

What works to eliminate stigma as a barrier to educational outcomes for children and youth with disabilities?

The question and the problem

To improve educational outcomes for children and youth with disabilities, barriers to inclusion need to be addressed. Experiences of stigma represent a significant and common barrier facing children and youth with disabilities and this may vary by type and severity of disability. Stigmatisation is a societal process found within communities at individual, interpersonal, organisational, social and institutional levels. Information on approaches to, as well as impact of interventions that address stigma in the context of children and youth with disability in LMIC is generally lacking. The widespread detrimental consequences of stigma related to disability highlight the need for interventions aimed at reducing this stigma. This brief aims to summarise the stigma-reduction interventions (that either reduce or prevent stigma) relating to disability that improve educational outcomes for children and youth with disabilities in LMIC.

Recommendations

- Recommendation #1: Active involvement of children and youth with disabilities and caregivers in the development, delivery and testing of stigma-reduction interventions.
- Recommendation #2: Multi-level and evidence-based stigma-reduction interventions in LMIC addressing a wide variety of stigma need to be developed.
- Recommendation #3: Stronger evaluation of promising multi-level stigma-reduction interventions adapted towards children and youth with disabilities in LMICs.
- Recommendation # 4: Educators to be trained in the detection and delivery of appropriate stigma-reduction intervention strategies for children and youth with disabilities.

“Because stigmatisation is a societal process engrained within the community at individual, interpersonal, organisational, social and institutional level, researchers have long recognised the importance addressing stigma at multiple socio-ecological levels”

- Hartog et al. 2020.

Challenges

Challenge #1: Experiences of stigma is a common barrier facing children and youth with disabilities and this may vary by type and severity of disability.

- Many children and youth with disabilities experience stigma and discrimination in education, especially in LMIC which have a negative impact on their social inclusion and participation in education. If not addressed many children and youth will not enrol, experience high rates of absenteeism or drop out once enrolled in schools.
- Society's attitudes towards disability in general and the common belief that children and youth with disability are unable to learn result in sociocultural barriers. Children and youth with certain types and severity of disability, especially mental health conditions, face greater stigma and discrimination in education.
- Many parents and communities, especially in LMIC do not value educational opportunities for children and youth with disabilities.

Challenge #2: Short-term stigma reducing interventions often only have a transient effect.

- Short-term and once-off stigma reducing interventions, especially those targeting stigma towards mental health conditions do not have a lasting positive effect.
- As there is little evidence of stigma-reduction strategies in LMIC, research has shown that most interventions in HMIC are between half a day and a week with child-focused interventions being generally shorter than adult-focused interventions. Of these, there is a significant lack of involvement and participation of people with disabilities, especially those with psycho-social impairments.
- A lack of funding and resources, as well as a lack of time within the curriculum/school day have been cited as contributing factors preventing long-term stigma reduction interventions from taking place.

Challenge #3: There is a lack of evidence-based stigma-reduction interventions in LMIC.

- Children and youth are often under-represented in stigma reduction interventions in LMIC, with limited interventions addressing stigma with children and youth as direct and indirect target group. A 2020 study found that of the 61 included studies published between 2002 and 2018, only 23% had a child focus.
- Of the limited stigma-reduction interventions, many of the child-focussed interventions focus on community-level strategies and implications (i.e. reducing stigma towards disability in local communities) rather than school-based interventions, with both groups of interventions requiring rigorous evaluations
- Current stigma reduction interventions are not evidence-based and do not consist of strategies targeting differing levels of stigma and challenges including within families, communities, schools, ministry departments such as education, health, finance, as well as other stakeholders including ODPs and NGOs.
- Within the overall dearth of evidence in stigma reduction interventions in LMIC, only a minority of studies evaluate interventions for children and youth which is vital to prevent high-rates of absenteeism and children and youth with disabilities dropping out of school.

Challenge #4: Current teacher training programs do not provide student teachers with knowledge and skills on disability or how to reduce stigma towards children with disabilities

- There are a lack of teacher education programs focussing on equipping teacher training students on how to accommodate children and youth with disabilities and targeting the barrier of negative attitudes towards disability, especially in LMIC.
- Many teachers, especially those working in mainstream schools in LMIC still view disability from a medical model perspective and do not understand that children and youth with disabilities have the right to receive quality education.
- It is often teachers in schools who set the trend of acceptance or rejection of people with disabilities and if they have a negative attitude towards disability then this will influence the attitudes of the school community including learners without disabilities which may lead to stigmatisation.

How did we find answers

We conducted a review of reviews, examining systematic, narrative, and other types of review evidence on the topic of eliminating stigma as a barrier to educational outcomes for children and youth with disabilities. All recommendations are based on reviews of literatures from low- and middle-income countries. This evidence note is based on the findings of 4 reviews and 2 narrative reviews of LMICs.

Evidence-informed Recommendations and Actions

Key Recommendations	Actions
Recommendation #1: Active involvement of people with disabilities including children and youth in the design, implementation and evaluation of stigma-reduction interventions is needed.	<ul style="list-style-type: none">- <i>Stigma-reduction interventions should involve children with disabilities including previous students with disabilities, teachers and other staff with disabilities, Organisations of Persons with Disabilities, academics and researchers with disabilities in their design and implementation as many have experienced stigma themselves. This will assist in addressing and preventing stigma towards children and youth with disabilities</i>- <i>Adults with disabilities should be actively involved in the feasibility, acceptability, sustainability and impact of interventions through evaluations to make them more relevant to the needs of people with disabilities.</i>- <i>Academic research institutions should look at encouraging more students with disabilities to study and thus contribute to further research. This can be done through ring-fenced funding, collaboration with ODP's, and collaboration with schools accommodating children with disabilities.</i>- <i>Ongoing reviews of the most effective initiatives (including value for money) should be made to ensure that more people with disabilities become teachers.</i>
Recommendation #2: More well-designed evidence-based stigma-reduction interventions in LMIC addressing a wide variety of stigma need to be developed.	<ul style="list-style-type: none">- <i>Interventions need to address disability-specific stigma and discrimination, focussing on a human rights and inclusive education framework, and social model view rather than a deficit approach especially surrounding mental health conditions and associated stigma in many LMIC.</i>- <i>Stigma-reduction interventions should include disability awareness component within their interventions to successfully improve children and youth's knowledge about and attitudes towards peers with a disability.</i>- <i>These interventions need to target the education system; schools; family and children and youth with and without disabilities.</i>- <i>Funding needs to be provided by ministry of education departments or alternative sources such as academic research grants or NGO funding to make programs sustainable and relevant through careful development, implementation and reviews.</i>
Recommendation #3: Studies of promising stigma-reduction interventions addressing stigma towards children and youth in LMIC should be conducted.	<ul style="list-style-type: none">- <i>These studies must be long-term, evidence-based, contextually-specific and consist of strategies at multiple levels of education and differing contexts so that interventions can be measured and improved upon.</i>- <i>Studies of interventions addressing stigma towards children and youth with disabilities should be conducted by multiple stakeholders including academics/researchers, ministry of education officials as well as organisations of persons with disabilities. This will establish what is working and what improvements are needed.</i>- <i>Replication studies of promising stigma-reduction interventions, especially in LMIC and those focussing on preventing stigma towards mental health conditions should take place to further understand the value of a promising interventions.</i>
Recommendation #4: Quality teacher training programs equipping teachers with the skills and knowledge to accommodate children and youth with disabilities, and prevent stigma is required, especially in LMICs.	<ul style="list-style-type: none">- <i>A review of existing teacher training program should take place to examine whether they include inclusive education modules, and if they do, how appropriate and relevant are they in equipping future teachers to meet the needs of learners with disabilities.</i>- <i>Teacher training programs need to include inclusive education modules so that student teachers gain the practical skills and knowledge to accommodate and teach children and youth with disabilities.</i>- <i>In-service teacher training programs need to be provided to teachers already in schools so that they also develop these skills and knowledge.</i>

- These programs should be reviewed and evaluated to ensure that they are relevant to the needs of teachers, as well as children and youth with disabilities, and in line with global and local inclusive education policies.

- More people with disabilities need to be encouraged to become teachers to act as role-models as well as prevent stigma towards disability.

Policy priorities

Department of Education Ministries need to ensure that they have clear anti-discrimination and disability-specific policies that align with global policies including the UNCRPD; UN Convention on the Rights of the Child; WHO's CBR Programme etc. protecting the rights of children with disabilities. These policies need to be comprehensive and facilitate inclusive education (WHO, 2010). Education officials and schools need to ensure that educators and school management teams need to have training on how to practically implement policies in their schools and classrooms. Multi-sectoral collaboration between differing government ministries/departments including health, education, people with disabilities and disabled peoples' organisations, social and other sectors need to be established and maintained.

Conclusion

Many children and youth with disabilities experience disability-specific stigma and discrimination in education which negatively impacts on their educational outcomes. Information on approaches to, and impact of, interventions that address stigma in the context of children and youth with disability in LMIC is generally lacking. Without stigma-reduction interventions many children and youth will continue to be discriminated against. This may have a negative impact on their social integration and educational inclusion leading to further disadvantage in early adulthood and beyond.

Acknowledgements

Included sources

1. Hartog K, Hubbard CD, Krouwer AF, Thornicroft G, Kohrt BA, Jordans MJ. Stigma reduction interventions for children and adolescents in low- and middle-income countries: systematic review of intervention strategies. *Social Science & Medicine*. 2020 Feb 1;246:112749.
2. Hunt X, Saran A, White H, Kuper H. PROTOCOL: Effectiveness of interventions for improving educational outcomes for people with disabilities in low-and middle-income countries: A systematic review. *Campbell Systematic Reviews*. 2021 Dec;17(4):e1197.
3. Gronholm PC, Henderson C, Deb T, Thornicroft G. Interventions to reduce discrimination and stigma: the state of the art. *Social psychiatry and psychiatric epidemiology*. 2017 Mar;52(3):249-58.
4. Kuper H, Davey C, Banks LM, Shakespeare T. Trials and tribulations of collecting evidence on effectiveness in disability-inclusive development: A narrative review. *Sustainability*. 2020 Jan;12(18):7823-7834.
5. Lindsay S, Edwards A. A systematic review of disability awareness interventions for children and youth. *Disability and Rehabilitation*. 2013 Apr 1;35(8):623-646.
6. Sharma U, Ng O. What has worked for bringing out-of-school children with disabilities into regular schools? A literature review. *Disability, CBR & Inclusive Development*. 2014 Sep 13;25(2):54-75.
7. Smythe T, Adelson JD, Polack S. Systematic review of interventions for reducing stigma experienced by children with disabilities and their families in low-and middle-income countries: State of the evidence. *Tropical Medicine & International Health*. 2020 May;25(5):508-24.
8. Waqas A, Malik S, Fida A, Abbas N, Mian N, Miryala S, Amray AN, Shah Z, Naveed S. Interventions to reduce stigma related to mental illnesses in educational institutes: a systematic review. *Psychiatric Quarterly*. 2020 Sep;91(3):887-903.

Peer Review: This brief has been reviewed by Daryl Lloyd, Statistics and Results Advisor and Ian Attfeld, Education Advisor, Foreign, Commonwealth & Development Office (FCDO).

Publication details: © London School of Hygiene & Tropical Medicine, February 2022.

Suggested citation: McKinney, EL. Evidence Brief: What works to eliminate stigma as a barrier to educational outcomes for children with disabilities? *Disability Evidence Portal*, 2022.

Disclaimer: The views expressed in this publication are those of the author/s and should not be attributed to Disability Evidence Portal and/or its funders.

GAPS & RESEARCH NEEDS

There is an urgent need for further long-term research and evaluation into stigma-reduction interventions in LMIC. It is important to carefully design, implement and review current stigma-reduction interventions so that children and youth with disabilities do not experience discrimination which may negatively impact on their educational and social opportunities.