African Child Policy Forum
ACPF

Advancing Disability-Inclusive Pre-Primary Education in Rwanda: **BRIDGING POLICY AND PRACTICE**



African Child Policy Forum (ACPF) 2026



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AFRICAN CHILD POLICY FORUM (ACPF)

ACPF is an independent, Pan-African organisation that promotes policy change to advance child wellbeing in Africa. We are guided by the African Charter on the Rights and Welfare of the Child and the UN Convention on the Rights of the Child. Our work is inspired by African values and perspectives and informed by African reality and global knowledge. We adopt a child rights approach to the promotion and realisation of child wellbeing.

ACPF undertakes law and policy research and advocacy on the African child. We document children's life experiences to build knowledge on the African child. By identifying policy solutions and creating space for dialogue and learning, we catalyse linkages between policy and practice. We foster a common voice through alliances and movements for children. Creating opportunities for children to advocate for themselves is important to us.

We work with partners across governments, inter-governmental institutions, multilateral organisations, international and national NGOs, civil society, academics and development partners across diverse sectors.

VISION AND MISSION

Vision: An Africa where every child enjoys all rights and attains their full human potential

Mission: To be a leading advocate for policies that are inclusive of all children

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ACRONYMS AND ABBREVIATIONS

ACP	African Child Policy Forum
CAMIS	Comprehensive Assessment Management Information System
CBR	Community-based rehabilitation
CESA 16–25	Continental Education Strategy for Africa 2016–2025
CSO	Civil society organisation
DMO	Disability Mainstreaming Officer
ECD	Early childhood development
ECE	Early childhood education
MIGEPROF	Ministry of Gender and Family Promotion
MINALOC	Ministry of Local Government
MINEDUC	Ministry of Education
MINISANTE	Ministry of Health
NCDA	National Child Development Agency
NESA	National Examination and School Inspection Authority
NGO	Non-governmental organisations
OPD	Organisation of persons with disabilities
REB	Rwanda Basic Education Board
RISE	Realising Inclusive and Safe Education
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
WASH	Water, sanitation and hygiene

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ACPF is grateful to the LEGO Foundation, whose financial and technical support made this study possible.

PREFACE

Pre-primary education lays the foundation for lifelong learning and social inclusion. Yet millions of African children with disabilities miss out on this foundational stage. Across the continent, far too many children with disabilities are either excluded from school altogether or, when enrolled, face a complex and interconnected web of barriers – from deep-rooted stigma and discrimination to inaccessible physical infrastructure, communication challenges, insufficiently skilled teachers, and inadequate teaching and learning materials. Weak early-identification and screening systems and fragmented support services also mean many go undetected until primary school or later, missing the vital window for early intervention. Without early inclusion, children with disabilities will be forced to endure lifelong disadvantages which perpetuate cycles of poverty, exclusion and inequality.

This report is one of the country studies on disability-inclusive pre-primary education in Ethiopia, Kenya, Rwanda, and Sierra Leone which we commissioned with the generous support of the LEGO Foundation.

By focusing on the critical early years and the specific needs of children with disabilities, the study uncovers both opportunities and gaps in policy and practice, and identifies practical pathways to more equitable and truly inclusive education systems. It highlights progressive policies while exposing persistent gaps in facilities, information and communication, specialised teaching and learning materials, and teacher capacity. It also showcases good practices that prove inclusion is achievable even in resource-constrained settings. The study draws on fieldwork across diverse contexts, on classroom observations, and on consultations with policy-makers, educators, parents, organisations of persons with disabilities, and civil society organisations.

This report is part of our institutional commitment to prioritising the rights of vulnerable and often invisible children in law and policy. While it advances our advocacy efforts to reform the early childhood education sector, its implications reach further: the findings speak to wider systems of inclusion, equity, and child rights that extend across education, community, and social protection. Our goal is to realise the full and effective inclusion of children with disabilities in pre-primary education, while also contributing to the broader agenda of ensuring that no child is left behind whatever their circumstances and needs.

The core message of the report is that disability-inclusive pre-primary education must be prioritised not only as a matter of equality and justice, but also as an investment in our future – one that recognises every child's fundamental right to play. Children with disabilities, however, are too often denied this right by inaccessible playgrounds, activities not adapted to their needs, and teachers lacking adequate training in inclusive approaches. The report demonstrates that when play-based learning is made truly inclusive – from policy intent to classroom practice – it unlocks profound benefits for all children. Only then can we fulfil our promise that no child is left behind at the very start of their life's journey. Such a promise requires action on multiple fronts. I urge governments, civil society, organisations of persons with disabilities, development partners, and communities and families to make use of this report in their work to advance the educational rights of children with disabilities.

Finally, I extend my deepest gratitude to all participants in this study for generously sharing their expertise, experiences and insights and making this work possible.

Dr Joan Nyanyuki
Executive Director
ACPF

EXECUTIVE SUMMARY

Rwanda has demonstrated a strong commitment to inclusive early childhood development (ECD), recognising pre-primary education as the foundation for lifelong health, productivity, and social equity. Since the advent of the 2003 Constitution and its 2015 review, the country has enacted important policies, including the Special Needs and Inclusive Education Policy (2007, revised 2019–2024) and the Early Childhood Development Policy ('ECD Policy') (2016), which emphasise multi-sectoral support for children from conception to age 6 years. Anchored on these frameworks, Rwanda has achieved remarkable progress, such as expanding disability-adapted pre-primary facilities from 5.7% in 2017 to 66% in 2024 and more than doubling the enrolment of children with disabilities from 1,362 to 3,125 over the same period.

Despite these gains, implementation gaps remain, limiting equitable access and the meaningful participation of children with disabilities in pre-primary education. This study, which forms part a four-country research initiative by ACPF, explores why these challenges persist and identifies practical, evidence-based solutions to ensure that every child aged 3–5 years benefits fully from Rwanda's inclusive early-learning opportunities.

A qualitative descriptive approach was employed to gather data across all five provinces through 23 semi-structured interviews with policy-makers, educators, parents, civil society organisations (CSOs), and organisations of persons with disabilities (OPDs). Interviews were complemented by direct observations made in seven schools (three mainstream and four specialised) and an in-depth review of policy documents. Data was analysed thematically, with attention deliberately paid to gender and intersectional perspectives. The findings were then validated at a national stakeholder workshop to ensure that they accurately and authentically reflect diverse lived experiences and viewpoints.

The research reveals that the country has a strong policy foundation, one consisting of key instruments such as the Special Needs and Inclusive Education Policy (2007, revised 2019–2024), the ECD Policy (2016), the Integrated Early Childhood Development Models Guidelines (2019), the Rwanda Early Learning and Development Standards (2023), and the National Standards for Early Childhood Development (2024). Collectively, these promote holistic child development across health, nutrition, education, and child protection.

The National Standards for Early Childhood Development, led by the National Child Development Agency (NCDA), are particularly instrumental in facilitating disability-inclusive pre-primary education. These standards mandate multi-sectoral interventions across health and nutrition (including antenatal care

and micronutrient support); early learning through play; child protection; water, sanitation and hygiene (WASH); and community engagement, especially in regard to positive parenting. For school-based pre-primary education facilities, the standards require age-appropriate, accessible infrastructure such as ramps, adapted playgrounds, barrier-free indoor and outdoor spaces, and inclusive WASH facilities, along with proximity to health services and primary schools.

In terms of teacher qualifications, staff must hold at least a secondary-level ECD teaching certificate and be trained to identify and support children with disabilities. Progress is monitored through formative assessments using colour-coded ratings (green to red) across six competence-based curriculum areas, with results recorded in the Comprehensive Assessment Management Information System (CAMIS) platform of the Ministry of Education (MINEDUC). Compliance is maintained through regular joint inspections by the NCDA and the National Examination and School Inspection Authority (NESA), followed by licensing by the MINEDUC. This rigorous, multi-layered accountability mechanism helps reduce stigma, ensures equitable access, and upholds every child's right to quality, inclusive early education.

Despite this strong policy foundation, practical implementation challenges remain. Inadequate teacher training in inclusive pedagogy leaves educators ill-equipped to support diverse needs, while limited assistive devices and inaccessible infrastructure exclude many children from meaningful participation.

Many pre-primary teachers lack adequate training in inclusive pedagogy, which leaves them unprepared to meet diverse learning needs. Assistive devices remain scarce, and physical barriers – noted in 52% of classrooms visited in this study – continue to prevent children with disabilities from participating fully in school activities. Play-based learning, which is central to pre-primary curricula, is rarely adapted for different impairments, with only a few specialised centres providing effective and integrated therapeutic and educational services. Community stigma, coupled with weak cross-sectoral coordination between education, health, and social protection services, further hinders progress and keeps enrolment rates for children with disabilities well below national averages. Community-based rehabilitation (CBR) programmes, which demonstrate the value of multi-stakeholder collaboration, also remain limited in scale and reach.

In spite of these challenges, several promising initiatives highlighted in this study could be built upon to strengthen disability-inclusive pre-primary education in Rwanda. Model ECD centres demonstrate how adapted infrastructure, inclusive play, and diversified support can create enabling environments where children with disabilities thrive alongside their peers. CBR programmes show the value of community-driven approaches by facilitating early identification, providing family support, and linking households to essential services. Play-based learning, already widely embraced in Rwanda's pre-primary system, holds significant potential for inclusion when adapted to

meet diverse needs, offering children with disabilities meaningful opportunities for participation and development. Above all, many teachers and school leaders expressed openness and willingness to enrol children with disabilities even in the face of resource constraints. This positive attitude provides a crucial foundation on which inclusive practices can be scaled and sustained.

Bridging the policy-practice divide demands concerted action. Stakeholders unanimously call for investments in teacher-capacity, resources, and awareness in order for commitments to be transformed into tangible impacts. By prioritising these investments, Rwanda can fulfil its constitutional obligations and international commitments under the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), the African Disability Protocol, and the Continental Education Strategy for Africa 2016–2025 (CESA 16–25), thereby ensuring that no child is left behind. Accordingly, the study provides various recommendations drawn from both its findings and the voices of stakeholders:

- **Government and policy-makers –** in particular, the MINEDUC, Ministry of Gender and Family Promotion (MIGEPROF), Ministry of Health (MINISANTE), Ministry of Local Government (MINALOC), and NCDA – must develop national guidelines for inclusive pedagogy, allocate budgets for assistive devices and infrastructure adaptations, strengthen inter-ministerial collaboration through standardised screening and referrals, and integrate disability-inclusive metrics in systems such as CAMIS for monitoring.

- **Educators and schools –** namely, the Rwanda Basic Education Board (REB), NESA, and school leaders – should adapt curricula using Universal Design for Learning, implement awareness programmes to foster inclusive cultures, collaborate with therapists for integrated activities, and ensure accessibility in all facilities.

- **Non-state actors –** namely, CSOs, non-governmental organisations (NGOs), OPDs, and CBR implementers – need to lead anti-stigma campaigns, partner on training and resource provision, advocate for curriculum reforms, and expand CBR for early identification and family support.

- **Parents and communities** should actively participate in school activities, engage in awareness efforts to promote positive attitudes, and collaborate with schools and CBR programmes for home-based preparation and transitions.

Through these integrated efforts, Rwanda can create a truly inclusive pre-primary ecosystem that nurtures every child's potential from the earliest stages.



1. INTRODUCTION

1.1. Background and Rationale

Rwanda, an East African nation of approximately 13.3 million people (72% of whom live in rural areas),[1] has prioritised education as a cornerstone of its development agenda.[2] This commitment has driven remarkable progress in expanding access to education and promoting the inclusion of all children, including children with diverse disabilities and/or special educational needs, since the adoption of the 2003 Constitution and the latter's 2015 revision. Articles 20 and 51 explicitly mandate the state to put in place measures that guarantee equal access to education for all, including persons with disabilities.[3] This constitutional commitment has been translated into legal frameworks that include the MINEDUC's Policies on Special Needs and Inclusive education of 2007 and 2019–2024 and the ECD Policy (2016). Strategic Goals 1 and 2 of the Inclusive Education Strategic Plan (2019–2024) set ambitious targets: to improve enrolment and completion of at least 12 years of schooling for children with disabilities, and to establish referral pathways for early identification, assessment, and the remedial interventions.

Rwanda's successive ECD policy frameworks (the 2011[4] as well as 2016[5] versions) recognise early childhood as a critical period that affects health and productivity throughout a person's life. The 2016 ECD Policy targets children from conception to 6 years of age and emphasises the active participation of their parents, community, and caregivers in supporting their physical, social, emotional, spiritual, moral and intellectual development. In addition, the 2016 ECD Strategic Implementation Plan prioritises key strategic areas of intervention, notably parenting and education; school readiness and transition; child protection and family promotion; health and nutrition; and coordination and governance. These areas are to be implemented in line with the National Standards and Guidelines for Early Childhood Development of 10 August 2024.[6]

Recent administrative data points to positive trends amid persistent socio-economic challenges. Rwanda's Education Statistical Yearbook of 2023/2024 records positive trends across critical indicators. The report shows that the number of institutions adapted for learners with disabilities at pre-primary education levels increased significantly from 183 (5.7%) in 2017 to 3,392 (66%) in 2024.[7] Over the same period, enrolment of children with disabilities in ECD centres increased from 1,362 in 2017 to 3,125 in 2024. These gains reflect substantial policy and programmatic investment,

including in the adoption of a suite of policies and standards that followed the 2016 ECD Policy: the 2020 Ministerial Order establishing Regulations on the Implementation of ECD Program; the 2019 Integrated Early Childhood Development Models Guidelines; the 2023 Rwanda Early Learning and Development Standards; and the 2024 National Standards for Early Childhood Development in Rwanda, among others.

This study examines Rwanda's policy environment and practice with respect to disability-inclusive pre-primary education. It explores access, participation and quality of inclusion in pre-primary education, identifies practical lessons, and generates empirical evidence to inform strategies for improving enrolment, retention and successful transition for pre-primary learners with disabilities. The study also examines the extent to which play-based learning is integrated in pre-primary education and, more broadly, the degree to which curricular and pedagogic practices take the needs of children with disabilities into account .

1.2. Objectives of the Study

1.2.1. General Objective

The overall objective of the research was to investigate the state of disability-inclusive pre-primary education in pre-primary settings in Rwanda, with a focus on identifying barriers, enablers, and opportunities for enhancing inclusion.

1.2.2. Specific Objectives

In particular, the study aimed to:

- assess the extent to which children with disabilities are included in national laws, policies, and sectoral strategies on pre-primary education;
- identify barriers to disability-inclusive pre-primary education related to policies, practices, and implementation in Rwanda's regular pre-primary education system;
- explore enablers and good practices that facilitate disability-inclusive pre-primary education in Rwanda;
- analyse curricular and pedagogical approaches, teacher-training programmes, and classroom practices for their inclusivity of learners with disabilities at the pre-primary level;
- examine strategies and approaches to play-based learning in pre-primary settings and evaluate their inclusivity of children with disabilities; and
- document lessons learnt from disability-inclusive pre-primary education initiatives in other African countries and globally that could inform efforts at reforming policy and practice in Rwanda.

1.3. Scope of the Study

This study focused on disability-inclusive pre-primary education in Rwanda for children aged 3–5 years. It examines national and subnational policy frameworks, pedagogical approaches, classroom practices, and stakeholder engagement in both mainstream and specialised pre-primary settings. Conducted across all five provinces of Rwanda, the research deliberately included urban, peri-urban, and rural contexts to ensure a nationally representative picture. By design, the research was limited to the pre-primary level and does not extend to primary or higher stages of education.

1.4. Methodology

1.4.1. Research Design and Approach

This study adopted a qualitative design to provide an in-depth understanding of disability-inclusive practices in Rwanda's pre-primary education system. The approach combined policy analysis, stakeholder interviews, focus group discussions, and direct classroom observations to capture both systemic issues and classroom realities across diverse contexts.

1.4.2. Study Sites and Sampling

Rwanda has approximately 4,168 pre-primary schools and centres with ECD programmes distributed unevenly across the five provinces of the country (Kigali, Eastern, Southern, Western, and Northern). According to the MINEDUC's 2023/2024 statistical yearbook, 66% of these have registered about 31,751 children with disabilities (17,854 boys and 13,897 girls).[8] The study purposively selected 25 facilities (including community-based, home-based, school-based, and model ECD centres) in eight districts and 21 sectors across all five provinces to ensure geographical representation and inclusion of the four official ECD categories. This sampling strategy generated a nationally indicative picture of disability inclusion while remaining feasible within resource constraints (see Table 1).

1.4.3. Study Participants

A total of 91 participants were engaged:

- 13 policy-makers and government officials (MINEDUC, REB, MIGEPROF, Disability Mainstreaming Officers, and Sector Education Inspectors)
- 51 educators (teachers, assistants, and school leaders)
- 12 representatives of CSOs, NGOs, and OPDs
- 15 parents or caregivers (of whom 30% were grandmothers)

Observations were conducted in eight schools (three mainstream, five specialised). While efforts were made to achieve geographical balance, interviews were concentrated in Kigali due to logistical and accessibility considerations. Female participants dominated among educators (91%) and caregivers (80%), reflecting gendered patterns in early childhood education (ECE) and caregiving in Rwanda (see Table 2).

1.4.4. Data Collection Methods

Data was collected through:

- 23 semi-structured key informant interviews and focus group discussions;
- direct classroom and playground observations in eight schools; and
- Extensive desk review of national policies, strategies, guidelines, and statistical yearbooks

All tools were developed in English and Kinyarwanda, after which they were piloted and adjusted based on feedback.

1.4.5. Data Analysis

Interviews and focus groups were audio-recorded (with consent), transcribed, and translated into English where necessary. Thematic analysis was conducted. Gender and intersectional lenses were systematically applied. Preliminary findings were presented and validated during a virtual national stakeholder workshop.

1.4.6. Ethical Considerations

Ethical clearance was obtained from the Research and Innovation Office at the University of Rwanda's College of Education. Informed consent was secured from all adult participants. Child-friendly assent procedures were used where children with disabilities were indirectly involved in observations. Anonymity and confidentiality were strictly maintained. Participation was entirely voluntary, and participants could withdraw at any time without consequence. Child safeguarding measures were taken to ensure no harm, stigma, or undue intrusion during field visits.



2. KEY FINDINGS

This section presents the study's key findings across six thematic areas. It begins by examining national enrolment trends, the policy frameworks and standards that guide disability-inclusive pre-primary education, and stakeholders' awareness and ownership of these instruments. It then explores current pedagogical practices, the extent to which play-based and learner-centred approaches are adapted for children with disabilities, and the availability and suitability of teaching and learning materials.

The findings also assess the physical accessibility and geographical distribution of pre-primary facilities, identifying both enablers and persistent barriers to equitable participation. Attention is given to the role of partnerships with parents, communities, CSOs, and OPDs, which is a requirement explicitly embedded in national policy.[9] The section concludes by highlighting promising initiatives observed in the field and proposing concrete, actionable improvements to strengthen disability-inclusive practice at the pre-primary level.

2.1. National Pre-Primary Enrolment Trends in Rwanda

Over the last decade, Rwanda has given strong rhetorical and policy prioritisation to ECD in education as a whole and pre-primary education in particular. This is reflected in high-level strategies such as Vision 2050 and the National Strategy for Transformation (NST1). However, actual coverage remains persistently low by global and regional standards. According to the 2021/2022 MINEDUC Statistical Yearbook, the net enrolment rate in pre-primary education is just 24%, with UNICEF's most recent situation analysis placing this figure at 25.9% in 2022.[1011]

Available data also shows stark inequalities in access. UNESCO and national administrative data indicates that children residing in urban areas have much higher rates of pre-primary attendance (31.9%) than their rural counterparts (22.4%).[12] Regional variation is significant too: Kigali's urban districts report the highest levels of access, while districts in Western, Eastern, and Northern provinces fall below the national average. These disparities underscore the structural barriers that continue to limit equitable access to early-learning opportunities.

For children with disabilities, the picture is even more concerning. The fifth national Population and Housing Census (2022) reveals that 4.4% of Rwanda's total population above the age of 5 is classified as having a disability.[13] However, this demographic remains significantly under-represented in the pre-primary and primary education

systems. The 2023 Education Statistical Yearbook and EMIS data report that, of the 4,159,782 children enrolled system-wide, only 38,937 (0.9%) have a recorded disability; in pre-primary education, the inclusion rate is markedly below 1%.[14] This means that the overwhelming majority of children with disabilities are excluded from the very stage of education most critical to them for laying the foundations of their learning, socialisation, and long-term participation.

The invisibility of children with disabilities in pre-primary enrolment data is not merely a statistical gap but a reflection of systemic exclusion. Barriers to the education of children with disabilities exist on both the supply and demand side. These include the delayed or missed identification of developmental delays, the presence of stigma at the household and community levels, inadequately adapted infrastructure and learning materials, and limited teacher training in inclusive pedagogy.[15,16]

Families of children with disabilities often face additional economic burdens, such as transport costs or therapy fees, which further reduce the likelihood of enrolment.[17] As a result, children with disabilities are disproportionately denied the developmental, cognitive, and social benefits of early learning – all of which reinforces cycles of marginalisation that persist into primary and secondary education.[18]

These enrolment figures and associated challenges reveal that, despite Rwanda's visible progress in expanding overall pre-primary provisions, the gains it has made have not yet translated into meaningful inclusion for children with disabilities.[19, 20]

2.2. Policy and Regulatory Frameworks for Disability-Inclusive Pre-Primary Education in Rwanda

Rwanda's ECD policy landscape combines a clear constitutional mandate with sectoral and ECD-specific policies and operational standards that together create a solid framework for disability-inclusive pre-primary education. The 2015 Constitution (articles 40 and 76) established the legal imperative for social protection and equal access, one which has been translated into other instruments that guide planning and implementation at national and local levels.[21]

Pre-primary education is located within the country's broader ECD architecture, but is treated as the organised, school-ready stage for children aged 3–5 years.[22] National policy and standards therefore govern pre-primary classrooms, staffing, infrastructure and pedagogy, yet at the same time pre-primary education is also addressed under multi-sectoral ECD domains (health, nutrition, early learning, WASH, child protection, and parenting).



The 2016 ECD Policy frames early childhood (conception to age 6 years) as a critical life-course phase requiring integrated services across health, nutrition, early learning, WASH, child protection and positive parenting, and it explicitly promotes community and parental participation and play-based, child-centred approaches to learning.[23] To complement the policy, the Special Needs and Inclusive Education Strategic Plan (2018/19–2023/24) and successive Education Sector Strategic Plans embed targets for the enrolment, retention and progression of learners with disabilities and call for referral pathways, remedial interventions and the progressive mainstreaming of inclusive practice across the education system.[24] The Special Needs and Inclusive Education Policy (2019–2024) underscores the government's commitment to integrating learners with disabilities and special educational needs in mainstream education systems.[25] Strategic Goals 1 and 2 of the Special Needs and Inclusive Education Strategic Plan (2018/19–2023/24) prioritise increased access and completion for learners with disabilities and strengthen referral and remedial support mechanisms to enable progression within the education system.[26]

The Integrated Early Childhood Development Model Guidelines (2019),[27] the Ministerial Regulations on ECD implementation (2020),[28] the Rwanda Early Learning and Development Standards (2023),[29] and the National Standards for Early Childhood Development[30] are key instruments that guide national-level implementation of policy commitments. To operationalise these commitments,

the REB established a Special Needs and Inclusive Education Unit in 2020 to build system capacity on disability, gender, and inclusion and thereby ensure that all learners can participate meaningfully in schools. Together, these instruments set expectations for accessible infrastructure, staff qualifications and ratios, formative assessment processes, and the use of play-based, competence-based pedagogy in pre-primary classrooms.

2.2.1. Delivery Modalities for Pre-Primary Education

The 2019 Integrated ECD Models Guidelines and the 2024 National Standards for Early Childhood Development[31] recognise four operational modalities that commonly deliver pre-primary learning for 3–5-year-olds (and which informed site-selection for this study):

1. **Community-based pre-primary programmes:** Community-run centres offering play-based learning and care for neighbourhood children, often targeting vulnerable households.
2. **Home-based pre-primary arrangements:** Informal, household-hosted sessions where a household provides organised play-based activities for small groups of 3–5-year-olds.
3. **School-based pre-primary programmes:** Formal pre-primary classes attached to or in primary schools, and following the Competence-Based Curriculum and the Early Learning and Development Standards[32] to prepare children for Grade 1.
4. **Model pre-primary centres:** Government or partner model sites offering integrated, demonstrable standards (accessible infrastructure, multi-sectoral services, screening and referral, inclusive pedagogy) intended for benchmarking and scale-up.

2.2.2. The National ECD Standards Framework in Rwanda

Rwanda's ECD standards[33] emphasise a holistic, multi-sectoral approach to child development from conception to age 6 years. These standards are operationalised through the NCDA and focus on six interconnected pillars which guide all ECD programmes to ensure that services are equitable, inclusive, and responsive to diverse needs.

Key components include:

- **Health and nutrition:** Ensuring access to quality antenatal care for mothers, promoting exclusive breastfeeding, providing nutritious food, and addressing micronutrient deficiencies.
- **Early learning:** Creating stimulating environments, promoting play-based learning, and supporting cognitive and language skill development.

- **Child protection:** Safeguarding children from violence, abuse, neglect, and exploitation, while offering support for vulnerable children and families.
- **WASH:** Providing access to clean water, sanitation facilities, and promoting good hygiene practices.
- **Positive parenting:** Engaging families in nurturing care, responsive interactions, and home-based stimulation to foster emotional and social growth.
- **Community involvement:** Mobilising communities to participate in ECD initiatives, promote positive parenting practices, and create supportive environments for children.

2.2.3. Key Requirements of the Standards for School-Based ECD Facilities

School-based ECD facilities deliver educational services for holistic child development, integrating all six pillars (health, nutrition, education, WASH, child protection, and positive parenting). Such centres must meet NCDA standards. This includes having qualified caregivers, appropriate infrastructure, adequate operational budgets, and suitable furniture and learning materials to support children's all-round development. Various aspects of Rwanda's ECD standards are discussed below.

2.2.3.1. The Physical Environment

The NCDA's standards for school-based model ECD facilities require an accessible, age-appropriate location and infrastructure. The main elements include:

- **Geographical location:** Proximity to an accessible road, within walking distance for families, free from excessive noise (such as away from workshops, industrial parks, or markets), and close to neighbourhood local administration, primary schools (to ease transition), and health facilities.
- **Physical environment:** Fencing for the premises, proper rubbish disposal, safety and security measures, practical teaching and learning facilities (such as gardens for children to tend, agroforestry trees, and electricity supply for technology use), compliance with building and furniture standards, and full accessibility for all children.

These standards apply to both indoor spaces (classrooms, sleeping areas, furniture, and equipment) as well as outdoor areas (kitchens, toilets, playgrounds, and equipment).

2.2.3.2. Assessment of Children's Progress

Assessment in Rwanda's approach to ECD is formative rather than summative (no exams), holistic and qualitative rather than quantitative, and criteria-based (measuring against developmental standards or milestones) rather than norm-based (comparing to peers). Tools include observation checklists, progressive records, interview checklists, mid-term progress reports for each child, and children's portfolios.

Assessments evaluate both development and learning across six areas of Rwanda's pre-primary Competence-Based Curriculum: Discovery of the World; Numeracy; Language Skills (Kinyarwanda and English); Creative Art and Culture; Physical Development and Health; and Social and Emotional Development. A colour-coded rating system communicates progress to parents:

- Green: Child is consistently demonstrating the expected competence in a specific area.
- Blue: Child is making good progress towards achieving the expected competence in a specific area.
- Yellow: Child is making little progress towards the expected competence in a specific area.
- Red: Child needs more attention and support to develop skills in a specific area.

Results from all accredited ECD facilities are recorded on the MINEDUC's CAMIS platform.

2.2.3.3. Staff Qualifications and Ratios

ECD facilities in Rwanda are managed by coordinators, with teachers or caregivers delivering instruction and assistants providing support where needed (for example, for children with special needs). Standard qualifications include:

- **ECD coordinator:** For any ECD facility, the coordinator must hold a post-primary (secondary-school) teacher-training certificate in ECE and/or a related field.
- **ECD caregivers and support staff:** All must be at least 18 years old, with a minimum qualification of a secondary-school teacher-training certificate in ECE or general education, supplemented by training in ECD service delivery. They are expected to demonstrate positive values, respect for children in their communities, the ability to create toys from locally available materials, adherence to a strict prohibition of corporal punishment or psychological abuse, and basic knowledge or skills in identifying and supporting children with disabilities and special needs.

The standard caregiver-to-child ratio is 1:15 in Grade 1, 1:25 in Grade 2, and 1:30 in Grade 3.

2.2.4. Application of National Standards to Pre-Primary Education and Disability Inclusion

The coordination and monitoring of ECD services and standards is undetaken by the NCDA, which is specifically mandated by the Government in accordance with the ministerial decree of the MIGEPROF (2020).[34]

The parts of the national standards that are directly relevant to pre-primary education and disability inclusion are as a follows:

- **Purpose and scope:** NCDA standards provide tools for certifying pre-primary providers (school-based, community, home and model centres), quality-monitoring checklists for classroom practice, and guiding staff training in regard to 3–5-year-olds.[35]
- **Pedagogy and assessment:** The Early Learning and Development Standards and the Competence-Based Curriculum require play-based, child-centred, competency-focused pre-primary pedagogy; assessment at the pre-primary level is formative and criteria-based (observation checklists, progressive records, portfolios), with the results recorded in the MINEDUC's CAMIS to support monitoring and transition to Grade 1.[36, 37]
- **Infrastructure and accessibility:** Standards for model and school-based programmes set minimum requirements for site location, safe site layout, accessible entrances and classroom design, age-appropriate indoor and outdoor play spaces, and sanitation and safe water – measures that directly affect children's daily participation and inclusion.[38]
- **Staffing and ratios:** Standards define minimum qualifications for pre-primary coordinators and caregivers (post-primary or teacher-training certificate, as applicable), and recommended caregiver-child ratios for pre-primary grades for enabling quality interaction and differentiated support.[39]
- **Inclusion and referrals:** the Special Needs and Inclusive Education Policy and related ECD guidance establish that pre-primary classes must be accessible and welcoming; require screening or referral pathways; and call for coordination between education, health and social services so as to meet children's developmental and support needs.[40]

2.2.5. Compliance, Oversight and Accreditation

All ECD service providers in Rwanda must comply with established standards. The MIGEPROF, through the NCDA and in collaboration with stakeholders, oversees facility and

service standards. The MINEDUC, via its inspectorate (NESA), handles licensing for educational ECD facilities and provides advice on compliance.

Regular inspections are conducted by multi-sectoral teams under the NCDA and NESA to evaluate services and verify adherence. If services are substandard, areas for improvement are discussed with the authorities, and technical assistance is offered to resolve issues. Where providers seek to adopt international programmes, they must first meet national standards, and then submit a written request to the accrediting authority, including approval from the international programme owners, for permission to implement the adapted standards in Rwanda.

2.3. Awareness and Implementation of Disability-Inclusive Policies and Standards in Pre-Primary Education

This study examined participants' awareness and implementation of pre-primary education policies related to the inclusion of children with disabilities. The level of knowledge and understanding of these policies, as well as perceptions of their implementation, varied considerably across stakeholder groups, reflecting their distinct mandates and responsibilities.

2.3.1. Awareness of Inclusive Policies and Standards among Stakeholders

All international organisations (100%) working with children in Rwanda that were interviewed reported being well aware of, and guided by, both international and national policies. However, the extent to which these policies are applied within Rwandan pre-primary education varies, depending on each organisation's mission and the focus of its project activities. Similarly, all educators (principals, teachers, and caregivers) who were interviewed on the guiding legal frameworks (100%) referred to the 'dos and don'ts' outlined in the national ECD standards as inspected by the NESA and NCDA. However, they demonstrated very limited awareness of the underlying policy provisions on which these standards are based, particularly those supporting the inclusion of children with disabilities in pre-primary education.

In contrast, all of the parents who were interviewed were concerned primarily with the quality of educational services provided to their children – framing this as a matter of rights and welfare – yet demonstrated little awareness of, or interest in, the national policy instruments guiding ECD services. By comparison, all 12 policy-makers (100%) interviewed at both the local level (district and sector leaders) and central level (Ministry, NCDA, REB, and NESA) were highly conversant with the full range of policies and their coverage, including the social contexts and categories of

beneficiaries they address. The district education officer, who also works closely with the 'Out-of-School Project' implemented by Save the Children in Western Province, had this to say:

> Yes, there are national policies and standards relating to inclusion of all learners with disabilities in general and inclusion of children in pre-primary ... where all children aged 3 to 5 are all welcome to start and succeed in our pre-primary schools regardless of their disabilities ... However, all our schools lack material and human resources designated for disability inclusion at pre-primary school levels ... Educators need clear guidelines and shared strategies to fully implement disability inclusion in ECD ... We anticipate that NESA and REB will deliver these in due course ...

The study revealed that while all respondents at school and local leadership levels had some awareness of educational policies, none referred to them as guiding tools for their daily practice. They instead highlighted awareness-raising activities to do with pre-primary education that they were part of in their respective communities at the request of the Ministry concerned (Education, Local Government, or Gender and Family Promotion). For example, a headteacher leading a school that includes pre-primary education responded that

> we are part of the national campaigns on the media1.... We communicate to the community about ECD services available during Umuganda41 and stakeholders are encouraged to support children with disabilities ... Emphasis is on the rights of all children in ECD ... and [this] discourages parents who would rather leave the children at home because of their disabilities.

While Rwanda has developed a robust policy framework to support disability-inclusive pre-primary education, the extent to which these policies are known, understood, and applied by key stakeholders remains uneven. Interviews with educators, local officials, and community actors revealed varying levels of awareness of national ECD and inclusive education policies. This limited awareness, particularly at the school and community levels, contributes directly to the implementation gaps observed across the system. As such, understanding the relationship between policy knowledge and practical delivery is essential to identifying where and why inclusion efforts fall short.

[1] This refers to teachers' and parents' testimonies on radio programmes.

2.3.2. Challenges in the Implementation of Policies and Standards

The challenges to achieving full disability inclusion in Rwanda's pre-primary education system are not primarily the result of weak policy commitment. The study finds that, although national policies and guidelines provide clear guidance, they are not being fully implemented at the community and school level. According to a government staff member from the REB's Special Needs and Inclusive Education Unit, 'the National Policies on Special Needs and Inclusive Education highlight guidelines on inclusion of children with disabilities, but issues often arise during their implementation'.

Officials as well as educators emphasised several implementation challenges, including limited skills and training of pre-primary teachers in inclusive education practices, inaccessible terrain and infrastructure, and inadequate resources, particularly in rural pre-primary schools. For example, all pre-primary education teachers and caregivers in the eight schools visited in the study reported a lack of in-service training in inclusive pedagogical skills. Additional concerns were raised about the lack of an appropriate curriculum for children with multiple disabilities, who require specialised services which the REB and schools are not yet equipped to provide.

During interviews, five policy-makers acknowledged the government's commitment to expand teacher training for inclusive education. At the same time, they highlighted persistent shortcomings such as insufficiently trained personnel, limited adapted learning materials, and fragmented support systems. Specifically, the following issues were highlighted in relation to teacher training:

- The School of Special Needs and Inclusive Education at the University of Rwanda's College of Education does not currently offer training programmes that focus on disability inclusion at the pre-primary level. Teacher training in ECE is offered as a separate track, which does not consistently integrate modules on disability-inclusive pedagogy.
- Training at teacher training colleges and the University of Rwanda's College of Education does not adequately equip teacher trainees with skills in early identification and assessment of children's needs, which is an essential component of early childhood teacher-preparation explicitly promised under Policy Goal 2 of the Special Needs and Inclusive Education Policy.[42]
- Teacher appointments made by the REB often overlook specialisations in special needs education, particularly when assigning caregivers and teachers to pre-primary schools.

Apart from challenges in early identification and assessment, children with disabilities who are enrolled in pre-primary or primary schools rarely receive timely support. Schools generally lack appropriate assessment tools, staff trained in screening, and clear operational guidelines. As one ECD teacher and technical advisors consulted during the study observed:

> There is hardly any screening for children with disabilities, and there is limited use of screening tools in ECD settings ... this alone accounts for inadequacies in all forms of support for the children with disabilities who are admitted in our schools.

One education official summed up this concern by noting that 'teachers and caregivers are not qualified to cater for children with disabilities ... overcrowding in their classrooms makes it even worse'.

Despite strong legal mandates for inclusive education at all levels, implementation remains inconsistent, enforcement is weak, and many children with disabilities continue to face significant barriers to accessing and progressing in pre-primary education. Respondents in rural areas in particular highlighted persistent negative attitudes among decision-makers, unsuitable infrastructure, a critical shortage of trained personnel, and scarce teaching and learning materials as the main reasons for these shortcomings.

The study also found that while some NGOs have undertaken initiatives on disability inclusion in ECD, these efforts remain limited in scope and geography. For example, the FHI 360 and USAID Tunoze Gusoma programme supported selected ECD schools to integrate Universal Design for Learning principles in Kinyarwanda lessons, promote inclusive teaching and learning approaches, and pilot assessment practices for children with disabilities.

2.4. Barriers to Disability Inclusion in Pre-Primary Education

Barriers to disability inclusion in pre-primary education in Rwanda are multifaceted. Key among these are physical inaccessibility, lack of adapted learning materials, insufficient teacher-preparedness, and deep-rooted negative attitudes among educators and communities.

2.4.1. Physical and Infrastructural Barriers

A study by UNICEF, the Education Development Trust and the Rwandan MINEDUC in 2016[43] documented a wide range of accessibility challenges that continue to shape the participation of children with disabilities in education. It found that many children faced long and hazardous journeys to school, with steep terrain and poor road conditions exacerbated by the weather during the rainy season and families contending

with limited and costly transport options. Within schools, most infrastructure was either inaccessible or poorly adapted: ramps were often either incomplete or too steep, and toilets and pathways were difficult to navigate. This was confirmed by observations made in the present study, as many schools were only partially accessible given the existence of barriers in play areas, libraries, or toilets.

Teachers in inclusive schools reported that large class sizes and limited support made it difficult to implement individual education plans or provide tailored assistance. Environmental conditions, such as the noise of tin roofs during heavy rains, further disrupted learning, particularly for children who are partially hearing-impaired or have visual impairments and rely on verbal instruction.

More recent evidence confirms that many of these barriers persist even as pre-primary provision has expanded. A recent mapping study documented continued under-representation of children with disabilities in education, alongside limited rollout of assistive devices and persistent gaps in accessible infrastructure and adapted play spaces; it found, nevertheless, that the integration of practical inclusive pedagogy in teacher training has improved.[44]

2.4.2. Negative Attitudes towards Children with Disabilities

Social attitudes and stigma remain major barriers to accessing pre-primary education across Rwanda, affecting urban and rural communities alike and cutting across socio-economic lines. While some respondents reported that many educators and parents understand children's disabilities and can articulate their needs, a substantial number still hold deep-rooted beliefs and misconceptions that negatively influence decisions about enrolment and participation in pre-primary education. Table 3 presents a selection of interview quotes indicating enabling or constraining attitudes. While the table groups quotations under broad headings for ease of presentation, many stakeholders' views were nuanced: responses that sound like constraints in one setting often reflect concerns, conditional support, or context-specific priorities in another.

TABLE 1: Interview remarks indicating supportive or constraining attitudes

Protective utterances	Concerns about child's right not being respected	Beliefs	Resigned to fate
'...at least he is still alive ... I will not let him die...' – **Mother in Nyamasheke District** *'... I had to quit my job to protect my son and prove to other parents that our children are like any other ...'* –**Mother & founder of parents' association for autistic children**	*'... my child is not learning like other children ... teachers are not doing enough ... we have written to the Ministry of Education'* – **Mother in Gasabo District** *'... we are concerned that our school cannot get the right tools and personnel ...'* – **Mother in Rutsiro District**	*'... I am left to educate my child alone, because my husband abandoned me ... my child is not a curse as he believes'* – **Mother in Bugesera District** *'... our prayer group did not help much ... we do not think the teachers will help either'* – **Couple in Ruhando District** *'... I left everything about her to God ... not to teachers ...'* – **Mother in Rubavu District**	*'... we only bring the child to this school to interact with others, but we know that he will end up roaming around like Kiromo ...'* – **Affluent couple in Kicukiro District**

Note: The categorisation above is indicative rather than absolute. Some perspectives may contain both supportive and critical elements, depending on context.

Deep-seated stigma and negative perceptions remain powerful barriers to pre-primary education for children with disabilities. For example, parents and even some teachers in the schools assessed believed that children with intellectual disabilities are incapable of learning in school and are better kept at home – a view that prevents early enrolment and participation. Widespread community-level stigma also discourages families from seeking early assessment or support, delays referrals to specialised services, and reduces willingness to adapt classrooms or share resources. The

result is missed opportunities for early intervention, socialisation, and learning, which undermines children's long-term educational prospects and the broader goal of inclusive education.

Negative attitudes and stigma also hinder timely identification and intervention by local authorities and relevant agencies. As one education official explained:

> Some parents still consider having a child with a disability as a curse to the family … some affluent families hire maids and security guards to keep the children at home and do not allow them to go to school … as leaders we can do nothing.

At the same time, there were signs of change. An ECD teacher in a rural district observed that

> though negative attitudes towards children with disabilities are still widespread among community members, when they see achievements in our school or when they interact with our parents' organisation team, their attitudes change drastically.

This suggests that addressing social and cultural barriers is critical to fostering meaningful shifts in attitudes towards disability inclusion.

Finally, all policy-makers interviewed at both the local and national levels affirmed that while inclusive legal frameworks and community sensitisation efforts are important, they are not sufficient on their own. They emphasised the need for strong, coordinated, and targeted translation of policies into meaningful action at the grassroots level, engaging all actors within pre-primary schools and surrounding communities.

2.4.3. Gaps in Teacher-Preparedness and Resources

Findings from respondents across all categories of pre-primary education indicate that inadequate staff training stands out as a major challenge, one repeatedly cited as a key impediment to progress in inclusive pre-primary education programmes. Teachers' understanding and perceptions of children's special needs, for example, strongly influence their choice of appropriate teaching and learning resources and approaches suited to the requirements of learners with disabilities.

None of the teachers interviewed for this study had received training in Special Needs Education or inclusive education. Teachers also acknowledged significant constraints in their knowledge and their lack of skills in using appropriate resources for learners with disabilities. From observation, there was no evidence of instructional adaptations to accommodate children with multiple or complex disabilities.

Teachers are further constrained by limited resources and high learner-teacher ratios, which hinder individualised support and interaction, particularly in rural areas. In the schools visited, most available equipment was designed for non-disabled children, even though those with disabilities could possibly benefit from the available visual and tactile materials. In addition, none of the eight pre-primary schools observed had assistive devices or adequate specialised resources for children with disabilities.

With regard to learner-teacher ratios, one REB staff member explained that '[d]ue to large teacher-pupil ratios, play-based approaches have less impact on learners with disabilities, including those with ASD ['autism spectrum disorder'] and ADHD ['attention deficit hyperactivity disorder'], who require close and individualised attention …' This situation underscores the persistent gap between ECD policy and practice, and highlights the urgent need for increased investment in teacher training, assistive resources, accessible school environments, and robust monitoring mechanisms to ensure equitable learning opportunities for children with disabilities.

2.5. Opportunities and Emerging Good Practices

Despite persistent challenges, there is a growing commitment to inclusive practices across many pre-primary schools, which is equally noteworthy. The following sections discuss observed adaptations in the teaching and learning environment, approaches and resources, as well as other practical strategies employed by schools to accommodate the needs of children with diverse disabilities.

2.5.1. Teaching and Learning Environment

Although most educators reported limited familiarity with national infrastructure-accessibility guidelines, observations across the eight visited pre-primary schools revealed generally accommodating environments that meet or exceed many required standards. As shown in Table 4, the majority of schools performed well across nearly all indicators: entrances and classrooms were accessible, toilets were adapted, and most spaces were free of hazards and had suitable lighting and noise levels. Seating arrangements and libraries were accessible in several schools, though not consistently adapted to diverse needs. (See also Figure 1.)

FIGURE 1: An ECD classroom environment in UCC-Rubavu District



Playgrounds stood out as the weakest area, with only three schools offering accessible play spaces. This gap limited opportunities for children with disabilities to participate fully in play and socialisation. While most schools demonstrated strong performance overall, infrastructural shortcomings, particularly in terms of playgrounds, specialised seating, and adapted toilets continue to restrict full participation for children with physical and sensory disabilities. These challenges are especially pronounced in rural communities, where long walking distances to schools further reduce enrolment and attendance.

TABLE 2: Observations of pre-primary school physical environments

Indicator	Number of schools (Yes/No)	Insights from observations
School has accessible entrance and walkway	YES: 6 schools NO: 2 schools	Relatively compliant overall, but long distances in rural areas reduce enrolment and attendance for children with disabilities.
Classrooms are accessible	YES: 6 schools NO: 2 schools	Generally functional, though shortcomings limit participation, especially for physical and sensory needs.
Toilets are accessible	YES: 6 schools NO: 2 schools	Many schools have improved WASH access, but accessible fixtures and privacy for children with disabilities remain lacking in some sites.
Libraries and other learning spaces are accessible	YES: 5 schools NO: 3 schools	A majority provide entry to learning spaces, but shelving, seating and layout rarely support children with diverse impairments.
Playground is accessible	YES: 3 schools NO: 5 schools	Play areas are the least adapted; most lack ramps, soft surfaces or inclusive equipment, limiting play and social interaction.

Indicator	Number of schools (Yes/No)	Insights from observations
Space is free of hazards	YES: 6 schools NO: 2 schools	Most sites are kept reasonably safe, though hazards and clutter still exist in a few schools, affecting mobility.
Lighting and noise levels are suitable	YES: 6 schools NO: 2 schools	Lighting is adequate in most centres, but intermittent noise and poor lighting in some locations hinder learning for children with sensory needs.
Seating accommodates diverse needs	YES: 5 schools NO: 3 schools	Most centres provide varied seating and movable seating, but some rely on standard furniture that does not meet the needs of children with physical impairments.

Ratings: Yes = Accessible/Compliant; No = Not Accessible/Non-Compliant

Respondents repeatedly emphasised that the inclusion of children with disabilities and other learning difficulties is hindered not only by poorly adapted infrastructure and limited physical accessibility in essential areas such as classrooms, toilets, and playgrounds, but also by the absence of key support facilities and services, including wheelchairs and regular wheelchair assistants.

One ECD teacher in a semi-rural district confirmed this, noting as follows:

> Many ECD schools across our hilly district are not well equipped to accommodate diverse needs of children with disabilities … While ramps are not in every entrance of the school spaces, our teachers and pupils are ready to assist children with disabilities … the major issue, however, is that many parents cannot afford wheelchairs and other assistive materials …and they do not bring their children to school regularly due to domestic and social reasons …

Similarly, most ECD centres appear to have implemented the majority of the geographical and infrastructural adjustments required by national ECD accessibility guidelines[45] to accommodate diverse learning needs. Parents and educators emphasised that removing physical and infrastructural barriers, which are

particularly challenging in Rwanda's hilly and rugged terrain, must be accompanied by addressing social stigma, family-support needs, and the lack or shortage of assistive devices if meaningful inclusion is to be achieved.

2.5.2. Teaching and Learning Approaches

Interviews and classroom observations across eight pre-primary centres revealed that inclusive teaching and learning approaches are widely present, though not applied consistently. Most teachers made use of visual and play-based aids, adapted lessons to suit varying abilities, and gave clear instructions that supported participation. Children with disabilities were generally seated with peers, took part in group activities, and interacted positively with classmates. However, these practices were less evident in some schools (two of the observed schools, for example), where there was limited adaptation, weaker differentiation, and occasional peer exclusion. The findings in Table 5 highlight that while inclusive, learner-centred approaches are embedded in many classrooms, gaps remain in systematic adaptation, resource provision, and teacher-confidence.

TABLE 3: Teaching and learning approaches observed (n = 8)

Indicator	Observed pattern (in 8 centres)	Interpretation or implication
Teacher uses visual and play-based aids	Most centres regularly used visual aids and play materials; a minority used few or no aids (Regular use: 6; Limited use: 2).	Play-based and visual supports are widely adopted, supporting engagement and comprehension; targeted support is needed in the few centres that lack these materials.
Lessons adapted for varying abilities	In most centres teachers adapted activities informally; two centres showed limited adaptation (Adapted: 6; Limited: 2).	Adaptation is taking place but is often ad hoc; systematic differentiation and planning would improve consistency.
Teacher gives clear, inclusive instructions	Clear, child-centred instructions were evident in most classrooms; some teachers relied on whole-class prompts, which were clear only for some (Clear: 6; Limited: 2).	Teachers generally communicate well, but some need coaching on inclusive language and step-by-step instruction for diverse learners.

Indicator	Observed pattern (in 8 centres)	Interpretation or implication
Evidence of differentiated support	Several centres provided small-group or one-to-one support; others lacked visible differentiation (Differentiated support: 6; Minimal: 2).	Differentiation exists where staff (assistants) are available; scaling this practice requires training and resource planning.
Children with disabilities seated or involved with peers	Most classrooms integrated children with disabilities within peer groups; a few placed them separately (Integrated: 6; Separate: 2).	Peer integration is common and supports social learning; separation in some schools points to stigma or lack of teacher-confidence.
Children with disabilities participate in group activities	Group participation was observed in most centres, though participation quality varied (Active participation: 6; Limited participation: 2).	Participation occurs but is not always meaningful. Activities often need adaptation to ensure full engagement.
Peers interact positively with children with disabilities	Positive peer interactions were visible in most settings; occasional exclusion or teasing was reported in a minority of sites (Positive: 6; Problems observed: 2).	Peer attitudes are generally supportive. Where there are problems, there is a need for sensitisation of fellow learners without disability.
No visible exclusion of children with disabilities	In most classrooms there was no overt exclusion, though subtle barriers (task complexity, seating) limited inclusion in some sites (No visible exclusion: 6; Subtle exclusion: 2).	Overt exclusion is uncommon; the focus should be on removing subtle, structural barriers that limit participation.

According to one teacher in a special school for children with physical and learning difficulties, play-based teaching and learning is the major approach used in the school:

> Yes, I use play-based learning in my class by turning some lessons into game … this helps children with disabilities to be more interested, they learn in easy way … [it] helps some of them to harden their muscles *(Teacher in HVP Gatagara Special School in Gikondo).*

Another teacher remarked that he uses play-based learning, often mixing children of varied abilities to facilitate tam work:

> I use play-based learning in my classroom …. [I] make it inclusive by choosing games that all children can join, like sorting shapes or simple matching activities. I use materials with different textures and colours to engage children with various abilities. I also encourage teamwork by pairing children so they can help each other during play *(Teacher in UCC Rubavu District).*

The teacher added that since the goal is to create a supportive and motivating learning environment that meets the unique needs of each child, adapting the curriculum or differentiating instruction may entail at least three approaches:

1. **Modifying lessons:** 'I adjust the content, structure, and delivery of lessons to cater to individual learning styles, abilities, and interests. For children with autism, I create visual schedules to help them transition between activities …'
2. **Using assistive technologies:** 'I incorporate tools like visual aids, audio materials, and adaptive software to motivate and support students with different needs …'
3. **Activity-based learning:** 'I design activities that promote hands-on learning, exploration, and engagement for students with varying abilities. For children with autism, I use sensory integration techniques to regulate their emotions and behaviours, and provide a quiet workspace with minimal distractions to help the child maintain focus …'

Teachers are evidently guided by the ECD standards and guidelines, which require the use of games, songs, group play, and movement activities that are responsive to individual differences – this involves classroom adaptations and inclusive teaching strategies. The approach was affirmed by a teacher-mentor in one of the districts:

> Play-based learning in national ECD education strategies is designed in a way that all children learn through games, songs, play activities, active participation …. the guidelines are provided for adopting play-based activities … for example, teachers are not expected to focus on some children while teaching, but work with each child including those with disabilities …

What respondents at all levels (policy, school, and local community) reiterated is that national policies and guidelines already provide a wide range of active and inclusive teaching and learning strategies suited to the diverse needs of children. The real challenge lies in the availability of the resources and technical know-how required to support the education of children with disabilities.

2.5.3. Play-Based Learning and Child-to-Child Interaction

Respondent interviews and classroom observations alike confirmed strong adherence to play-based learning (see Table 6 below), which is fully in keeping with national ECD standards and policy frameworks. Indeed, the latter emphasise that play is central to child-centred pedagogy and to supporting all domains of early development.

This approach is reinforced by Rwanda's Competence-Based Curriculum, which

designates play-based learning as the cornerstone of pre-primary education. Play is recognised for its unique capacity to promote holistic development – that is, physical, motor, linguistic, cognitive, social-emotional, and moral development – as well as growth of the broader competences required for lifelong learning. When appropriately adapted, it also serves as a powerful means of including children with diverse abilities and disabilities in the same learning environment as others.

Observations across eight schools show that play-based learning is widely embraced and provides opportunities for children with disabilities to interact with peers. As shown in Table 6, teachers consistently encouraged participation, and in most centres, children with disabilities were actively involved in group play. However, the adaptation of play activities was limited in several schools, and playgrounds were often inaccessible, thus restricting full inclusion. Peer interactions were generally positive, though occasional exclusion or teasing was noted.

TABLE 4: Observations of play-based and child-to-child interactions in pre-primary schools

Indicator	Observed pattern (n = 8)	Interpretation or implication
Play activities allow participation by children with varying abilities	Observed in all 8 schools	Play is widely inclusive, enabling children with different abilities to take part.
Teacher adapts play for inclusion	Adapted in 3 schools; not adapted in 5	Adaptation is uneven; many teachers rely on standard play without modification, limiting inclusion.

Indicator	Observed pattern (n = 8)	Interpretation or implication
Play area is physically accessible	Accessible in 3 schools; not accessible in 5	Playgrounds remain the least inclusive; lack of ramps, surfaces, and equipment restricts participation.
Children with disabilities participate in group play activities	Active in 6 schools; limited in 2	Participation is frequent but not always meaningful; activities often need adaptation for full engagement.
Peers interact positively with children with disabilities during play	Positive in 6 schools; problems in 2	Peer attitudes are generally supportive; occasional exclusion highlights need for sensitisation.
No visible exclusion of children with disabilities in play	No exclusion in 6 schools; subtle exclusion in 2	Overt exclusion is rare; subtle barriers (task complexity, equipment design) still limit participation.

Findings from staff interviews also suggest that children with disabilities have opportunities to access and benefit from pre-primary schools, largely because the ECD programme promotes active and play-based teaching and learning. However, progress for many learners is not assured, as staff continue to face challenges in implementing the inclusive components of ECD. This was reflected in teachers' testimonies when asked why their teaching is dominated by children's play and games:

> Yes, I use games and children play … It is inclusive … all children actively participate in many activities *(Pre-primary schoolteacher, semi-urban school).* Yes, we use play-based learning approaches like games and songs because it's effective for all young children. However, ensuring it's fully inclusive for children with disabilities is a challenge due to limited specialised games and tools … Teachers try to include all children by encouraging group games and adapting activities …. More training and resources would help make play-based learning more accessible and inclusive *(Pre-primary schoolteacher, rural school).*

Play-based learning activities that aim to develop children's thinking, memory, physical abilities, social skills, speech and language, and other capacities are embedded in the Rwandan ECD curriculum. Teachers therefore perceive the inclusion of children with disabilities in play-based activities as part of their professional responsibility,

while emphasising the need for further training in inclusive approaches. Overall, play-based learning holds strong potential for promoting inclusion, but greater investment in adapted play spaces and teacher training is needed to ensure meaningful participation for all children.

2.5.4. Teaching and Learning Resources

All respondents attributed the limited progress in addressing disability inclusion in ECD classes to insufficient funding and resource allocation, among other challenges. This was confirmed by observations in the eight pre-primary schools visited, as summarised in Table 7 below. While play materials were available and accessible in most schools, inclusive and assistive materials were present in only a few. As a result, children with disabilities were often restricted to using materials designed for non-disabled learners rather than adapted resources tailored to their needs.

TABLE 5: Observations of teaching and learning resources in ECD

Indicator	Number of schools (Yes/ No)	Insights from observations
Play materials are available and accessible	YES: 6 schools NO: 2 schools	Available in most; support basic play activities but often not adapted for diverse needs.
Inclusive and assistive materials are present	YES: 2 schools NO: 6 schools	Scarce overall; this shortfall restricts meaningful participation by children with sensory or physical disabilities.
Teacher uses visual aids	YES: 6 schools NO: 2 schools	Commonly used; helps general engagement but insufficient without complementary assistive tools for inclusion.
Materials are age-appropriate and usable by children with disabilities	YES: 6 schools NO: 2 schools	Generally, age-appropriate for non-disabled children; usability for disabilities remains limited due to adaptation gaps.

Ratings: Yes = Available/Used; No = Not Available/Not Used

A sector education inspector noted that the lack of sufficient funding for resources significantly hinders the ability of ECD centres to teach children with varying special needs effectively. As a result, children with disabilities are often admitted into classrooms without receiving any meaningful or beneficial support for their education. A staff member from the Special Needs Education unit explained as follows:

> All learners including those with disabilities are allowed to get to neighbourhood pre-schools, but most end up just attending and not necessarily benefiting because of inappropriate services and learning resources, lack of assistive devices, skills gaps in teachers, and overcrowding in classrooms, among others.

According to parents who were interviewed, the families of children with disabilities are often burdened by both the child's other needs (such as the cost of therapy and health care) as well as the needs of other family members (school fees, food, housing, and so on), and thus cannot easily afford extra or specialised services that schools may recommend for the child due to his or her disability.

TABLE 6: Selected resources in schools for all children (abled as well as with disabilities)

Ordinary teaching & learning resources that could also be used by children with disabilities	Teaching & learning resources for inclusion of children with disabilities	Assistive resources observed in schools
Children's books with big, colourful letters (top ECD class in UCC of Rubavu District, Western province)	Tools for numeracy, literacy & fine motor development (HVP Gatagara in Kicukiro District, Kigali province)	Wheelchairs in an interactive inclusive class (Rosa Mystica in Kamonyi District, Southern province)
		

Ordinary teaching & learning resources that could also be used by children with disabilities	Teaching & learning resources for inclusion of children with disabilities	Assistive resources observed in schools
Children's laptops in many Rwandan schools (top ECD class in Rwamagana District, Eastern province)	Accessible playground in HVP Gatagara special school in Kicukiro District, Kigali province	A resource room for materials & assistive services for children with disabilities in UCC inclusive school in Rubavu District, Western province
		

While some schools, such as HVP Gatagara Special School and UCC Inclusive School, enable children with disabilities to thrive because they are equipped with educational and rehabilitation resources, mainstream pre-primary schools face significant challenges. Although they welcome children with disabilities, they are unable to fully support their learning, as they rely solely on ordinary teaching and learning resources. Table 8 above illustrates some of the educational resources observed across special, inclusive, and mainstream schools.

The impact of resource inadequacies in pre-primary schools was emphasised by a Disability Mainstreaming Officer (DMO), who stated that

> schools for children with intellectual or multiple disabilities exist in our district, but are very expensive and most families cannot afford their requirements that include secure transportation for the children to and from school, assistive resources such wheelchairs, therapeutic services, etc. ...

The DMO suggested that subsidising or sponsoring under-resourced families of children with disabilities could be a



long-term solution. Resource constraints not only undermine services for children with disabilities but also contribute to their social exclusion and prolong their unmet educational needs.

2.5.5. Initiatives and Lessons Learnt

The study identified a range of multi-sectoral programmes and initiatives that support disability-inclusive practices in Rwandan ECD education in spite of persistent and systemic challenges. According to one of the REB's officers in its Special Needs Education unit,

> the Special Needs and Inclusive Education Policy mandates inclusive practice across all levels of education, and all initiatives on ensuring equal opportunities and access for children with disabilities in pre-primary schools are possible because the policy guidelines mandate their conception and pursuit at all levels of schooling ...

Accordingly, the approved ECD standards mandate that school infrastructure must be accessible, that teaching approaches have to address the needs of children with disabilities, and that inclusive policies[46] must prioritise four key areas in educational initiatives:

- Teacher training that incorporates innovative inclusive practices.
- Innovations in designing and implementing disability-friendly school environments.
- Creative approaches to early identification and screening of children with disabilities.
- Innovations in the development of inclusive learning materials.

The policy framework provides educators with the scope to be creative and innovative in their practices, while also establishing a legal basis that holds schools accountable for the education of all children, irrespective of gender, background, or ability. This makes the inclusion of children with disabilities mandatory rather than optional and obliges mainstreaming their education within regular classrooms rather than separating them from their peers. The present study further highlights that achieving this vision requires appropriately trained and informed educators who can design approaches, resources, and services tailored to the specific educational needs of learners with disabilities.

A pre-primary teacher from one of the districts cited, with examples, an initiative known as the RISE ('Realising Inclusive and Safe Education') programme, which benefited children with disabilities through the Chance for Childhood programme. The programme implemented the following strategies that were critical in realising inclusive ECE for children with disabilities:

- early screening of disability needs and referral for appropriate intervention;
- community awareness campaigns to reduce stigma;
- training of pre-primary schoolteachers in inclusive practices; and
- provision of assistive devices and adapted learning materials for children with disabilities.

RISE's innovative approaches were grounded in community-based initiatives, including: (a) engaging parents, school staff, and local leaders; (b) using locally adapted tools such as the Washington Group Questions to identify functional difficulties; and (c) strengthening the link between health and education services in the early years. These initiatives supported and reinforced inclusive ECD intervention strategies.

In addition, in line with national policies, UNICEF collaborated with MINEDUC to establish model inclusive ECD centres in each of the 30 districts, with recommendations for the following initiatives:

- design of disability-friendly infrastructure;
- design of environments that promote play-based learning and teaching;
- design of training facilities and programmes for caregivers and teachers; and

- design and development of disability assessment and rehabilitation tools, formulation of strategies, and establishment of specialised centres.

Respondents affirmed that initiatives in other inclusive pre-primary ECD settings are often benchmarked against the UNICEF and MINEDUC model ECD centres. Sustaining and scaling these initiatives therefore depends on national policy guidelines, community engagement, and the innovative approaches of ECD educators. For example, one teacher highlighted school-based initiatives that integrate medical treatment practices in classroom activities and thereby demonstrating a holistic model of inclusive pre-primary education for others to emulate:

> One day, a parent brought his child with severe physical disability (the muscle tone in the upper and lower limbs were weak) to our school … I was responsible for sports activities among other activities … I made sure the sports activities were both therapeutic and educational, the indoor and outdoor sports environment were barrier-free or disability-friendly … His individual education plan was discussed with therapists prior to teaching or assessment … he participated in all class activities with peers *(Pre-primary schoolteacher).*

In summary, the integration of learning and teaching activities with therapeutic support represents an innovative initiative, one which has been pioneered in one specialised ECD centre and that continues to serve as a model for many within Rwandan basic education.



3. CONCLUSIONS AND RECOMMENDATIONS

3.1. Conclusions

Rwanda's pre-primary education system has made commendable progress in disability inclusion, driven as it is by a robust policy framework that recognises early childhood as a foundational stage for lifelong health, productivity, and equity. The 2016 ECD Policy and its supporting instruments, such as the ECD Strategic Implementation Plan and the National Standards for Early Childhood Development, have contributed to significant gains – notably a rise in disability-adapted institutions from 5.7% in 2017 to 66% in 2024 and an increase in enrolment of children with disabilities from 1,362 to 3,125 over the same period. These advances reflect Rwanda's commitment to rights-based approaches, as enshrined in its 2003 Constitution (revised 2015) and in line with international commitments such as the UNCRPD.

However, the study reveals persistent implementation gaps that hinder full inclusion. Despite policy intentions, barriers such as inadequate teacher training in inclusive pedagogy, limited access to assistive devices, and inaccessible infrastructure continue to exclude many children with disabilities from equitable participation. Classroom observations across 25 schools in all five provinces highlighted inconsistencies in play-based learning adaptations, with only a few specialised centres demonstrating holistic models integrating therapeutic and educational activities. Community-level stigma and weak cross-sectoral coordination exacerbate these challenges, resulting in low enrolment and retention rates.

Bridging this policy-practice divide requires sustained, multi-sectoral investment to transform intent into impact. By prioritising teacher capacity-building, resource provision, and awareness-raising (as echoed unanimously by stakeholders), the government, educators, CSOs, OPDs and communities can foster an inclusive pre-primary education ecosystem. This would not only fulfil Rwanda's constitutional and international obligations but also position the country as a model for Africa, thereby contributing to the advancement of continental goals under frameworks such as the African Disability Protocol and CESA 16–25. Ultimately, realising disability-inclusive pre-primary education would empower all children to thrive, laying the groundwork for a more equitable society where diversity is celebrated and no child is left behind.

3.2. Recommendations

The study shows clear consensus: policy intent for disability-inclusive pre-primary education is strong,

but practice is constrained by gaps in teacher capacity, resources, early identification, infrastructure, coordination, and community awareness. Stakeholders across sectors unanimously emphasised three core priorities: training educators in inclusive pedagogy; providing schools with appropriate resources and services; and raising awareness to reduce stigma and marginalisation. Given these shared priorities and the study's key findings, the following recommendations propose concrete actions for key actors. They are designed to address the identified barriers, close implementation gaps, scale up existing good practices, and strengthen multi-sectoral coordination for sustainable disability inclusion.

Government and policy-makers (MINEDUC, MIGEPROF, MINISANTE, MINALOC, NCDA)

The government must lead in strengthening policy implementation and resource allocation in order to mainstream disability inclusion. Key actions include the following:

- *Develop and enforce national guidelines for inclusive pedagogy:* Enforce mandatory in-service training on Rwanda Sign Language, Braille, and assistive technologies, thereby responding to educators' calls for continuous capacity-building and to evidence of teachers' limited skills in managing learners with diverse disabilities.
- *Allocate increased budgets for pre-primary education at national and local levels:* Earmark funds for assistive devices, infrastructure adaptations, and adapted learning materials.
- *Strengthen inter-ministerial collaboration:* Adopt standardised screening and referral protocols that link health, education, and social services to ensure early identification and coordinated support for children with disabilities.
- *Integrate disability-inclusive measurement in national data systems:* Include indicators in CAMIS and the Education Statistical Yearbook, disaggregated by disability type, gender, and region, in order to monitor progress and ensure accountability.

Stakeholder voices

- Teacher training and CPD on inclusive pedagogy.
- Regular workshops and in-service training.
- Curriculum adaptation for children with intellectual disabilities.
- Budget allocations to inclusive education and the procurement of assistive and adaptive devices and materials.
- Accessibility standards for infrastructure (ramps, wide doors, quiet spaces).
- Inter-ministerial collaboration, particularly among MINEDUC, MINISANTE, and MIGEPROF
- Stronger policy commitment and monitoring.

Educators and schools (REB, NESA, school leaders)

Educators play a frontline role in translating policy into practice. Required actions in this regard include the following:

- *Adapt curricula and teaching methods using Universal Design for Learning principles*: Incorporate basic sign language, Braille awareness, early identification and differentiated instruction into daily practice.
- *Foster a school-level disability-inclusive culture:* Implement awareness programmes for staff and students, thereby addressing evidence of stigma and exclusion observed in classroom interactions.
- *Collaborate with therapists and disability specialists:* Integrate therapeutic-educational activities, as demonstrated in model centres such as HVP Gatagara Gikondo, and procure adapted learning materials to meet educators' priority needs.
- *Ensure the accessibility of all school activities and facilities:* Improve accessibility of WASH facilities, playgrounds, and classrooms so as to address accessibly-related barriers of the kind observed in the schools in this study.

Stakeholder voices

- Integrate inclusive pedagogy in pre-service curricula.
- Provide practical skills in sign language, Braille and assistive technologies.
- Motivate and incentivise ECD teachers.
- Foster an inclusive school culture through awareness and sensitisation.
- Ensure that all school activities are inclusive and accessible.
- Strengthen collaboration with parents and families, as well as experts in special needs education.
- Provide specialised support for learners who cannot cope in mainstream classes.

Non-state actors (CSOs, NGOs, OPDs, and CBR Implementers)

Civil society plays a paramount role in advocacy, technical support, awareness-raising, and community mobilisation. Actions include the following:

- *Lead community campaigns to reduce stigma and promote early enrolment:* Address stigma and invest in attitudinal change and community involvement.
- *Partner with the government on teacher training and the provision*

of assistive devices: Contribute to continuous capacity-building for educators and procurement of adapted learning materials, particularly in rural and under-resourced areas.

- *Advocate for curricular reforms:* Push for curriculum adaptations to better serve learners with intellectual and multiple disabilities.
- *Strengthen CBR programmes:* Expand their reach to provide essential support for the early identification of children with disabilities, timely interventions, and comprehensive family assistance.

Stakeholder voices

- Undertake advocacy for curricular adaptation and inclusive education beyond physical access.
- Provide continuous capacity-building for educators.
- Promote community involvement and attitudinal change.
- Scale up CBR for early identification and family support.
- Promote Universal Design for Learning.
- Increase awareness in schools and communities.
- Encourage inclusive games and sports.
- Foster collaboration between health, education, and social services to support complex needs.

Parents and communities

Parental and community engagement is essential in combatting stigma and sustaining disability inclusion in pre-primary education. Actions include these:

- *Participate actively in school activities:* Collaborate with teachers and advocate for children's needs.
- *Engage in awareness campaigns:* Promote positive attitudes towards disability inclusion and address the marginalisation of children with disabilities.
- *Collaborate with schools and CBR programmes:* Work jointly to provide home-based support for children with disabilities, thus helping to prepare them for, and ease their transition into, pre-primary education.

These recommendations, drawn from the study's key findings and stakeholder voices, call for integrated, multi-sectoral efforts. By prioritising teacher training, resource provision, early identification, and awareness raising, Rwanda can move from policy commitments to practical impact. This would not only fulfil constitutional and international obligations but also ensure that every child, including one with disability, has the opportunity to access, participate, and thrive in pre-primary education.

ANNEX 1: GLOSSARY OF KEY TERMS

Accessibility (physical and informational):

- *Physical accessibility:* Built-environment features (ramps, widened doorways, adapted toilets, safe play surfaces).
- *Information and communication accessibility*: Availability of materials and communication modes (large print; Braille; sign language; pictorial supports).

Caregivers: Persons in charge of attending to the care needs of a child. Caregivers may be parents, family members or other persons accorded such duties in a formal or informal setting.

Child development: A process of change in which a child comes to master increasingly complex levels of moving, thinking, feeling and interacting with people and objects in the environment.

Child protection: The prevention of and response to exploitation, abuse, neglect, harmful practices and violence against children.

Disability: An evolving concept, disability results from the interaction between persons with impairments and attitudinal, environmental and institutional barriers that hinder their full and effective participation in society on an equal basis with others.

Early childhood development (ECD): The sensory-motor, social-emotional and cognitive-language development changes which a child undergoes his or her early years of life from conception to 6 years of age. ECD entails providing integrated services that help children develop to their full potential in terms of health and nutrition, education, and psychosocial wellbeing. This requires support from caregivers.

Early childhood: The period from conception to 6 years of age (in the Rwandan context, for the purposes of this study).

Early learning: Responsive and nurturing interaction with caregivers during which children are exposed to rich learning opportunities.

ECD facility: Any place, building or premises, including a private residence, which is maintained or used full- or part-time for the reception, protection and temporary or partial care of children.

ECD service provider: An organisation, business, individual, local authority, or group of parents offering ECD services.

Holistic development: Holistic development considers the whole child and emphasises the importance of his or her physical, social, emotional, cognitive, moral, creative and aesthetic abilities. Every aspect of a child's development should be recognised and valued in order to maximise the child's potential.

Human Capital Index: An index that quantifies the contribution of health and education to the productivity of the next generation of workers.

Impairment: A concept that encompasses the full and diverse range of functional impairments, including physical, sensory, neurological, psychiatric, and intellectual. All of them may be permanent, intermittent, temporary, or perceived as impairment by society (though not necessarily by individuals).

Inclusive education: Education systems, policies and practices designed to remove barriers so all learners, regardless of disability, gender, ethnicity or socio-economic status, learn together in mainstream settings to the greatest extent possible.

Inshuti z' Umuryango: *Inshuti z'Umuryango* ('Friends of the Family') are community volunteers responsible for child protection within the community.

Pillars of ECD: Rwanda's ECD policy highlights six pillars that support the implementation of the policy and holistic ECD service delivery for the wellbeing of the child: health, nutrition, education, WASH, child protection, and positive parenting.

Pre-primary education: Also known in Rwanda as early childhood education (ECE), it is the initial stage of formal learning designed to introduce children to a school environment before primary education. It typically covers children aged 3 to 5 years, focusing on holistic development through play-based learning.

Primary caregiver: The parent, guardian or any other person legally responsible for the daily care and rearing of a child.

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