their expertise with mainstream schools and allow children from specialist provision to transfer to mainstream schooling where it is in the children's interests.

There have been interesting developments in ZIEP that stem from work with special schools and units. ZIEP has influenced practice in residential schools for the visually impaired by encouraging them to focus on children who need to learn through touch. In many countries children who have low vision (such as children with albinism are inappropriately placed in schools for the blind and taught through touch when, with appropriate support, they can learn to read and write through print and find success in mainstream schools. ZIEP has supported the transfer of children with albinism from residential special schools and bases to mainstream provision closer to their homes, increasing the understanding of special schools about low vision and helping district education managers to understand issues relating to the educational placement of children with low vision. Also by using teachers from special schools and units to design and deliver training programmes for teachers in mainstream schools, ZIEP has helped special schools forge links with schools in the nearby community, opening up potential opportunities for children with visual impairment and other disabilities who are currently in special schools to receive at least some of their education in local schools.

7. Continue to press for a national symposium on inclusive education that will take forward the debate in Zambia.

Attempts by ZIEP to facilitate a national symposium on Inclusive Education have been unsuccessful to date. Although policy in Zambia recognises the need for a view of inclusion that goes beyond narrow categories of disability, practice in Zambia is still largely focused on support for children who have complex disabilities. ZIEP partners should continue to advocate for a national symposium, led and owned by the MOE, that will promote the development of a coordinated national strategy on inclusive practices in mainstream schools and will develop a shared understanding among stakeholders about IE practices. There are already some very positive steps taken by the MOE in this area, such as the incorporation of an element of special needs education into all initial teacher training that a national strategy can build upon.

8. Adopt a proactive approach to ensure that the expertise and lessons learnt from ZIEP are shared with other NGOs and INGOs operating in related areas.

There are encouraging signs that this is already happening, for example through the adoption by Leonard Cheshire Disability of successful ZIEP strategies into their work on disability and education. However there are initiatives such as the planned the involvement of Visio, an NGO from the Netherlands, in a project with ZAMISE related to training in low vision that ZIEP partners should engage with. A proactive response by ZIEP partners to new initiatives in IE will ensure that the valuable lessons learnt from the work of ZIEP will inform new developments, help prevent duplication of effort and allow them to build on the synergies ZIEP has created.



2. INTRODUCTION AND BACKGROUND

A. INTRODUCTION TO EDUCATIONAL PROVISION FOR CHILDREN WITH DISABILITIES IN ZAMBIA

The education of children with disabilities has been a policy objective in Zambia since the 1977 education reforms, however, as Serpel and Jere-Folotiya (2011) suggest, prior to the adoption of the Salamanca Framework (UNESCO, 1994), Zambian government documents made little mention of the concept of inclusion. "Equity of access to education was primarily regarded as a matter that concerned only gender. Thus, the principal drive within the special education sub-sector was represented by a programme of expansion of existing specialised facilities to cover more districts, together with an upgrading of the training college for specialist teachers of CSEN (Children with Special Educational Needs)." (Serpel R., Jere-Folotiya J., 2011)

In the 1992 policy document "Focus on Learning" and the 1996 policy document "Educating our Future" the MOE outlined a plan to integrate pupils with special education needs into mainstream institutions and to provide them with the necessary facilities. The policy documents identified three key barriers to equality in education:

- Inadequate special education resources and facilities
- Lack of understanding of specific needs of individual children by administrators of the education system at different levels of service delivery
- Negative attitudes of ordinary teachers, regular pupils and other school staff and communities towards inclusive education and children with special education needs.

In addition to continued support for the existing residential schools for the blind, support for children with disabilities took the form of specialist residential units attached to mainstream schools. From a base of less than 20 specialist units in 1982, by 2007 there were 149 units, 93 dedicated to meeting the special educational needs of children with learning disabilities, nine to those of children with visual impairment, 31 hearing impairment and 16 physical disabilities. Arguably, the focus on specialist provision hindered the development of inclusive approaches in local mainstream schools.

The Education Sector National Implementation Framework 2008-2010 enshrined the principle of universal basic education for children, and equal educational opportunities for disadvantaged groups including all children with disabilities. At the same time the government adopted a decentralisation policy, in which increased responsibility for education services was devolved to regional and district authorities. In spite of a commitment to the principle of universal education, the budget and allocations to special needs education are still below the regional average and this impacts directly on the provision of resources necessary to support children with additional needs.

Community schools have grown and developed to become a successful third element of education provision alongside government and private schools. They outperformed government schools in the 2013 grade 7 examination results. They have been recognised by government and the government pays the salary of some teachers in these schools. Community schools now operate in 9 provinces and



support 117, 000 children. The traditional focus in these schools on disadvantaged children ensured that these schools were receptive to the activities of the programme in relation to children with disabilities.

B. PURPOSE OF THE EVALUATION AND EVALUATION QUESTIONS

The purpose of this evaluation is to establish to what extent Zambia Inclusive Education Programme (ZIEP) has contributed to Zambia's advancement towards the realization of "Universal Primary Education" Millennium Development Goal by 2015 through strengthening capacities for inclusive education in Zambia. The evaluation seeks to analyse and verify the achievement of the project against its set objectives as well as the challenges that the project faced over its implementation period. The evaluation will seek to measure the extent to which ZIEP has:

- improved access to quality education for children with disabilities, in particular children with blindness, low vision and refractive errors
- made communities aware of and receptive to, issues of disability and education
- improved coordination for inclusive education in Ministry of Education (MOE) and influenced MOE practice at national, provincial and district level to provide inclusive education services to blind and low vision children and children with refractive errors
- generated examples of best practices that can be replicated in other development interventions at national and international level.

The enquiry was shaped using the questions defined in the Terms of Reference (TOR):

Relevance

- How relevant and what is the value added by ZIEP to local and national development priorities and policies?
- How appropriate is the ZIEP strategy in relation to the needs of beneficiaries, sector strategy, and the Government of Zambia's education for all programmes?
- Was the design of the programme the most appropriate and relevant as a strategy of addressing problems of children with disability in particular those with visual impairments in Zambia?

Effectiveness

- How has the program performed against its objectives and needs identified and included in the project document? What are the reasons/factors contributing to success or failure to meet these objectives?
- Are the districts equipped with necessary resources and capacity to provide quality inclusive education to all children?
- What is the relative coverage of services of inclusive education activities in the selected districts?
- How have out of school children benefited from this program and what is the extent of these benefits (e.g. numbers enrolled in school, numbers reached with interventions, quality of service etc.)?



- How effective are the various originally proposed strategies/approaches in terms of delivering ZIEP's change outcomes particularly in increasing number of visually impaired children accessing education services?
- What are the key internal and external factors that influenced (positively/negatively) the achievement of the programme?

Efficiency

- How efficient was program implementation and what were the key factors leading to very efficient or less efficient programme implementation? In particular, how did the following influence the delivery of the programme:
- ❖ Governance structure of the partner organization and ownership
- Overall program management and administrative support to achieve overall objective of the program
- Availability and utilization of human, physical, and financial resources to deliver activities and intended results.

Impact

- What are the main changes produced by the program, positive or negative and what are the key factors behind these changes?
- What is the relative coverage of services and outputs achieved by ZIEP programme?
- What are the key lasting changes achieved by ZIEP?
- What is the perception of the beneficiaries of the project and its impact?

Sustainability

- To what extent is the program integrated into national and local level education system planning and implementation?
- To what extent are Inclusive education and ZIEP activities integrated into the institutional framework of the Ministry of Education at the district level in the districts where the programme operated?
- What are the key factors which will ensure the sustainability of the programme beyond external funding from Sightsavers.

Coherence

- To what extent has ZIEP systemically created synergies with other programmes within the districts, towards achieving the defined objectives and goals over time?
- What specific mutually reinforcing policies have been promoted by the project over time to create these synergies?

Coordination

- How have the ZIEP activities been coordinated in light of similar or other sectoral interventions/approaches in the districts covered by the program?
- What ongoing support and/or monitoring mechanisms are needed in the ZIEP districts to ensure the initiated activities are sustained?
- How has the project nurtured these mechanisms to date?

Scalability/Replicability

• Is there any likely ability of the program or its components to be scaled or replicated by other agencies or government?



- What are the key factors leading to the scalability of the program in other regions or countries?
- Who are the main actors in the scale-up/replication and how has the project engaged with them to date?

C. DESCRIPTION OF THE PROGRAMME

ZIEP was initiated in 2011 to strengthen national capacities for inclusive education with a budget of 588,319.29 Euros (75% EU 25% Sightsavers). The project focused on improving access to quality education provision for children who are blind, children with low vision and children with refractive errors. It was implemented in eight districts: the Mufulira and Ndola districts of Copperbelt Province and the Kazungula, Monze, Choma, Kalomo, Livingstone and Mazabuka districts of Southern Province.

The programme partners were:

- Sightsavers. Sightsavers is an INGO focused on prevention of blindness and the promotion of equity for people with disabilities. Sightsavers was the lead agency in ZIEP, responsible for the overall management of the programme. Sightsavers' role in the project included planning and monitoring, the administration of the funding and the compilation of financial and programme reports.
- The Ministry of Education Science Vocational Training and Early Education (MESVTEE). With the support of the Teacher Education and Standards (TES) Directorate, national and district education coordinators worked closely with the programme partners to facilitate the delivery of the ZIEP programme.
- The Zambia Federation of Disability Organisations (ZAFOD) is one of the leading organisations in advocacy and promotion of rights of persons with disabilities and took a lead in sensitising parents of children with disabilities in all districts of the programme, raising community awareness of disability and promoting the enrolment of children with disabilities in local schools.
- Zambia Open Community Schools (ZOCS) is a national NGO that supports the development of Community Schools. Community Schools had originally been established in 1992 at the height of the HIV epidemic by the Catholic Church. They aimed to help communities build schools to meet the needs of vulnerable children, including girls and orphans, who were out of school. Initially the schools were staffed by volunteers most of whom were not trained teachers. Community schools have grown and developed to become a successful third element of education provision alongside government and private schools. Community schools now operate in 9 provinces and support 117 000 children. ZOCS helped coordinate ZIEP work in Community Schools.
- Child Hope is a local NGO focused on women and pre-school and school-age children. It helps communities establish early development centres for children aged 3-8, training caregivers and offering support and advice. Part of their work includes the organisation of sponsors for vulnerable children, including orphans and children with disabilities, to cover school fees, books, uniforms etc.



ChildHope was the implementing partner for Southern Province, using its experience in that region of implementing Early Childhood Care Development and Education (ECCDE) programmes to sensitise communities and support the delivery of the ZIEP education programmes.

Also closely involved in the programme, although not as a programme partner, was:

• The Zambian National Institute of Special Education (ZAMISE). According to Serpell, R. & Jere-Folotiya, J. (2011), Zamise was established in 1995 when training at the Lusaka College for Teachers of the Handicapped (LCTH) was upgraded to a two-year diploma programme. From 1995–2008 a total of 605 teachers were awarded Diplomas in Special Education by ZAMISE. Between1971 and 1995, the LCTH had awarded Certificates in Special Education to about 2,300 teachers. In 2005, the Institute undertook a major curriculum revision, moving from its previous practice of training single-disability specialists to training its graduates in holistic special education.

Other agencies involved in ZIEP included:

- The Examination Council of Zambia
- The MOE Curriculum Development Centre
- The Special Education Teachers Association,
- MOE Teacher Education Services
- The University of Zambia

The ZIEP programme sought to support MOE efforts to promote inclusion through a range of activities specified in a programme Logframe. The activities included:

Strengthening national and district coordination for Inclusive Education (IE)

- organising and delivery of consultative planning meetings with key national and district stakeholders and policy planners
- developing a database on children with visual impairment to strengthen MOE management information systems in relation to blind and low vision children in the targeted districts
- conducting a situational analysis targeting 80 schools and Early Child Centres (ECC) in the eight programme districts to identify the enablers and barriers to inclusive education for children with visual impairment
- developing indicators for quality IE
- providing logistics for coordination and monitoring of IE at a national and district level including a four wheel drive vehicle, 8 motorcycles and 32 bicycles

Training and awareness raising

- training 16 teachers of the visually impaired (2 per district) on a fulltime course in VI at the Zambia Institute of Education (ZAMISE)
- capacity building for mainstream class teachers in supporting learners with disabilities and awareness raising on IE for headteachers and community leaders. This was delivered through training days organised



in each of the districts supported by the programme

- advocacy with policy makers to increase support for inclusive education
- the development of information, education and communication (IEC) materials for national distribution
- television and radio programs on inclusive education

Supporting Curriculum development

Organisation of a workshop for a range of stakeholders including the Examination Council of Zambia, Curriculum Development Centre, Special Education Teachers Association, Teacher Education Services, Zambia Institute of Special Education and the University of Zambia to review access to the curriculum for braille users and children with visual impairment

Improving access to quality education for children with visual impairment
To support access to quality education six (6) Braille Embossers, 80
Dolphin pens, 370 Writing frames and 90 Braillers were procured and supplied to the district education offices for distribution in schools. In addition 30 children with low vision received spectacles and 27 received telescope devices.

Initially the project was hampered by design faults including inaccurate baseline data regarding the prevalence of visual impairment in the programme districts. These faults were addressed in a revised project plan that extended coverage of the project to children in special and public schools, and to children with refractive error. A nocost extension of the programme was negotiated with the funders to ensure that these revisions were consolidated, and as consequence 577 Children with RE were supported with prescription glasses.

D. IDENTIFICATION OF THE PROGRAMME'S TARGET POPULATION AND AUDIENCES/ STAKEHOLDERS FOR THE EVALUATION

As was stated, ZIEP targeted 615 children who are blind or have low vision who require education support in Mufulira, Ndola, Kazungula, Monze, Choma, Kalomo, Livingstone and Mazabuka districts. With the agreement of the funders, the target group was expanded in 2012 to include children in mainstream schools with refractive errors.

It was anticipated that the programme would benefit children with other disabilities by:

- strengthening the capacity of mainstream schools to meet their needs through the orientation of teachers in inclusive practices
- improvements in the policy environment
- greater community awareness and understanding

It was anticipated that the programme would bring indirect benefits to:

- Parents by increasing their capacity to engage in economic activities as a result of their time being freed from caring for their disabled children
- Teachers through the acquisition of new skills



- Education authorities through increased understanding and capacity to monitor children with disabilities
- The community through the creation of greater social cohesion.

The stakeholders for this evaluation report include the project partners, INGOs and NGOs operating in education, rehabilitation and disability in Zambia and surrounding countries.

The audience for the report includes policy makers, funding organisations and programme planners at national and international levels. One of the functions of the report is to develop a detailed description of best practices and lessons learned through the implementation of the project that could be useful for replication in other development interventions at national and international level.

E. REVIEW OF RELATED RESEARCH

A range of related reports were provided to the assessors prior to the evaluation these reports included:

- Annual Narrative Reports for Year 2011-2014
- Result Oriented Monitoring Reports for ZIEP
- Monitoring data collected by ZIEP
- ZIEP Logical Framework (original and revised)
- Key Performance Indicators
- Justifications for the programme extension
- Country Strategy Paper

The programme experienced difficulties in the first eighteen months resulting from:

- Weaknesses in the Logframe and programme design which made the monitoring and reporting of outcomes difficult
- Inaccurate targeting that overestimated the prevalence of VI in the project areas
- Low levels of activity in some aspects of the project in the early stages as a result of human resource issues among the various implementing partners
- Shortage of expertise in the country for identification and assessment of children with low vision

Challenges arising from these difficulties meant that key activities such as the delivery and distribution of assistive devices and learning aids were delayed in year one, putting pressure on ZIEP to meet the programme goals by the end date. In spite of these delays, huge strides were made in the final eighteen months of the programme towards completion of the key goals, and by the end of the project 928 children with visual impairment and refractive errors had been supported with aids and equipment, 813 teachers in mainstream and special schools had been trained in IE and over 4,500 community members had received sensitisation on disability issues.



F. OVERVIEW/DESCRIPTION OF REPORT STRUCTURE

The report is structured using the report template provided to the evaluators by Sightsavers. It is divided into six sections including:

- an executive summary highlighting the key findings grouped around the Sightsavers evaluation criteria headings
- a brief introduction to the programme and background to the report
- a description of the methods used in the data collection and analysis
- the results of the fieldwork
- the conclusions and recommendations of the evaluation
- a list of the sources referred to in the report



3. METHODOLOGY

A. EVALUATION APPROACH AND JUSTIFICATION

Given the wide ranging scope of the programme and the variety of locations and stakeholders, it was necessary to adopt a range of data collection techniques.

The evaluation required the collection of quantitative and qualitative information. The data driven analysis was conducted within a collaborative context, facilitating opportunities for stakeholders in the programme to reflect freely with the evaluation team on the programme's effectiveness in meeting the programme goals.

Preliminary desk research was used to contextualise the study and to establish study questions relating to the relevance and coherence of the programme. Data were analysed from ZIEP programme documents and relevant publications.

The effectiveness and impact of the programme were primarily assessed through the fieldwork, which also provided opportunities to evaluate the programme's coherence and the quality of its coordination and efficiency. Data for this phase of the evaluation were gathered through questionnaires, focus group discussions, semi-structured individual interviews with key informants, observations, inventories and case studies. The programme was rated using the headings and rating system in the template provided. (See Annexe 1)

B. DESIGN

METHODS

A range of methods were used to collect data, including:

Document Review The evaluators examined key ZIEP documentation (see 2 D above).

Key Informant Interviews (KIIs) In order to identify the extent to which inclusive education is understood and practised at an administrative level, and to identify the challenges that the project had to address, KIIs were conducted with ZIEP programme managers and officers and with representatives of the Government and non-government partners at national and district levels.

Focus Group Discussions (FGDs) Focus group discussions were conducted with children in the programme, regular learners, teachers and parents to verify and triangulate data from KIIs. These helped reveal the impacts of the programme in promoting inclusive policies and practices and raising the quality of the education of children with disabilities at the level of the school and the classroom.

Direct Observation This was used in state and community mainstream schools and in units and special schools for children with visual impairments to evaluate school environments, levels of equipment and the levels of social and educational inclusion for learners with visual impairment. This method helped reveal the impact of the programme at the child level and identify specific examples of best practice that could be replicated elsewhere.



Case Studies A small number of cases were studied in more detail to document circumstances at an individual level and create a bank of illustrative examples that could be used to inform practice and to develop training materials.

SAMPLING AND SOURCES OF INFORMATION

The sampling was determined by the timescale of the evaluation, the travel distances and the availability of the participants and stakeholders. The field work was conducted over a period of 11 days, 24 November - 6 December 2014. A timetable of the fieldwork is provided in Annexe 3. As far as possible the sample represented the range of environments in which the programme operates and reflected its geographical and socio-economic diversity (eg urban/rural, Northern Province /Southern Province). The evaluation team visited four of the eight districts ie Ndola and Mufulira (Northern Province) where education services for children with visual impairment supported by Sightsavers are relatively well established, and Mazabuka and Choma (Southern Province), which represent relatively recent developments.

The reliability of findings was tested through a continuous process of cross checking and triangulation with the Sightsavers programme manager who accompanied the evaluators throughout the field. At the end of the fieldwork preliminary findings were presented to the programme partners in a formal workshop.

The main focus of the data collection was on the children involved in the ZIEP project, those responsible for delivery of teaching and support to the children, and the managers and administrators responsible for the implementation and supervision of the programme and other key stakeholders including parents of children in the programme.

Children

In total 41 children were interviewed in a range of different settings, including mainstream state and Community Schools, children in residential units attached to mainstream schools and children in special schools. The children included children who were blind, children with low vision and children who had refractive errors.

As far as possible the sample reflected the age and gender distribution of children in the project. Interviews with children took the form of FGDs and sought both quantitative and qualitative information. Interviews with older children were conducted in English but in some cases interpreters were used according to the children's preference or needs. Children were accompanied by a teacher who knew them well.

Samples of children's school work were reviewed and, when it was possible, their basic literacy and numeracy attainments were assessed. In the case of braille readers, Braille reading levels and code knowledge were assessed through listening to children read or through quizzes. In the case of children who had had interventions for low vision or refractive errors, children were questioned about their use of their vision aids and their impact on their functioning and learning in and out of school and were given simple functional vision assessments to establish their access to board work and books in the classroom.



At each school informal inventories were taken of the specialist equipment provided by the programme that children were using, and children's facility in using the equipment was assessed through observation or practical demonstrations.

Teachers

Teachers interviewed included class teachers, headteachers and specialist teachers. In total 48 teachers were interviewed.

Class teachers

The teachers chosen for interview included mainstream teachers who had been directly involved in teaching or supporting children reached by the programme. Small group interviews were conducted. Semi-structured interviews were used to ask teachers about their experiences in teaching the target children and their attitudes towards children with disability. Teachers who had received training or orientation as part of the programme were asked about the effectiveness of its delivery, its relevance and applicability in the classroom. Teachers were asked to provide specific evidence and exemplars of how they had applied their training in the classroom. They were also asked about the impact that the programme has had on the academic performance, social inclusion and access to the curriculum of children in the programme.

Two teachers were observed working with programme children in the classroom.

Headteachers

8 Headteachers or Deputy Headteachers whose schools were involved in the programme were interviewed. They were asked about their understanding of the programme and their involvement in its administration. Their views about the strengths of the programme and the barriers to its further development were sought as well as their perceptions of the impact of the programme on attitudes towards disability in their school.

Specialist teachers

Interviews were conducted with 11 Teachers who received specialist training at ZAMISE as teachers of the visually impaired. They were asked about the content, delivery and relevance of their training and asked about their future role in the implementation of the programme. Their interviews were triangulated through interviews with the Principal of ZAMISE and a specialist teacher trainer.

Parents

Interviews were conducted with 16 parents, and with representatives of the school management/governance committee from 2 schools. The parents represented the range of children in the programme and they were asked for their observations and views about the progress of their children under the programme, and about the attitudes of other parents/children to children with disabilities, and the experiences of their children out of school.

Key informants

Individual interviews were held with key actors in the programme. Questions explored relevant themes identified in the document review and in the Evaluation Matrix (see Annexe 2).



Senior members of MOE involved in policy making and curriculum development were interviewed to establish the interface between inclusion and the wider education policy. Individual interviews were also conducted with senior representatives of the partner organisations involved in the programme. Key questions for key informants included strategic level questions such as:

- What have been the key challenges faced by the project over the implementation period and how have they been addressed?
- To what extent are schools and communities more aware of, and receptive to, issues of disability and education as a result of the programme?
- How has the programme improved access to quality education for children who are blind and have low vision?
- How has the programme improved access to quality education for children who have refractive errors?
- What are the best practices and lessons learned through the implementation of the project that could be useful for replication in other development interventions?

C. LIMTATIONS OF THE EVALUATION

ZIEP is an extensive and diverse programme and a major challenge in any evaluation of this nature that relies heavily on qualitative data will be to capture data that is reliable and valid. A potential challenge is that the key participants may wish to present the programme in its best light, or that they may be concerned about the negative consequences of criticising any programme shortcomings.

This challenge was mitigated by trust and effective communication between the evaluation team and the respondents. Where concerns about negative consequences were a potential threat, participants were interviewed in appropriately confidential contexts.

The evaluation was carried out towards the end of term when some schools were involved in examinations and preparations for the Christmas holiday. In practice however this proved less of a challenge than had been anticipated and in some cases proved advantageous eg in residential schools it meant the evaluators had access to parents who had travelled to pick up their children and access to groups of teachers whose children were in examinations.

Although we were able to see examples of most of the equipment in use, time constraints meant that we were unable to see children with telescopic low vision aids.



3. RESULTS SECTION

A. RELEVANCE

How relevant and what is the value added by ZIEP to local and national development priorities and policies?

The main goal of ZIEP was to contribute to Zambia's advancement towards realization of the "Universal Primary Education" Millennium Development Goal by strengthening capacities for inclusive education in Zambia.

ZIEP sought to add value to national and local policies by widening the perspective of equality in education through the promotion of an agenda focused on inclusion. ZIEP was initiated in a policy environment where inclusive education was underdeveloped and poorly understood, and at a practice level where the focus remained on the specialised provision for groups of children with the most complex needs such as severe sensory impairment and learning difficulties.

The efforts to develop national coordination on IE were focused upon the establishment of IE coordination committees at district level to strengthen joint planning and the promotion of increased monitoring of IE by district education managers. Monitoring was enabled by facilitation of transport, and efforts were made to establish a database at district level to capture information about children with visual impairment and refractive errors, the support they received and their academic performance. It was anticipated that this database could be expanded to include children with other disabilities in the future. The situational analysis conducted in Year 1 of the programme revealed lack of awareness in Community Schools of the needs of children with learning difficulties and lack of resources to meet these needs. It also revealed persisting negative attitudes towards disability within local communities and poor coordination at a national level stemming from the lack of a meaningful implementation framework for IE and a lack of quality indicators that could be used to measure progress

The ZIEP activities reviewed in the evaluation were relevant to the national development priorities and policies as they stood. ZIEP's added value comes chiefly through its strengthening of coordination for inclusive education at district level. A real strength of ZIEP is that it worked to promote inclusion by utilising the synergies created by the government focus on decentralisation in education. By tapping into the new decentralised structures in education such as school clusters, ZIEP was able to impact directly on practice in schools across the range of provision and develop a better understanding of inclusive practices among administrators, teachers and community leaders.

How appropriate is the ZIEP strategy in relation to the needs of beneficiaries, sector strategy, and the Government of Zambia's education for all programmes?

The ZIEP strategy was considered by the evaluators as appropriate to the needs of its beneficiaries and the current Education for All (EFA) programme in Zambia at this



stage in its development. In many aspects practice in Zambia in relation to the education of children with additional educational needs retains a strong focus on children with complex disabilities such as severe sensory impairment and severe learning difficulties. As a result there has been insufficient emphasis in the implementation of government policy on the promotion of inclusive practices in mainstream schools. There is a wide range of children with additional needs who already attend school, but whose needs remain largely unrecognised and unaddressed.

The direct beneficiaries of ZIEP were children in the programme districts who are blind or have low vision (most of whom are educated in residential special schools or residential resourced units attached to mainstream schools), and children in mainstream schools with refractive errors. Since most children with severe VI receive their education in special schools and units, it was entirely appropriate for ZIEP to seek to raise standards and to promote a change in these settings to help them to adopt more inclusive practices as part of its strategy.

It would have neither been practicable or responsible to adopt a strategy that involved moving large numbers of children who are blind from special schools or units to local mainstream schools with inadequate facilities and low levels of understanding of the children's needs. Seeking to upgrade provision in the specialist schools and units and raising awareness through in-service training of teachers in mainstream schools was a much more appropriate response to the issues of promoting inclusion and the needs of the beneficiaries.

Although much of the ZIEP strategy focused on children with the most complex needs (blindness and severe low vision), it also contained elements that were geared to developing a raised understanding of broader inclusion issues in mainstream schools, district administration and local communities.

The programme strategy was also designed to bring indirect benefits to:

- Parents of children with disability by increasing their capacity to engage in economic activities as a result of their time being freed from caring for their disabled children
- Teachers through the acquisition of new skills
- Education authorities through increased understanding and capacity to monitor children with disabilities
- The community through the creation of greater understanding of disability and disability rights

In interviews with national education administrators it was accepted that the concept of inclusive education is not generally well understood in schools and communities in Zambia. According to the National Education Standards Officer for Special Education, at a local level 'people need to understand what is meant by inclusive education'. Given the relatively low levels of understanding of inclusion in the target districts, the strategy adopted by ZIEP of working within existing systems while promoting change was appropriate. The evidence of the field visits confirmed that policy and practice in mainstream schools in relation to IE in the districts served by ZIEP is still relatively undeveloped and the programme's focus on awareness-raising



about inclusion for teachers in mainstream schools and local communities was judged both effective and relevant to the needs of the beneficiaries.

The DEBS and district officers who were interviewed unanimously saw the ZIEP programme as complementing Ministry initiatives to promote inclusion. In response to questions about the appropriateness of the ZIEP strategy in relation to the needs of beneficiaries and to the Government's Education for All (EFA) policy, typical replies included 'We appreciate this project (ZIEP) because it complements the aims of the Ministry' and 'Support from ZIEP has speeded up the move towards inclusive education and to raising awareness among teachers and the community.' (Choma DEBS)

Was the design of the programme the most appropriate and relevant as a strategy of addressing problems of children with disability in particular those with visual impairments in Zambia?

It is difficult to say whether the programme design was the 'most' appropriate for the situation at the time. The government strategy for addressing the problems of children with complex disability has to date focused on specialised provision. Focusing solely on mainstream provision would have excluded the relatively large numbers of children with VI in special schools and units and therefore it was important to accommodate these children into the design.

ZIEP was designed to focus on three key activities:

- 1. Strengthening national and district coordination for Inclusive Education (IE) by:
 - organising and delivery of consultative planning meetings with key national and district stakeholders and policy planners
 - developing a database on children with visual impairment
 - conducting a situational analysis targeting 80 schools and Early Child Centres (ECC) in the eight programme districts to identify the enablers and barriers to inclusive education for children with visual impairment
 - developing indicators for quality IE
 - providing logistics for coordination and monitoring of IE at a national and district level including a four wheel drive vehicle, 8 motorcycles and 32 bicycles
- 2. Training and awareness raising by:
 - training 16 teachers of the visually impaired (2 per district) on a fulltime course at the Zambia Institute of education (ZAMISE)
 - capacity building for mainstream class teachers in supporting children with additional needs and awareness raising for headteachers and community leaders
 - sensitisation for local communities
 - advocacy with policy makers to increase support for inclusive education
 - the development of information, education and communication (IEC) materials
- 3. Improving access to quality education for children with visual impairment by:
 - providing a range of specialist equipment for children with visual impairment and refractive error



 working with a range of stakeholders including the Examination Council of Zambia, Curriculum Development Centre, Special Education Teachers Association, Teacher Education Services, Zambia Institute of Special Education and the University of Zambia to for improve access to the curriculum for children with visual impairment

However it was anticipated that the programme design would benefit children with other disabilities by:

- strengthening the capacity of mainstream schools to meet their needs through the orientation of teachers in inclusive practices
- improvements in the policy environment
- greater community awareness and understanding

As noted in the ROM report, at the design stage there was an overestimate of the population of children with visual impairment in the target districts and, in particular, there was a considerable over-estimate of the numbers of children with visual impairment out of school. This overestimate was not easily foreseeable because, in the absence of reliable official figures, the estimate had to be extrapolated from international prevalence tables.

This design fault did not in itself impact negatively on the strategy of addressing the problems of children with visual impairment. However it had the unintended effect of benefitting children in local mainstream schools who had refractive errors. The revised design was arguably stronger than the original design in as much as it benefitted larger numbers of children and widened the reach of the programme to children in local mainstream schools that did not possess units for children with disabilities.

The decision in the design process to place Community Schools at the centre of ZIEP was a major strength. Community Schools had originally been established in 1992 at the height of the HIV epidemic to help communities build schools to meet the needs of vulnerable children, including girls, orphans and children who were out of school. These schools are firmly rooted in the local community and provided a strong platform for community awareness raising on issues of disability and inclusion. Also the ethos of these schools is traditionally one that seeks to include all children, and as a result, staff at these schools are likely to be well disposed to the concept of IE.

For all the reasons given above, the programme relevance is rated as Highly Satisfactory.

Relevance

Rating: Highly Satisfactory:



B. EFFECTIVENESS

How has the program performed against its objectives and needs identified and included in the project document? What are the reasons / factors contributing to success or failure to meet these objectives?

The key result areas identified in the project document were:

• Strengthened national and district coordination for Inclusive Education (IE)



- Access to quality education for blind and low vision children as close to their homes as possible
- Positive attitudes and increased support for inclusive education

Strengthening National Coordination

Targets to strengthen national coordination included:

- Holding consultative planning meetings with the relevant stakeholders
- Strengthening the planning and monitoring of inclusion at district level through the establishment of coordinating committees
- Conducting a situational analysis at the start of the project to establish the levels of development in relation to the results areas that had been identified
- Developing indicators for quality IE
- Developing a database for blind and low vision children

All of these targets were fully met however the development of a database is still a work in progress and only four of the eight districts are making any use of it. There were some challenges in the attempts to engage the MOE in the establishment of a National Steering Committee through a national symposium on IE. Although the partners had put in place all the resources and made the necessary organisational arrangements, the symposium could not take place. The partners felt it essential that the Ministry should take ownership of the symposium if it was to affect policy and practice, their efforts were unsuccessful and the initiative stalled.

Otherwise at a national level ZIEP worked with the curriculum department of the MOE to review access to the national curriculum to enable greater participation of braille users in the curriculum. A workshop was organised for a range of stakeholders including the Examination Council of Zambia, Curriculum Development Centre, Special Education Teachers Association, Teacher Education Services, Zambia Institute of Special Education and the University of Zambia to review access to the curriculum for braille users and children with visual impairment. Blind students are effectively excluded from participation in some subject areas and the changes agreed increased their chances of participation.

The efforts to develop national coordination on IE were focused upon the establishment of IE coordination committees at district level to strengthen joint planning and the promotion of increased monitoring of IE by district education managers. Monitoring was enabled by facilitation of transport and by helping to establish databases at district level to capture information about children with visual impairment and refractive errors, the support they received and their academic performance. It was anticipated that this database could be expanded to include children with other disabilities in the future. The effectiveness of this strategy is difficult to assess at this stage. The performance of the Coordination Committees will need monitoring over time and the database will need consolidation before its usefulness in tracking the performance of children with disabilities becomes apparent.

The situational analysis conducted in Year 1 of the programme revealed lack of awareness in Community Schools of the needs of children with learning difficulties and lack of resources to meet these needs; persisting negative attitudes towards disability within local communities; poor coordination at a national level stemming



from the lack of a meaningful implementation framework for inclusive education and a lack of quality indicators that could be used to measure progress. The programme successfully developed indicators for quality IE focused on access, participation and performance. Five main strategies were implemented to improve access to quality education for children with visual impairments:

- 1. identification and assessment of children with visual impairment and refractive error
- 2. provision of learning materials, specialist equipment and vision aids to schools
- 3. training of specialist teachers of the visually impaired
- 4. strengthening the capacity of mainstream schools to meet their needs through the orientation of regular classroom teachers in inclusive practices
- 5. improving understanding of inclusion in local communities

Identification and assessment of children

The programme originally targeted 615 children with visual impairment (blind and low vision) in Community Schools. As highlighted above, after the first year of the programme it became apparent that the reliance on international prevalence predictions to calculate the population of children in the target districts had led to an overestimation of the numbers of children with visual impairment. With the agreement of the funders, the target group was expanded in 2012 to include children in community and state mainstream schools with refractive errors and children in special schools.

By the end of the programme 928 children with blindness, low vision and refractive errors had been supported by ZIEP. This represents a 151% achievement over the original target (see Table 1). 108 children who are blind had received equipment, 577 children with refractive error had been assessed for spectacles and 57 children with low vision had received low vision devices.

Provision of learning materials and aids

The programme provided 90 Perkins braillers, 300 writing frames, styluses and braille paper to support 108 children who are blind (50 girls, 58 boys) and braille embossers were given to four special schools, 1 Teacher Training College and 3 District Resource Centres. Again most of the distribution of the learning aids and materials was undertaken from the start of the third year of the programme onwards.

Training of specialist teachers of the visually impaired

13 specialist teachers of the visually impaired received training at ZAMISE (81% achievement on target). Teachers had dropped out during the course through illness or for personal reasons beyond the control of ZIEP.

Strengthening the capacity of mainstream schools 812 teachers participated in orientation programmes on IE.



TABLE 2 Programme reach

Target audience	Year 1	Year 2	Year 3	Total
Children with visual impairment and refractive error	6	60	862	928 492 (53%) girls 436 (47%) boys.
Specialist Teachers trained at ZAMISE	16	16	13	13 (8 female, 5 male)
Regular Classroom Teachers	46	0	767	813 (447 female, 366 male)
Community members	1518	1202	1863	4583

Improving understanding of inclusion in local communities

1,518 community members received sensitisation training in inclusion and disability. These included community leaders and parents of children with disabilities. A campaign was launched in the media (local and national radio and national television) to highlight issues of disability and inclusion and information, education and communication (IEC) materials were developed. 1,850 brochures and 4,000 leaflets, T-shirts and banners were distributed to the DEBS, community members and partners (see Table 3). The brochures mainly focused on inclusive education and they have been used to sensitise the PCSCs and the community.

TABLE 3 Influencing public attitudes - use of media

Outputs	Year 1	Year 2	Year 3	Total
IEC materials	3000	1550	1300	5450
Radio Programmes	13	8	3	24
Documentary	0	0	1	1



The performance of the programme against the objectives identified in the project proposal has been encouraging. The programme's reach in the target districts has been impressive. The ambitious targets for sensitisation and teacher training have been met and there is evidence (see Impact Section) that the training has been well received and has produced changes in behaviour among teachers and parents. Teaching and learning equipment has been delivered and is in use by children with visual impairment and children with refractive errors have been successfully screened and treated.

The key factors contributing to the successes of the programme were the ability of the partner organisations to work to their strengths and the willingness of administrators and schools at a district level to embrace the programme.

Are the districts equipped with necessary resources and capacity to provide quality inclusive education to all children?

Throughout the fieldwork there was persuasive evidence that ZIEP has improved access to quality education for children with visual impairment by upgrading equipment and resources for children with visual impairment in specialist provision described above. Children who are braille users have improved access to braille, for example braille users in Choma reported that:

'Before I used to use a handframe and stylus. The Perkins is better. I can write faster and correct my mistakes (more easily). I can read back what I have written (straightaway).'

'I got the Perkins in 2012. I like it because it is faster when writing braille. I press down (combinations of) buttons (to make a letter), I don't have to do (all of the) individual dots. When I used the handframe I used to get blisters (from holding the stylus).'

Interestingly at Mano School, a mainstream school with a resource unit for children with visual impairment, there seemed to be some reluctance to use the Perkins braillers provided by the programme in mainstream lessons. The evaluators were able to observe a lesson in Civics taught to a Grade 8 class by one of the teachers from the unit who is blind and his sighted teaching assistant (a teacher from the Unit). 40 fully sighted pupils participated in the lesson along with 4 braille users, 2 of whom were boys (Daniel aged 18 and Setumbako 17) and 2 of whom were girls (Loveness 16 and Miriam 23).

During the lesson we saw 2 students using frames and two using Perkins braillers. All pupils were included in question and answer sessions and then a written exercise. Questions written on Board were provided in individual thermoform braille copies for the students. The unit teachers were later asked why some children don't always use the braillers provided by the ZIEP programme. Among the excuses were that they are difficult to carry around from lesson to lesson. 'Children prefer the frame because the Perkins are heavy and noisy'. 'Because the paper is quicker to load in a frame than the Perkins.' 'Because the Perkins only arrived last year and we are trying to find time to teach using the Perkins brailler.'



It seemed more likely that the teachers themselves were uncomfortable using the Perkins because they had not used it themselves as students.

The provision of spectacles to children with refractive errors sometimes dramatically improved access to education for children with refractive errors:

'(As a result of receiving glasses) my eyes stopped being red and I could see the board. My position in class was 32 before (my glasses) it is now around 10 or 11. I use my glasses in every lesson'.

In the four districts visited resources such as bicycles and motorbikes are facilitating the coordination of inclusive education for all children. In Mufulira the district administrators reported that the training on inclusion delivered to teachers who work in Community Schools had helped increase inclusive practices in those schools and that teachers were now going out on bicycles into remote areas and training others. In Choma, the ZIEP funded motorcycle was seen by the evaluators at the DEBS office and it was confirmed that it was used by the district administrators.

Capacity to provide inclusive education to all children was also achieved through the training offered to teachers in mainstream schools. As will be discussed in the impact section, teachers in mainstream schools were able to provide specific examples of how they modified their teaching to make it more inclusive and accessible to all children as a direct result of their training.

Out of school children

As highlighted earlier, there was an overestimate in the original programme design of the numbers of children with visual impairment in and out of school. Nevertheless there was some evidence that children with other disabilities out of school are benefitting from the programme. The ZIEP sensitisation programme that was coordinated by ChildHope was delivered to a range of audiences including parents of children with VI and community leaders (including Traditional Chiefs in Choma and Kolomo). Parents of children with disabilities other than VI also came to meetings (eg children with epilepsy). In Mazabuka 10 rural communities (c30 villages) were sensitised. The training revealed that there were still parents who did not send children with disabilities to school, either because they did not want them sent away or because they did not know that their children could be educated. ChildHope were able to give specific examples of children with disabilities who had been out of school but who were now in school as a direct result of the ZIEP intervention. They included a family with six children with albinism and ChildCare said they could supply a list of other cases.

The FGD at Mufulira revealed that a ZAMISE trained teacher based in a mainstream school had opened a unit for 6 pupils (1 with Hearing impairment, 2 with Learning difficulties, 1 Autism and 1 Deafblind.) She also does outreach work to support 2 severely disabled children in the community. She goes to churches to do awareness-raising about disability and on Wednesdays goes into the community on foot to identify disabled children and raise awareness.

The district education administrators generally felt that the public awareness campaign was paying dividends in bringing children with disability into education. For



example the DEBs in Ndola said that 'they (ChildHope, ZOCS) have been talking to people in the market places and parents have started bringing children into school'.

The district education administrators in Mufulira reported that they had identified people at the ZIEP training who could act as ambassadors. The ambassadors have two main roles – to continue the community sensitisation and to identify children with disabilities not in education. Children with VI and also children with learning difficulties have been identified by the ambassadors. A 'number of children' with disabilities had come to school as a result of the ambassadors programme. They were identified, sent for medical assessment and they are now in school.

Given the lack of systems for tracking the progress of children with disabilities it is not possible to provide accurate numbers of out of school children with disabilities who are benefitting directly from ZIEP or of children newly enrolled in the programme. However, as will be seen in the Impact section below, there is some evidence that some parents with children with disabilities have brought children to schools as a direct result of the awareness raising in communities and the work of community volunteers trained by the ZIEP programme.

What were the key internal and external factors that influenced (positively/negatively) the achievement of the programme?

The willingness shown by district level administrators to embrace the programme was a key element in programme's achievements. The programme aligned itself well with the recently decentralised systems at district and local level, such as school cluster in service training systems. A factor that promoted the cause of ZIEP was the number of administrators and head teachers who had been trained earlier in their careers in special needs at ZAMISE. Each district visited had two District Standards Officers (DSOs), of whom one had specific responsibility for children with disabilities. These DSOs normally had received two years training in Special Needs Education, often through ZAMISE. This was a major factor in the level of buy-in to the programme at a district level. For example in Mazabuka the DEBS was able to provide some detail on its scope and impact even in the absence of the DSO Special Education at the start of the meeting. The fact that budget planning and programme implementation is now focused at district level, and that DEBS are including IE in their plans gives cause for optimism that the ZIEP gains can be sustained. The key internal factor that influenced the success of the programme was the ability of the partners to work together effectively to complement each other's strengths. The key factor that inhibited the initial progress of ZIEP was inadequate start-up planning and valuable time was lost in the early stages of the project and had to be made up later. There is ongoing work necessary to consolidate improvements in coordination for IE at district level (specifically the database) but on the basis of the achievements above a highly satisfactory rating is merited overall.

Effectiveness

Rating: Highly satisfactory:





C. EFFICIENCY

How efficient was program implementation and what were the key factors leading to very efficient or less efficient programme implementation? In particular, how did the following influence the delivery of the programme:

- **Governance structure of the partner organization and ownership**
- Overall program management and administrative support to achieve overall objective of the program
- Availability and utilization of human, physical, and financial resources to deliver activities and intended results

The cooperation and complementary skills of the partner organisations were crucial in influencing the delivery of the programme. As noted in the Programme Description, each of the partner organisations took ownership of the elements of the programme that matched their specific expertise.

ChildHope's role in ZIEP was focused on sensitisation of communities and delivering teacher training/awareness raising in schools. The ChildHope programme coordinator had a background in special education having trained at ZAMISE in generic special needs. The organisation took responsibility for the development of the IEC materials for ZIEP. Examples of leaflets include one providing information about the ZIEP programme and the benefits of IE, one outlining ZIEP achievements including a case study of a child who had benefitted from spectacles, and one with information about the programme partners and the areas of concern that ZIEP was seeking to address.

Sightsavers was able to exploit its expertise in eyecare and in the education of children with visual impairment, that had been built up over many years of operation in Zambia. It was able to mobilise the necessary medical and health personnel crucial to the identification and assessment of children with visual impairment. The lack of national expertise in low vision assessment and low vision training, and the lack of established procedures for the prescription and distribution of spectacles threatened the progress of the programme. Although these were to some extent predictable, much of the work in this area was covering new ground and Sightsavers was able to use its contacts to mobilise support.

It was particularly apparent in the Copperbelt that districts such as Mufulira that have longstanding links with Sightsavers have a more sophisticated system for supporting inclusion as a direct result of Sightsavers involvement. As the DEBS reported:

'They have been working with us for ten years. Projects in Community Based Rehabilitation have been running for ten years. They trained teachers in Ndola who then cascaded their knowledge.'

Community awareness in Mufulira had been completed with the help of ZOCS and Child Hope. A district task force was set up with the District Commissioner, Town Clerk, Medical Representative, a parent representative, an ophthalmologist. The DEBS reported that 'They worked together to design the training programme.'

The organisations therefore worked well together in the delivering of the programme. They all brought different skills and perspectives to the programme but all had a core



interest in children with disabilities and in advancing the cause of inclusion in education.

Overall programme management and administration

In spite of the slow start, attributed by the Sightsavers ZCO to inadequate start-up planning, staffing changes in the partner organisations and the breadth of the programme's activities, programme implementation in the final eighteen months was impressive. There was effective leadership shown by the Sightsavers ZCO the partners took ownership of elements of the programme that met with their strengths and expertise and worked together effectively to meet the ambitious targets for delivering training and raising awareness.

The modifications to the original bid that were agreed with the funders (eg the inclusion of children with refractive errors) meant that some elements of the programme, such as provision of spectacles to children, were telescoped into a short timeframe and this created pressures.

There remain some activities that will need continuing attention, such as the provision of software for embossers, the delivery of spectacles to some children who were refracted, and rolling out the database to the rest of the districts and resolving issues related to the functionality of the software.

Availability and utilization of human, physical, and financial resources

In general the human resources required to meet the programme aims were made available to the required levels and successfully marshalled as evidenced by the success in meeting the target outputs highlighted in the Effectiveness section above. The evidence suggests that the training element of the programme was delivered by appropriately qualified professionals who had appropriate specialist qualifications such as diplomas in Special Education and the partners made effective use of their contacts to co-opt key national and local individuals with appropriate expertise into the programme as necessary. As highlighted in the ROM (Results Oriented Management) Report (2013), there was a large underspend in the first half of the project, but financial resources were subsequently used effectively, for example in fast-tracking the refraction element of the programme. Although the community sensitisation elements proceeded according to schedule, most other elements of the programme had started slowly due to a range of factors already discussed specifically:

- Inadequate start-up planning
- inaccurate targeting that overestimated the prevalence of visual impairment in the project areas
- low levels of activity in some aspects of the project in the early stages as a result of inadequate planning for the programme start-up

A major threat to the programme was the inadequate expertise in the country for identification and assessment of children with low vision. Through liaison with the Sightsavers ZCO, key staff from Kitwe Eye Hospital and Chainama Hospital were



employed to conduct low vision assessment, organise screening and prescribe low vision aids and spectacles for children with refractive error while private opticians were contracted to provide spectacles for children who had received prescriptions. Staff from the MOE were trained to conduct basic assessments and screening at school level. The delays caused in identifying appropriate vision assessors created severe time pressures and, as Table 2 (p.30) indicates, almost all of the progress in this area was made in the third year.

Scheduling challenges arising from these difficulties meant that key activities such as the procurement and distribution of spectacles were also delayed and the programme administrators were faced with pressures of time to meet the programme goals by the end date. Nevertheless the identification and assessment of children and the provision of equipment met, and in some cases exceeded the targets. One of the elements of the programme, the development of a database for children with visual impairment, has been hindered by difficulties arising from the functionality of the system in the area of inputting existing data from the participating and expertise within the participating schools. Although training was provided to 75% of the participating districts, the utilisation of the database proved patchy. ZCO has undertaken to follow up the implementation of the database in districts where it is not being used effectively. Although ZIEP proved very efficient in its third year, an extension to the programme was necessary to consolidate achievements and for this reason the efficiency of the programme rates as satisfactory rather than highly satisfactory.

Efficiency Rating: Satisfactory: GA

D. IMPACT

- What are the main changes produced by the program, positive or negative and what are the key factors behind these changes?
- What is the relative coverage of services and outputs achieved by ZIEP programme?
- What are the key lasting changes achieved by ZIEP?
- What is the perception of the beneficiaries of the project and its impact?

Positive changes produced by the programme include:

- A. a higher profile for inclusive education in the districts covered by the programme and an increased willingness and ability in mainstream schools where teachers have been trained to recognise and meet the needs of children with disabilities
- B. a change in the role of special schools and units for children with visual impairment and the transition of children with low vision who are print readers away from specialist provision towards education in local mainstream schools
- C. improved access to education for children with refractive errors
- D. increased realisation in communities of the rights of children with disabilities to receive education
- E. increased the institutional learning and expertise in inclusion among the partner organisations (see section on Sustainability below)



No negative changes resulting from ZIEP were apparent.

A. RAISED PROFILE FOR INCLUSION AND INCREASED TEACHER AWARENESS

The evidence that ZIEP had raised the profile of inclusive education in the districts visited came from interviews with administrators and headteachers, discussions with parent representatives and through FGDs with class teachers from mainstream schools who had undertaken local ZIEP training. As an administrator in Choma put it, 'Support from ZIEP has speeded up the move towards inclusive education and to raising awareness among teachers and the community.' In his meetings with Zonal Headteachers the DEBS now checks that special education regularly appears in the termly in-service training of teachers that takes place at school cluster meetings.

Without exception, the DEBS interviewed were positive about the impact of ZIEP on the district management team. They highlighted the provision of transport and their participation in training on IE as key factors that enable them to incorporate IE more effectively into their role. For example the DEBS in Choma reported that 'When we (the Officers) visit schools, the team will be responsible for spreading the training. We will mainstream it into our daily activities. We have a Standards Officer for Special Needs Education. There are regular training sessions for teachers at a zonal level and we will ensure that we will continue by including a special needs element in this training. We will build this into our district strategic plan.'

In Ndola the DEBS and ESO were able to elaborate on the impact of ZIEP. They spoke about the positive impact on schools and the community, arguing that the local training had helped local mainstream schools and colleges in the identification of children with additional needs. In Mazabuka the DEBs said that she sees the development of inclusive practices as a key part of her responsibilities.

The headteacher of a large mainstream school in Mazabuka who had been trained earlier in his career in Special Education was aware of a number of children in his school with additional needs. 'We have a range of children with special needs in this school including children with learning difficulties.' He reported that the school had hosted 3 days training in visual impairment funded by the programme. Teachers from 18 schools in the St Patrick's cluster were involved, a total of 186 teachers.

The headteacher reported that the ZIEP training had changed the perception of teachers towards inclusive education and confirmed that at the zonal level teacher development takes place once a term in school clusters and all teachers from the cluster schools are involved in this training. Clusters contain a range of schools including special schools and this allows issues of inclusion to be raised regularly.

In the same school there was evidence that Parent Teacher Association engages in discussions relating to children with additional needs. The chair of the PTA explained how the PTA executive committee meets regularly with the headteacher to talk about planning issues. 'Our talks always include issues related to special needs.' He said that the headteacher always discusses the placement of children with disabilities with the PTA Executive. He also reported that, although there was a strong feeling among



parents that special schools are still needed, 'the community is understanding of children with disabilities and that they should be included in our school.'

The key evidence that the ZIEP training had impacted on teachers' ability to recognise and meet the needs of children with disabilities and special needs came from the teachers themselves. Teachers interviewed in FGDs were able to describe (some months after the event) the content of the training they received in some detail and explain how it had impacted on their practice with children with a range of needs (including slow learners) in their classrooms.

In the FGD in Mazabuka with fifteen teachers who had attended training, teachers variously reported that 'We looked at different impairments and the causes of HI (Hearing Impairment), VI (Visual Impairment) and PI (Physical Impairment)'. 'We discussed about what was inclusive education.' 'We learnt to consider individual needs and abilities'.

Several teachers in Mazabuka were also able to give specific examples of how their teaching styles have become more inclusive as a result of the training. Typical quotes included 'I tell the children to sit where they are comfortable. I allow them more time to do things'. 'I give the children extra time and one-to-one help when I can. When I talk to the class I face the children so they can see my lips when talking.' I give different kinds of work to the children. I make assignments easier for those who have special needs (learning difficulties). I reduce the amount of work they have to do.'

The FGD in Choma produced similar feedback from various teachers who had attended the training. 'We talked about all the types of disabilities.' 'We learnt to use the correct names for disabilities.' '(As a result if the training) I identified a pupil with problems, I recommended the pupil for screening and then medication was supplied and the pupil improved. The pupil is more alert and responsive'. 'I changed the way I write on the blackboard. I write larger and clearer.' 'I fed back to other teachers (in my school) about the training.' Some teachers also said that they used their training to sensitise the community to encourage attendance at schools of children with disabilities.

There was evidence that over 100 teachers in Choma had received awareness raising on special needs. As in Mazabuka, teachers were able to articulate well the content of their training after a year and were able to give specific examples of how the training impacted directly on changing their teaching to make it more inclusive.

B. CHANGE IN THE ROLE OF SPECIAL SCHOOLS The evidence collected in the field work suggests that ZIEP has had a positive impact on special schools in the districts where it operates in two main ways:

- 1. by enabling special schools to play a role in supporting the development of inclusive practice in mainstream schools through involvement in INSET
- 2 . by helping special schools to target their services to the children who can most benefit from them by helping them to focus on children who cannot read print



ZIEP has made it easier for special schools to engage in outreach work. Teachers from special schools were involved in the delivery of INSET to mainstream schools and with the support of ZIEP, teachers from special schools are linked in with mainstream schools through the cluster system.

ZIEP INSET has sharpened understanding in mainstream schools of the role of special schools and has led them to see that some children with disabilities are properly the responsibility of mainstream schools. As the teacher of St Mulumba's special school in Choma put it: 'Prior to training, teachers in mainstream schools believed all children with special needs should be at St Mulumba's'. 'Teachers are now keen to keep moderate cases in mainstream. St Mulumba's will continue to support and advise. The programme has brought together special and mainstream.'

In Mufulira district administrators confirmed that they had a clearer view of the role of schools and units for the blind, 'The special schools and units are for children who need braille, children with moderate low vision go to their local mainstream school.'

Crucially, as a direct result of input from Sightsavers, there is a recognition in Mufulira that children with albinism should not normally be educated in schools for the blind.

'So we have removed the print users (from the units for the blind) and we leave the blind pupils to learn their (braille) skills. Places for 4 Albinos (children with albinism) have been replaced by 4 pupils needing braille. 2 Albinos have gone to their local schools in Kitwe and 2 to (their local schools in) Mufulira. Albinos (children with albinism) used to sight read braille, now they are print users. Their (mainstream) teachers have been orientated as part of the programme. It happened this year.'

In Mufulira there had been a significant shift in the use of the special school for the blind. Before the project there were numbers of children with low vision who could read print in the special school for the blind learning braille. With the help of Sightsavers they have been reassessed and given low vision devices and moved to mainstream schools with support. In the residential unit for children with visual impairment in Mufulira, the headteacher confirmed that children with albinism are no longer taught at the unit: 'The Albinos have been taken out (of the VI unit) to mainstream.'

This is a major change in practice in special schools and one that is very significant. The placement of children with albinism in special schools for the blind is routine practice in many countries in Africa. These children are normally taught to read through braille, in spite of the fact that with very few exceptions, they will not experience further sight loss and are capable of reading through print. There was no evidence that children with low vision who can read print had been inappropriately placed in schools or units for the visually impaired, they received their education in mainstream schools. For example Gift, aged 9, is boy with albinism in a mainstream school in Mazabuka. 'I started school I at the age of 7, I am in Grade 2. I sit at the front of the class.' (Gift was very quiet but his guidance teacher gave some interesting feedback on his acceptance at school. He was a bright boy who often helped his peers with their school work. He was well liked and fully accepted by his peers.)



A major achievement of ZIEP is that it has facilitated, in a short time, the transition of children with low vision out of special schools for the blind and into mainstream schools. This has been achieved through advocacy in both the special and mainstream schools and the provision of low vision aids for the children with low vision who can benefit from them. This represents a significant and lasting change.

C. IMPROVED ACCESS TO EDUCATION FOR CHILDREN WITH REFRACTIVE ERRORS

ZIEP has targeted a group of children whose needs have previously gone unmet. Children with refractive errors have benefitted academically and socially as a result of the prescription spectacles they have received through ZIEP. Children who have refractive error are often effectively excluded from aspects of education in the mainstream classroom. For example children who are very shortsighted may not be able to read from the chalkboard and children who are longsighted may find it uncomfortable to read from books for prolonged periods. With the correct prescription these refractive errors can usually be corrected to normal.

In Mazabuka one of the children in the FGD underlined the change that a pair of glasses can make. Ida, aged 15 is in Grade 9. She had had glasses for about 3 years.

'As a result of receiving glasses my eyes stopped being red and I could see the board. My position in class was 32 before (my glasses), it is now around 10 or 11. I use my glasses in every lesson'.

In Choma Isaac and Felicitas explained that glasses prescribed and delivered by ZIEP had bought social as well as learning benefits.

Felicitas: 'I used to have to sit in the front (to read from the blackboard), now I can sit with my friends. I used to have to ask (the child next to me for help to read the board). Most times they helped but sometimes they said 'stop asking me all the time!'.

Isaac: 'I use my glasses for reading and writing. Before I needed to go right to the front of the class to read from the board. I used to ask for help (from the child next to me). I only got my glasses last week.'

Sietembo, Grade 8, who was longsighted explained the benefits that glasses had brought him. 'I got the glasses yesterday. I can already read more quickly. Before my eyes hurt when I read (for any time). I don't need them for the blackboard.'

The FGDs with children who had been refracted revealed that the vision screening undertaken in the ZIEP programme captured children who had visual impairment and refractive errors but also others who had symptoms that were temporary (eg conjunctivitis or allergies) that could be successfully treated with medication such as ointments or eye drops. However poverty may mean that some parents cannot afford to buy this medication.

Samuel - aged 15: 'I went to the clinic last year. They told me I didn't need glasses, I needed eye drops. My family hasn't bought them, they are too



expensive (4 ZK = 50p). After reading for 30 minutes my eyes start tearing (watering) and I rub them.'

Maria - aged 12. Grade 5. She had attended the eye clinic. 'I had swollen eyes and a headache. I get it when it is dusty, the light hurts my eyes. I was given drops. I sit at the front of the class. I like school, my teacher suggests to go home (if my eyes are sore) and get medicine.' Maria's near and distance vision tested as normal in a functional vision assessment (non-clinical).

It also became apparent that distribution of spectacles is sometimes problematic. Some children with refractive errors had not yet received the right glasses. It is a 6 stage process: a) children are screened at school or in the community b) children identified as having refractive errors are given individual prescriptions c) the prescription is made up d) the prescription is sent to an optician and the optician sends the spectacles to the DEBS e) the DEBS sends the spectacles to the school f) the school gives them to child. This complicated process caused major logistical problems. Further research would help establish the points where delays and errors are most likely to occur, and how the process can be streamlined.

D. INCREASED REALISATION IN COMMUNITIES OF THE RIGHTS OF CHILDREN WITH DISABILITIES TO RECEIVE EDUCATION

District administrators were positive about the impact of the ZIEP community training, for example the DEBs in Choma reported that:

'They (ChildHope) have worked with us to raise awareness of parents of the rights of children with SEN to education. There has been a shift in ideas from special schools and units to inclusivity.'

Additional evidence for the effectiveness of the training in Choma came from a FGD with parents of children. Discussion through translation was held with parents of children with disabilities whose children attended a special school (6 mothers, 1 father). 3 mothers had attended one of the community sensitisation meetings. They remembered learning about their rights and responsibilities in respect of children with disabilities and what inclusive education was. They remembered covering the common types of disabilities and their causes and 'some of the things we can do as parents'. They felt that that the training helped them to understand how special schools were helping their children and how to continue the interventions at home.

Parents reported that their disabled children are generally well received by their peers out of school. The parents of the VI children hadn't really considered the possibility of their children attending mainstream school. They would be happy if their children attended Adastra (the local mainstream school) for some lessons as long as a teacher from St Mulumba went with them. It was later explained that Sightsavers was working with the special school to promote the inclusion of some children with visual impairment into mainstream lessons.

One parent of a deafblind child who was herself a mainstream teacher spoke about taking her child to lessons in her school. She felt children with disabilities should be educated in mainstream schools. Once she explained to the other children that her daughter could not see or hear well but she could read and write like them, the other children understood and treated her like a friend.



Parents in Choma were also able to provide examples of how ZIEP enabled training has changed their behaviour to allow their disabled children more contact with their neighbours.

'Even at home we must let our children out to play and not hide them away'.

Mother of children with VI: 'When I had training here I learned a lot, before I kept my children in, now they play with others. Now with sensitisation I know that they could come to school. Now they are in school have noticed a great improvement, my daughter can draw water and clean her room.'

E. INCREASED INSTITUTIONAL LEARNING

There is evidence that involvement of a range of partners in the ZIEP programme has promoted institutional learning. The ZCO confirmed that the focus of most of its programmes is prevention of blindness and ZIEP has presented an opportunity to build on its links with communities that have been established through its eyecare programmes. The involvement of ZAFOD has enabled organisations of the Blind to engage with issues of education of blind children and their inclusion in mainstream schools. Similarly ZIEP has helped ZOCS to developed expertise in IE and to expand its original focus on disadvantaged children to include children with disabilities. Perhaps the most persuasive evidence of the institutional learning outside of the partners comes from the decision of Leonard Cheshire Disability to integrate elements of the ZIEP design into its new education programme to support the inclusion of children with disabilities. The collaboration of the partners has created synergies that open up the possibility of future cooperation on the projects in education and disability.

What is the relative coverage of services and outputs achieved by ZIEP programme?

The relative coverage of ZIEP is difficult to calculate. ZIEP operated in 2 of the ten provinces and within 8 of the 89 districts. According to the Zambia Central Statistical Office (2000), Zambia has an estimated population of 256,690 persons with disabilities (135,532 male /121,158 female) of whom 69,896 are children aged 1-18. The WHO estimates (Resnikoff et al 2004) that underpinned the initial ZIEP action plan indicated that Zambia has an estimated 120,000 blind persons, of whom 7,644 are children, and an estimated 15,000 children with low vision or partial sight (although, as was pointed out in the ROM (Valentin, 2013), the WHO figures may represent a considerable overestimate of the population of children with severe low vision and blindness). It was further estimated that there are 3,060,000 persons with un-corrected refractive errors. The relative coverage of the programme as a percentage of national figures appears low but, at the level of the districts where the programme was operating, the coverage (in terms of the number of beneficiaries reached) and the outputs were impressive given the financial resources available.

The hundreds of children with refractive error who were supported by the programme represent only a tiny fraction of the total need in the country as a whole. However considering that this is an innovative, expensive and to some degree experimental service, it is reasonable that the numbers of children treated are relatively small. Nevertheless thousands of children in mainstream schools in the target districts



benefitted from having their vision screened as part of the process of identifying children who were sent for refraction.

The coverage of the awareness raising campaign was extensive including both national television and national and local radio, in English and in local languages. The impact of other elements of the awareness raising such as the district level community awareness training are harder to measure but the evidence discussed above suggest that those who attended the training benefitted from it. The head of the PTA of a special school in Choma for example felt that attitudes towards disability were changing slowly, saying 'Some parents have come to understand the importance of education for children with disabilities. There are still some parents who won't pay for the education of their disabled child; they will send their other children to school in preference.'

The Head of the PTA felt that the training of parents organised by ZIEP had helped make parents of disabled children at the school aware of independence activities that the child performs in school that can be continued at home, and of the need to make the school aware of the successful interventions parents do at home.

Perception of beneficiaries

As evidenced above, the perception of ZIEP among its beneficiaries was uniformly positive. Feedback from DEBS and ESOs at district level was enthusiastic, children appreciated the equipment and aids provided and parents responded positively to the training that they had received. To build on these gains, more work needs to be done to influence change at policy level and efforts should focus on advocacy for the development of a national implementation plan for inclusive education.

On the evidence of the findings above a Highly Satisfactory rating for the impact of the rating is fully deserved.

Impact

Rating: Highly Satisfactory:



E. SUSTAINABILITY

To what extent is the program integrated into national and local level education system planning and implementation?

The programme appears more closely integrated into local and district level education system planning and implementation than into national system planning and implementation. This is in part a result of the decentralisation of education and also a result of difficulties in engaging central education planners in developing a national body with responsibility for IE (see Section on Effectiveness above). Although there was a focus in the ZIEP project on Community Schools the increasing integration of Community Schools into national planning and district structures allows for sharing of good practice through the cluster system.

As the DSO for Special Education in Mazabuka observed 'This year we have trained 20 teachers (at district level). We also screened for visual impairment in 10 Zones.



About ten schools were screened, 3 Community Schools and the rest primary basic (government) schools. We also screened the Malaika (cluster) schools. 1,872 children were screened for refractive errors.'

At district level the programme has facilitated implementation through the provision of motorbikes that enable DSOs with responsibility for IE and other officers to visit the field to provide training and monitor progress. 'We have received a motorbike, we use it to monitor, and it is cheaper than cars. It is mostly used by men, women don't like riding them.' (DEBS, Choma)

As has been demonstrated in the Impact section, the work of ZIEP has informed district managers about the needs of specific groups of children such as children with albinism and led directly to a change in placement decisions that make it more likely that children with low vision who are print readers will attend schools closer to their homes. This is likely to be a long term change in direction and constitutes a beneficial and sustainable development.

The provision of bicycles has enabled districts to facilitate outreach work by teachers in local schools who have training in special education. For example Luke, one of the teachers who attended the FGD in Mufulira, had been trained at ZAMISE in the generic special needs programme. He is based at a mainstream basic primary and engages in community awareness raising (sensitising) and support for children with disabilities in other Community Schools. He is assigned by the DEBS office to go out into the community to give advice. His lessons are covered when he does outreach work in remote areas. He goes out twice a month to do work in the Community Schools and talk to parents. His bicycle trips involve crossing a crocodile-infested river. Bicycles constitute a cheap and sustainable means of increasing the mobility and reach of teachers trained in Inclusive Education.

The establishment of district coordinating committees should also help sustain a focus on IE. In Mufulira the DSO (Special) described a taskforce that was made up District Commissioner, Town Clerk, Medical Representative, a parent representative, an ophthalmologist who worked together to design the training offered in the district.

To what extent are Inclusive education and ZIEP activities integrated into the institutional framework of the Ministry of Education at the district level in the districts where the programme operated?

At a local level the programme is a good fit with the institutional framework established by the MOE in the districts. As stated elsewhere, ZIEP has capitalised on the cluster system as a means of raising issues of IE in the in-service training meetings that occur termly. There is reason to be optimistic that this development will continue to be integrated into practice into the future in areas such as Choma where this has strategy already been taken on by the DEBS.

The database that is being implemented is designed to track the progress of children with visual impairment has the potential to improve institutional practices at both local and national level. The software could potentially help record and track the progress of children with a range of disabilities in addition to children with visual impairment.



Currently at district level most records of children, where they are available, remain in paper form.

In Choma the DEBS reported that there was a system for record keeping at district level but it did not identify children with special needs. 'We need to tease out how special needs are progressing'. Unfortunately the Statistical Officer from the district had not attended the training organised by ZIEP, but the administrators confirmed that they had received the software. Software for record keeping has been delivered but further training will be necessary to help set up the database. 'We have not used it yet. The technical support officer from Sightsavers will visit and help us import the software into Excel.'

In Mazabuka, deployment of senior staff at District level has disrupted the establishment of database provided by the project. The DSO reported 'The database is no longer available; the administrator who went for the training has moved and taken the laptop and software with her. We need the CD to put it on the desktop in the office. 'Data on children is still largely paper-based in this district'.

Where the database is available there is evidence that it can be useful. For example in the unit for children with VI in Mano, the headteacher reported that the database is used for tracking the progress of the children with visual impairment 'even those that have gone to other schools'. The headteacher said that the system was 'easy to operate'.

A key element of ensuring ongoing support and monitoring of the ZIEP activities is the full implementation of the database at district level. This is one of the areas of the programme that has not been satisfactorily established due to a combination of a late start, and a lack of a coordinated response.

In relation to the training of class teachers about inclusive practices, there is evidence that the training provided to the districts will continue. There are plans in Choma to continue training in special needs throughout the district at zonal level using the training provided by ZIEP as a template.

'The ZIEP training has helped us; we can replicate the training using the skills gained from ZIEP. It will be delivered by district people. Expertise has been gained to deliver training in the future. It has showed us how to organise the training and what to include'. 'Training will continue. Next year we hope to continue the training (in Special Needs) to train all the teachers in the 92 primary schools, it will be basic training in the recognition of special needs. We have already trained teachers in 1 Zone with ZIEP funding.'

The head of the PTA felt that the sensitisation of parents would also continue after the ZIEP funding had finished 'at open days, and at the end of terms'.

However the work on supporting children with refractive error through the provision of spectacles is unlikely to be integrated into the practice at the district level. As was pointed out earlier the provision of spectacles to children with refractive errors is a technically complex, expensive and logistically difficult process that requires the mass screening of children in schools and the engagement of a private provider to



make the glasses. Although there were examples of very successful outcomes for children who had been prescribed spectacles, the expense involved makes it unlikely that it will continue at local level unless there is external funding, possibly related to health rather than education to support screening and the provision of prescription glasses.

What are the key factors which will ensure the sustainability of the programme beyond external funding from the sponsors?

The key factor that will sustain the ZIEP programme beyond the funding from the EU is the institutional learning that has taken place in the partner organisations as they cooperated in the delivery of the programme. ZAFOD had made use of the programme vehicle in the ZIEP work and cooperation with Sightsavers will continue after the programme. ZAFOD has plans to extend the work on the promotion of inclusive education in other provinces where its member organisations work.

Sightsavers country office has been able to develop a clearer view of inclusion that takes its work beyond support for special schools and units into mainstream classrooms through its links with district planners and Community Schools.

It should also be possible to sustain the gains of ZIEP because of the continued engagement of the partners in the districts where ZIEP operates. Sightsavers has well established links with the districts through its eyecare programme and other partners such as ZOCS and ZAFOD have links across the country where the institutional learning developed by the programme can be applied.

The overall rating of Satisfactory rather than Highly Satisfactory in relation to sustainability relates to the fact that the sustainability of the programme will be influenced by the success of the interventions to improve the coordination of IE at national and district level. Success in this area remains to some extent dependent on the successful completion of the database and a successful national symposium on IE. The rating also reflects the fact that the refractive error element of the programme will be dependent on outside funding for its continuation. However if ZIEP can embed the database into national and district planning systems then a Highly Satisfactory rating would be merited.

Sustainability

Rating: Satisfactory:



F. COHERENCE/COORDINATION

To what extent has the ZIEP systemically created synergies with other programmes within the districts, towards achieving the defined objectives and goals over time? What specific mutually reinforcing policies have been promoted by the project over time to create these synergies?

As noted earlier, ZIEP has been very well coordinated with other district level



programmes. It has built on some earlier government initiatives such as INSPRO (Inclusive Schooling Programme) and with the Community Schools system.

Within the partner organisations ZIEP has created institutional synergies. ZAFOD for example felt that the organisation and its members had benefitted from involvement in ZIEP. ZIEP had generated institutional learning around issues of inclusion that has been assimilated into other major national programmes that ZAFOD is involved in such as the Child Grant Project - a cash transfer program to households with any child under 5 years old.

ZIEP has helped administrators, schools and teachers towards a broader view of inclusion that goes beyond traditional narrow categories of disability. The programme has created opportunities for possible links with work of other agencies that are operating in other districts of Zambia. For example, the evaluation revealed that VISIO, a Netherlands based organisation, is involved in plans to develop low vision training at ZAMISE and that Leonard Cheshire Disability has started up a disability linked education project These links need to be followed up to share the ZIEP findings and to avoid duplication of effort.

The project has promoted links between Health and Education, especially in work relating to children with low vision. As has been seen, Sightsavers was able to exploit its expertise in eye-care and blindness prevention to mobilise support for children with low vision in the programme.

The programme has also served to link Community Schools that have a tradition of including disadvantaged children directly to organisations for, and of, the disabled within districts through links with ZAFOD and ChildHope.

Given that the education provision for children with complex disabilities remains largely focused on special schools and units, the focus of the programme in creating synergies between existing specialist provision and mainstream schools as a way of promoting inclusion was justified. As discussed earlier, there is evidence that ZIEP has been a powerful agent in helping specialist provision to become more outward looking by affording opportunities for engagement with other mainstream schools and helping them to focus on the children who can benefit most from their expertise. It has also helped district education administrators to develop a clearer understanding of the role of the special schools that are in their districts and of how their expertise can be harnessed to the advantage of promoting inclusion in mainstream schools. As can be seen from the evidence, children with low vision are now less likely to be placed in special schools for the blind and inappropriately taught braille. This is a direct result of the synergies created by the programme.

Rather than attempting to establish new types of provision, ZIEP has sensibly built around existing provision for children with disabilities, taking a balanced view and seeking to promote synergies across a continuum of provision that includes special schools, specialist units attached to mainstream schools and state and Community Schools working together at a zonal and district level.

How have the ZIEP activities been coordinated in light of similar or other sectoral interventions/approaches in the districts covered by the program?



The range of partners in ZIEP has helped ensure that ZIEP activities have coordinated with the district sectoral approaches. For example the Community Schools represent a key sector in education in the target districts and are at the forefront of inclusive practices in relation to disadvantaged children through their work with orphaned children and children affected by the HIV crisis. As has been shown earlier in this report, ZIEP activities have been coordinated effectively with other sectoral activities such as in-service training for teachers and the activities of school parent bodies.

What ongoing support and/or monitoring mechanisms are needed in the ZIEP districts to ensure the initiated activities are sustained? How has the project nurtured these mechanisms to date?

There are particular strands of the project that will require careful monitoring going forward. As part of its work, ZIEP has supported the training of 13 specialist teachers of the visually impaired from Community Schools across the districts on the two year fulltime training programme at ZAMISE. The deployment of these teachers presents opportunities for taking forward the inclusive education agenda over time.

In Choma it is planned to use ZAMISE trained specialists as resource persons to support INSET activities. According to the ESO (Special Education), 'They will stay in the schools where they are where they will have a role in improve the skills of others in their school. They will be used four times a year as trainers at a district level as well as influencing and supporting cluster activities.' Similar plans are in pace in Ndola. However when the teachers were interviewed at ZAMISE they were uncertain about their future role and the extent to which they would be able to use their training. They felt that this would not become clear until they had met with their DEBS in their region.

Although all the students signed a document before the start of their training agreeing to return to their schools and undertaking to contribute to district training, greater clarity is needed about the precise nature of their roles. As things stand at present, the teachers will be returning to their Community Schools, but given that only one of the teachers currently has a child with visual impairment at her school, it is unlikely that the teachers will be able use their specialist skills supporting children with visual impairment in their own classrooms. These teachers could take a role in training both within their own schools and in termly cluster school INSET. Perhaps a more creative role that would allow synergies with other community-based programmes, would be to deploy these teachers in outreach roles. This is a role already performed by some of the community school teachers interviewed in the FGDs who were released for one to two days a week to go into the community to promote awareness about inclusive education and identify children currently out of school. It is essential that a shared understanding is developed between regional and district administrators and headteachers to ensure that the teachers trained under ZIEP are deployed in a way that will allow them to maximise their training. There is some urgency in this since the teachers are just reaching the end of their training. The MOE is the chief partner responsible for actioning this, but Sightsavers and ZOCS should continue to work with the MOE to ensure it happens.



As discussed earlier another area that requires ongoing attention and monitoring relates to the development of the database for children with visual impairment. In the absence of suitable off-the-shelf software, ZIEP had to commission the development of a suitable system. Although training was held for administrators and teachers and software was supplied to support the collection of data, it was clear that in some cases the data collection has yet to be started. The database offers real opportunities as a tool for monitoring the impact of ZIEP over time, especially in areas such as the academic progress of children whose vision has been refracted, and children with low vision who have received low vision devices.

Continuing attempts also need to be made by all the partners to promote the concept of a national symposium on IE, led by the MOE that will establish a national coordination body for IE that can take on board some of these ongoing issues. The development of written advice for schools in the form of manuals on promoting inclusive practices could be part of this process. The satisfactory rating for Coherence/coordination reflects the fact that ZIEP has met most but not all of the criteria in this area.

Coherence/Coordination

Rating: Satisfactory:



G. SCALABILITY/REPLICABILITY

Is there any likely ability of the program or its components to be scaled or replicated by other agencies or government? What are the key factors leading to the scalability of the program in other regions or countries? Who are the main actors in the scale-up/replication and how has the project engaged with them to date?

There are a number of fascinating elements of this programme that have the potential to be scaled and replicated by other agencies.

As was highlighted, the work on refractive errors presents many difficulties for upscaling but nevertheless represents groundbreaking work in this area. The lessons learnt from the large scale screening involving thousands of children and the refraction of hundreds of children have provided valuable learning that needs to be captured and shared with a wider international audience both within Sightsavers and across the eyecare community.

The project has provided anecdotal evidence that provision of appropriate spectacles has the potential to improve the academic and social development of children with refractive error. The programme has created the potential to monitor the progress of these children over time that might provide a measurable indication of impact. This may need additional resources and expertise but is a potential research project for eyecare specialists.

The logistical and practical lessons learnt from this element of the programme such as the organisation and outcomes of mass screening in mainstream schools, the



sourcing and distribution of spectacles, and the children's use of spectacles once they are supplied, all present opportunities for further investigation.

There are specific lessons that also need to be shared, such as the need to provide advice about the use of spectacles to parents and children. For example in the FGDs with parents it was apparent that there is a need for training to children and written advice to parents about what glasses and low vision devices are for, when they need to be used and how they should be stored and maintained. Without this children may reject them and parents may not encourage their use.

The changes described in special schools for the visually impaired that were facilitated by the programme in terms of their involvement in outreach work and INSET in mainstream schools has great potential for replication in other districts. Seeing a role for special schools as agents to promote inclusion can generate change in special schools and in mainstream provision across Zambia. The district level structures for INSET are in already in place to facilitate this change and making inclusive education a mandatory agenda topic in cluster meetings would be a simple way of raising awareness of all teachers on inclusive teaching practices that will benefit all children with additional needs in their classes. The key factor in the scalability of this component of the programme is a buy-in from the MOE at national level and this could be facilitated by the national coordination body for IE.

Related to this element is the education placement of children with albinism. In many countries around the world children with albinism who read print are routinely placed in schools for the blind and taught inappropriately through braille. The work of this project in supporting the placement of these children in local mainstream provision has the potential to be replicated throughout the country and internationally. Obviously the needs of individual children with albinism will need to be considered first and change of placement should only take place when the resources in the form of appropriate visual and academic assessment and appropriate resources are made available. Nevertheless, the appropriate placement of children with albinism in mainstream schools can bring benefits to them individually but can also allow schools for children who are blind to focus their expertise in children with little or no vision who need their help most.

A striking element of the ZIEP programme was its ability to capitalise on the decentralised educational structure adopted by the MOE. The appointment of an Education Standards Officers (ESO) with a remit for special education alongside ESOs with general responsibility signifies commitment to issues of disability and educational inclusion. However the strongest potential for embedding inclusive factors in local mainstream provision comes from the organisation of schools into clusters. There is evidence that the potential gatekeepers for the promotion of inclusive practices are the cluster headteachers. Targeting them with training would be a cost effective way of promoting inclusive practices and philosophies at a local level. Practice is potentially amplified when the cluster contains a range of schools, such as Community, Government and special schools and units. Clusters provide a forum for the sharing of practical experiences and expertise in meeting the needs of all the children in the community and changing the culture within schools. The clustering of schools as a mechanism for promoting change is a system that could



work to the benefit of other countries but would require a major change in systems in countries where schools clusters are not already in place.

The reason a Satisfactory score has been given for Scalability/Replicability reflects the fact some key elements of the programme strengths such as the work with clusters is specific to the Zambian system, and without further research and evaluation the work on refractive errors cannot be considered replicable at present.

Scalability/Replicability

Rating: Satisfactory:





5. SUMMARY/CONCLUSION AND RECOMMENDATIONS

The ZIEP project was a wide-ranging and complex project involving a range of partners operating across a range of environments. It was consistent with the country's education policy and its EFA goals. It has addressed key issues relating to the exclusion of children with disabilities and additional needs from quality education and meaningful learning opportunities. As the ROM pointed out, the internationally recognised good practices for inclusive education i.e. policy advocacy, data management, community sensitisation, teacher education and provision of learning materials and equipment was sound.

The project was hampered by some design faults including inaccurate baseline statistics that may have over-estimated the prevalence and number of blind children in the districts covered by the project. These faults were addressed in the revised project plan. The change in direction required a review of the workplans and modification of the activities and a no-cost extension of the programme to ensure that these were well consolidated. Some distinct advantages that resulted directly from the design changes include the extended coverage of the project to children in special and public schools, and to children with refractive error.

The final eighteen months of the project saw major productive activity that addressed the elements of the programme that were subject to delay. These targets included specifically: visual assessments of children, the development of curriculum review for braille users, the public advocacy campaign and the development of the database. By the close of the programme all the key targets have been met or exceeded in the key areas:

1. Identification and assessment of children with visual impairment and refractive error

This was achieved with 928 children assessed and treated against a target of 615. This constitutes a major achievement given the timescale in which it was achieved. The major credit for this must go to the Sightsavers ZCO team who provided strong leadership in the in the turning round of the project with the partners and the DEBS.

2. Provision of learning materials, specialist equipment and vision aids to schools. The provision of materials to schools was subject to delay. This created time pressures to source and deliver the materials and equipment to schools. In spite of these pressures, the evaluators saw evidence the equipment had been successfully delivered and was being used to improve access to quality education. There was evidence that the provision of spectacles to children with refractive error has the potential to significantly improve the attainment of children and their participation in school, although careful thought will need to be given to the lessons learnt from this exercise before any thought can be given to scaling it up. Nevertheless the institutional learning for both health and education services proved extremely valuable.



practices at a district level.

- 3. Training of specialist teachers of the visually impaired
 Teachers were interviewed at the end of the training. 13 of the 16 teachers from
 Community Schools have successfully completed their training at ZAMISE. In order
 to maximize their training teachers will need a recognised role in the development of
 inclusive practices at a district level. There are a range of functions that they could
 fulfill including: providing in-service training, advice and support for colleagues
 working with children with additional needs in mainstream classrooms; outreach work
 in communities: the orientation of regular classroom teachers in inclusive practices.
 This will require the development and monitoring of a schedule to release these
 teachers from their regular classroom duties to support the development of IE
- 4. Strengthening the capacity of mainstream schools to meet their needs through the orientation of teachers in inclusive practices

The evidence from the FGDs with teachers suggests that the extensive training of teachers organised at district level had an impact on teachers' capacity to understand the needs of children with disabilities. Particularly pleasing was the ability of teachers to be able to identify practical changes that they could make to their teaching styles that would make their teaching more inclusive and benefit all children (for example differentiating work to meet the range of ability needs in the classroom). A focus on the simple changes that can make teaching and learning more inclusive needs to underpin future interventions.

5. Improving understanding of inclusion in local communities
The training offered to parents of children with disabilities was well received and parents were able both to remember the training they had received and to give examples of the positive ways that it had impacted in the relationships with their children and their increased willingness to allow their children to participate in community activities. The extent to which such activities can change deep rooted cultural views of disability will only become apparent over time, but the training has afforded a template for continuation of awareness raising at district level.

6 Improving the policy environment

The work of ZIEP in convening a national response to issues of access of braille users to the curriculum has been a positive step. Although the focus was chiefly on improving access for children who are braille users, it sends strong messages about the importance of building inclusivity into national curriculum planning. It is unfortunate that the MOE were not able to respond in time to hosting a national symposium on Inclusive Education that might have led to the development of a coordinating body to influence policy implementation, but effort in this area should continue. The engagement of different stakeholders at national and district level has generated debate and discussion on inclusion that has increased awareness of inclusive education and the shortcomings of current policy and practice among administrators and teachers. Effective use of the media at national and regional level has served to provoke further debate at community level and to raise the profile of inclusion issues and serves to improve the chances of children with disabilities who are out of school entering the education process.

Additional work will be needed to ensure that the some elements of the programme are fully operationalised. Further work will be needed to ensure that:



- the database for children with visual impairment is embedded into district level administration
- children who have been refracted, and are waiting for spectacles, receive them
- the necessary software is made available to activate the braille embossers supplied by the programme.

Recommendations

Feedback on the conclusions and recommendations were provided to the programme partners at the end of the fieldwork. The ZIEP partners should build on the successes of the programme and the key recommendations to help them do this are to:

1. Draw upon lessons learnt from refraction exercises and continue to collect data on attainment of refracted children.

The screening of children in mainstream schools for refractive errors is a particularly interesting element of ZIEP. In most countries in the South there are many children with refractive errors in mainstream schools. Children who have refractive error are often effectively excluded from aspects of education in the mainstream classroom to the same extent as children with visual impairment. For example children who are very shortsighted may not be able to read from the chalkboard and children who are longsighted may find it uncomfortable to read from books for prolonged periods. This is likely to impact on these children's academic performance and ultimately their school attendance. With correct prescription these refractive errors can usually be corrected to normal. There are findings in ZIEP that deserve further investigation, specifically in relation to the impact that refraction has on academic attainment and social inclusion, the issues raised by the implementation of large scale screening and the management of the process of sourcing and distributing glasses in rural areas.

Valuable lessons have already been learnt about the need to provide guidance to children, parents and teachers about what spectacles and low vision devices are for, when they need to be used and how they should be stored and maintained. It has also shown how important it is to consider the robustness of spectacle frames when they are prescribed for use in school.

This aspect of ZIEP merits follow up and further investigation, perhaps through a joint health/education funded longitudinal study that follows up children who have received spectacles and provides a cost/benefit analysis of the correction of refractive error.

2. Follow through the strategy for deployment of the ZAMISE trained teachers at Community Schools and monitor their input at community and zonal level.

The ZIEP programme funded 13 teachers from Community Schools to attend a two year training programme at ZAMISE for teachers of the visually impaired. The precise role that these teachers will perform when they return to their schools



appears to be not well understood by the teachers themselves or by the DEBS in the districts where these teachers will work. In order to maximise the effectiveness of their training, these teachers will need opportunities to be released from their responsibilities as class teachers to contribute to the development of IE practices in their districts. This work might take a range of forms including providing in-service training, advice and support for colleagues working with children with additional needs in mainstream classrooms; outreach work in communities to raise awareness and identify children with disabilities out of school; the orientation of regular classroom teachers in inclusive practices.

Unless there is direction from national and provincial level administrators and a consensus among education managers and administrators about a sustainable strategy for the deployment of these teachers, there is a danger that these teachers may not be able to use their new skills and expertise.

3. Follow up the development of the ZIEP database to ensure that all districts covered by ZIEP incorporate the facility into their practice.

The database developed and distributed by ZIEP has the potential to impact positively on the capacity of districts to track the recruitment, retention and the academic attainment of children with severe visual impairment and children with refractive errors who have been treated by the programme to measure the impact over time of refraction and the effectiveness of aids provided to them. The database could then be extended to capture information on children with other disabilities. Linking the information in this database to existing databases kept at provincial and national level may help to provide a better understanding of the coverage and effectiveness of education services for children with disability in the country as a whole.

3. Provide the MOE with lessons from ZIEP that can help promote inclusion in other districts at no cost.

There are elements of ZIEP that merit replication in other districts outside the ZIEP areas. Some of these can be applied at low or no cost. One example would be to exploit the potential of the cluster system to promote understanding among teachers in mainstream schools about issues of IE. It would be possible for example to make discussion of inclusion issues a required component in termly zonal level INSET meetings for teachers. The experience and expertise gained by ZIEP in the training of teachers in mainstream schools could be captured in guidance manuals for potential trainers in other districts. A simple guidance manual could provide trainers with advice about the organisation, content and delivery of training in inclusive education to mainstream schools. The content should focus on how teachers can be encouraged to change their classroom practices to make them more inclusive and how schools can adapt their environments to welcome all children. Similarly, building on the ZIEP expertise gained through disability/IE awareness raising in communities, templates for awareness raising sessions could be distributed to other NGOs and agencies involved in similar work in other regions of the country. 4. Continue to develop a pan-disability approach in the work of the partners that takes account of children with additional needs already in mainstream schools

Although the main focus of the ZIEP programme was on children with visual impairment and refractive error, elements of the programme such as training in



mainstream schools and community awareness raising addressed the wider issues relating to other children with different forms of complex disability and, crucially, children in mainstream schools who have additional needs which although not severe, impact on their attainment. This will include children such as those with moderate learning difficulties and children with emotional and behavioural difficulties. There is still a pervasive focus on children with complex disabilities in the dialogue on IE education in Zambia, and ZIEP has demonstrated the need for agencies that work in disability to extend the scope of their work to promote understanding of the broader range of children with additional needs who are, and always have been, in mainstream classrooms.

5. Continue to influence change in specials schools and units that will enable them to share their expertise with mainstream schools and allow children from specialist provision to transfer to mainstream schooling where it is in the children's interests

There have been interesting developments in ZIEP that stem from work with special schools and units. ZIEP has influenced practice in residential schools for the visually impaired by encouraging them to focus on children who need to learn through touch. In many countries children who have low vision (such as children with albinism) are inappropriately placed in schools for the blind and taught through touch when, with appropriate support, they can learn to read and write through print and find success in mainstream schools. ZIEP has supported the transfer of children with albinism from residential special schools and bases to mainstream provision closer to their homes, increasing the understanding in special schools about low vision and helping district education managers to understand issues relating to the educational placement of children with low vision. Also by using teachers from special schools and units to design and deliver training programmes for teachers in mainstream schools, ZIEP has helped specials schools forge links with schools in the nearby community, opening up opportunities for children with visual impairment and other disabilities who are currently in special schools to receive at least some of their education in local schools.

6. Continue to press for a national symposium on inclusive education that will take forward the debate in Zambia

Attempts by Sightsaver and other partners to facilitate a national symposium on Inclusive Education have been unsuccessful to date. Although policy in Zambia recognises the need for a view of inclusion that goes beyond narrow categories of disability, practice in Zambia is still largely focused on support for children who have complex disabilities. ZIEP partners should continue to advocate for a national symposium, led and owned by the MOE, that will promote the development of a coordinated national strategy on inclusive practices in mainstream schools and will develop a shared understanding among stakeholders about IE practices. There are already some very positive steps taken by the MOE in this area, such as the incorporation of an element of special needs education into all initial teacher training, that could be usefully built upon.

7. Adopt a proactive approach to ensure that the expertise and lessons learnt from ZIEP are shared with other NGOs and INGOs operating in related areas.



ZIEP partners should ensure that the expertise and lessons learnt from ZIEP are shared with other NGOs and INGOs operating in related areas. There are encouraging signs that this is already happening, for example through the adoption by Leonard Cheshire Disability of successful ZIEP strategies into their work on disability and education. However there are initiatives such as the planned involvement of Visio, an NGO from the Netherlands, in a project with ZAMISE related to training in low vision that ZIEP partners should engage with. A proactive response by ZIEP partners to new initiatives in IE will ensure that the valuable lessons learnt from the work of ZIEP will inform new developments and help prevent duplication of effort, allowing them to build on the synergies ZIEP has created.



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ANNEXES

Annex 1 - Evaluation Criteria Rating

G	Highly Satisfactory	There is strong evidence that the evaluated initiative <i>fully meets all or almost all aspects</i> of the evaluation criterion under consideration. The findings indicate a highly satisfactory, largely above average achievement/progress/attainment and potentially a reference for effective practice.
GA	Satisfactory	There is strong evidence that the evaluated initiative <i>mostly meets</i> the aspects of the evaluation criterion under consideration. The situation is considered satisfactory, but there is room for improvements. Achievement/progress/attainment under this criterion is potentially a reference for effective practice. There is need for a management response to address the issues which are not met.
A	Caution	There is strong evidence that the evaluated initiative <i>partially meets</i> some aspects of the evaluation criterion under consideration. There are issues which need to be addressed and improvements are necessary under this criterion. There is need for a strong and clear management response to address these issues. Evaluation findings are potentially a reference for learning from failure.
AR	Problematic	There is strong evidence that the evaluated initiative is borderline in terms of meeting the aspects of the evaluation criterion under review. There are several issues which need to be addressed. Evaluation findings are potentially a reference for learning from failure. There is need for a strong and clear management response to address these issues.
R	Serious Deficiencies	There is strong evidence that the evaluated initiative <i>does not meet</i> key aspects of the evaluation criterion under consideration and is performing poorly. There are serious deficiencies in the evaluated initiative. There is need for a strong and clear management response to address these issues. Evaluation findings are potentially a reference for learning from failure
NE	Not Sufficient Evidence	There is not sufficient evidence to rate the evaluated initiative against the criterion under review. The programme needs to seriously address lack of evidence in their initiative.



Annex 2 - Evaluation Matrix

		Data Collection Technique		
	Key Evaluation question to be addressed	Primary Data Tools	Secondary Data Tools	Data Source
1.	 How relevant and what is the value added by ZIEP to local and national development priorities and policies? How appropriate is the ZIEP strategy in relation to the needs of beneficiaries, sector strategy, and the Government of Zambia's education for all programmes. Was the design of the programme the most appropriate and relevant as a strategy of addressing problems of children with disability in particular those with visual impairments in Zambia? 	Documentary Evidence especially: ZIEP Project Proposal; ROM Reports; Partner quarterly reports; KPIs; MoUs and Agreements; Country Strategy Paper; National policy papers.	Semi structured interviews (face to face or Skype)	Senior MOE and MOH reps Sightsavers Regional/Country Office director Beneficiaries including children, teachers and stakeholders



2	Effectiveness			
2.	 How has the program performed against its objectives and needs identified and included in the project document? What are the reasons / factors contributing to success or failure to meet these objectives? Are the districts equipped with necessary resources and capacity to provide quality inclusive education to all children? What is the relative coverage of services of inclusive education activities in the selected districts? How have out of school children benefited from this program and what is the extent of these benefits (e.g. numbers enrolled in school, numbers reached with interventions, quality of service etc.) How effective are the various originally proposed strategies/approaches in terms of delivering ZIEP's change outcomes particularly in increasing number of visually impaired children accessing education services? What are the key internal and external factors that influenced (positively/negatively) the achievement of the programme? 	ZIEP Project Proposal; ROM Reports; Annual reports.	Inventories of equipment in schools Semi structured interviews Observations	Sightsavers Regional/Country Office director District programme coordinators including representatives of partner organisations Senior MOE and MOH reps Beneficiaries including teachers and stakeholders, children in and out of school
3	How efficient was program implementation and what were the key factors leading to very efficient or less efficient programme implementation? In particular, how did the following influence the delivery of the programme: Governance structure of the partner organization and ownership; Overall program management and administrative support to achieve overall objective of the program; Availability and utilization of human, physical, and financial resources to deliver activities and intended results?	Annual Reports 2011- 2014 Partner quarterly reports	Semi structured interviews	Senior Partner representatives National and district programme coordinators
4.	Impact • What are the main changes produced by the program, positive or negative and what are the	ROM Reports; Partner quarterly	Semi structured	Beneficiaries including children, teachers and



	 key factors behind these changes? What is the relative coverage of services and outputs achieved by ZIEP programme? What are the key lasting changes achieved by ZIEP? What is the perception of the beneficiaries of the project and its impact? 	reports; KPIs	interviews Observations	stakeholders. National and district programme coordinators Sightsavers Regional/Country Office director
5.	 To what extent is the program integrated into national and local level education system planning and implementation? To what extent are Inclusive education and ZIEP activities integrated into the institutional framework of the Ministry of Education at the district level in the districts where the programme operated? What are the key factors which will ensure the sustainability of the programme beyond external funding from Sightsavers. 	National policy papers; Country Strategy Paper;	Semi structured interviews Observations	Senior Partner representatives including Senior MOE and MOH reps National and district programme coordinators
6.	To what extent has the ZIEP systemically created synergies with other programmes within the districts, towards achieving the defined objectives and goals over time? What specific mutually reinforcing policies have been promoted by the project over time to create these synergies?	Partner quarterly reports; Annual reports from districts	Semi structured interviews Observations	District programme coordinators National and district partner representatives
7.	How have the ZIEP activities been coordinated in light of similar or other sectoral interventions/approaches in the districts covered by the program? What ongoing support and/or monitoring mechanisms are needed in the ZIEP districts to	Partner quarterly reports; Annual reports from	Semi structured interviews Observations	District programme coordinators National and district





	ensure the initiated activities are sustained?	districts		partner representatives
	How has the project nurtured these mechanisms to date?			
8.	Scalability/Replicability			
	• Is there any likely ability of the program or its components to be scaled or replicated by other agencies or government?	Analysis of the results of the evaluation	Evaluation report	Evaluation team
	• What are the key factors leading to the scalability of the program in other regions or countries?			
	Who are the main actors in the scale-up/replication and how has the project engaged with them to date?			



Annex 3 - Evaluation Timetable

ZAMBIA INCLUSIVE EDUCATION PROGRAMME END OF PROJECT EVALUATION 2014 $\underline{\textbf{24}^{\text{TH}} \text{ NOVEMBER TO 5}^{\text{TH}} \text{ DECEMBER 2014}}$

Time/Venue	Activity	Purpose	Participants	Team Leader
	Monday- Nove	ember 24 th 2014- Consultant Ar	rives in the Country	
	Day	1 Tuesday 25th November 2014	4	
08:30- 9:30 hrs.	EU delegation	To update the delegation on the evaluation process and timeframe.	EU, Sightsavers	Mutinta
10:00 – 11.30.	ZIEP Program overview	Understand and appreciate the context of the project, the progress made and the challenges that still remain	Sightsavers Staff	Kennedy
11.30 – 12.30	ZAMISE – FGD with ZAMISE students	Interact with teachers under ZAMISE training programme	ZAMISE teachers	Kennedy
15.00	Travel to Mazabuka			
	Day	2 Wednesday 26th November 2	2014	1
08:30-09.30	Meeting with the DEBS and ESO Special	Overview of education at district and status of the inclusive education	DEBS, ESO Special	Kennedy
10:00 – 11.30	Meeting at St Patrick's (FGD)	FGD conducted with Learners from 4 schools	Learners	School Head
11.30 – 13.00	Meeting at St Patrick's	FGD Parents	Parents	School Head
14.30 – 15.30	Meeting at St Patrick's	Focus group discussion with Teachers	Teachers	School Head
16.30 hrs – Trav	vel to Choma District			



		Day 3 Thursday 27th		
08:30 – 09:30 DEDBS office	Meeting with the DEBS and ESO Special	Overview of education at district and status of the project(enrolment Community Schools, teachers, T/L materials, strategic focus – relevance, sustainability potential impact, gender issues and challenges, quality issues	DEBS ESO Special	Kennedy
10:00- 11:30	Meeting St Patricks (FGD)	FGD conducted with Learners from four schools	Learners	School Head/Deputy
14:30- 15:30	Meeting St Patricks (FGD)	Focus Group Discussion with Teachers	Teachers	School Head/Deputy
09:15 – 10:15 DEDBS office	Meeting with the DEBS and ESO Special	Overview of education at district and status of the project(enrolment community schools, teachers, T/L materials, strategic focus – relevance, sustainability potential impact, gender issues and challenges, quality issues	DEBS ESO Special	Kennedy
10:25-10:40	Meeting with Head Teacher St Mulumba and Zonal Head Teacher	Overview of the school and its position in supporting Inclusive Education	Head Teachers	DEBS
10:45-11:15	Observation of a Class in session	Observe children literacy skills in relation to utilization of braille and technology	Head Teacher – St Mulumba	DEBS
11:20- 12.30	Meeting St Mulumba (FGD)	FGD conducted with Learners from four schools	Learners	DEBS
12.30 - 14:00	Lunch break			-



			1	,	
		Day 5 28 th November 2014			
09:00- 10:30	Meeting St Mulumba	FGD Parents and House Parents	Parents, House Parents, Head Teacher	DEBS	
Day 6 Monday 1	1 st December Travel to 0	Copperbelt			
		Tuesday 2 nd December 2014			
08:30- 09.30	Meeting with the DEBS and ESO Special ESO special Teacher	Overview of education at district and status of the project(enrolment Community Schools, teachers, T/L materials, strategic focus – relevance, sustainability potential impact, gender issues and challenges, quality issues	DEBS ESO Special	DEBS	
10.00 – 11.00	Observe an inclusive class in session at Mano School	Inclusive lesson observation	VI and Mainstream learners, VI Teacher and Resource Support assistant	ESO Special	
11.30 -12.30	FGD	Focus Group Discussion with children with Visual Impairment	Pupils	ESO Special	
14.00 – 16.00	FGD	Focus Group Discussion with VI Unit Mano Teachers and area Community Teachers and Community Volunteers.	Special Unit Teachers and Community workers	Kennedy	
Day 8 Wednesday 3 rd December 2014					



08:30- 9:00	Courtesy call on the Provincial Education Officer	To brief the PEO on the purpose of the evaluation and get feedback on the status of inclusive education in the Copper Belt.	PEO PESO	Kennedy			
09:20- 10:20	Meeting with the DEBS and ESO Special ESO special Teacher	Overview of education at district and status of the project(enrolment Community Schools, teachers, T/L materials, strategic focus – relevance, sustainability potential impact, gender issues and challenges, quality issues	DEBS, ESO Special, Head teachers	Ndola DEBS			
10:30- 12.30	Natwange Primary School	FGD – learners with Refractive errors	DEBS ESO Special Head teacher	Ndola DEBS			
11:15 to 12:15	DEBS/ESO Special to advise	FGD – learners with RE to assess any relationship between project interventions and other parameters such as access, performance and participation in class	Children with RE and their teachers	DEBS			
		Travel to Lusaka Day 9 Thursday 4 th December 2	2014				
09:00 -10: 30	Meeting with Childhope	To understand the project from the perspective of implementing partners lessons learnt and challenges of IE in Zambia	Sightsavers/Childhope	Mr Mvula/Kennedy			
11:00 -12:30 ZOCS	Meeting with ZOCS	To understand the approaches used in implementing ZIEP, the success/impact, challenges, lessons learnt, relevance of the interventions	ZOCS Program Officers	Kennedy			
Lunch 12:30-14:	Lunch 12:30-14:00						
14:00- 15:30	Meeting with ZAFOD	To understand the approaches used in implementing ZIEP, the success/impact, challenges, lessons learnt, relevance of the interventions.	ZAFOD Program Officers	Swesha/Kennedy			



	Day	10 Friday 5 th December 1014		
09:00 – 10:00	Meeting with Director Teacher Education and Specialised Services (MOE offices)	Understand strategic direction of inclusive education in Zambia	Director TESS and team	Mr Zulu/Kennedy
10.00 – 12.30	Compile notes for Debriefing			Consultants
12.30 – 13.00	Mini de-brief		Consultants, Sightsavers staff	Consultants
14.00 – 16.00	Sightsavers	To share insights, views, concerns and recommendations from the monitoring visit.	Sightsavers staff, Partners	Glenda