

**ASSESSING THE ROLE OF COMMUNITY BASED REHABILITATION
IN PROMOTING INCLUSIVE EDUCATION FOR STUDENTS WITH
DISABILITIES AT LILONGWE REHABILITATION CENTER**

BY

SELLINA MAGANGA

24325252020

Guide

FREEZA JEFUTALA

PROJECT REPORT

Submitted

In partial fulfillment of the requirements for the Degree of

**BACHELORS DEGREE OF SOCIAL WORK IN PROJECT MANAGEMENT
MONITORING AND EVALUATION.**

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DMI-STJOHNTHEBAPTISTUNIVERSITYMALAWI

SCHOOL OF SOCIAL WORK

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This is to certify that the project work entitled **ASSESSING THE ROLE OF COMMUNITY-BASED REHABILITATION IN PROMOTING INCLUSIVE EDUCATION FOR STUDENTS WITH DISABILITIES: A CASE STUDY OF THE LILONGWE REHABILITATION CENTER** is a bonafide work of **SELLINA MAGANGA** Registration No. **24325252020** in partial fulfillment for the award of the **BACHELORS DEGREE OF SOCIAL WORK** of **DMI St. John Baptist University** under my guidance. This work is original one and not submitted earlier for the award of any Degree elsewhere.

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I, **SELLINA MAGANGA** hereby declare that this project report on **ASSESSING THE ROLE OF COMMUNITY-BASED REHABILITATION IN PROMOTING INCLUSIVE EDUCATION FOR STUDENTS WITH DISABILITIES.: A CASE STUDY OF LILONGWE REHABILITATION CENTER** is submitted to DMI St. John Baptist University in the partial fulfillment of requirements for the award of **BACHELOR DEGREE OF SOCIAL WORK** is a record of the original work done by me under the supervision of Mr. Freeza Jefutala.

Enrolment No. :

Register No. : **24325252020**

Date :

Signature :

PROJECT PROPOSAL APPROVAL FORM

Proposed Project Work by:

S.No.	Reg. No.	Name of the Candidate	Semester	Branch
	24325252020	SELLINA MAGANGA	VIII	BSW

Title of the Project:	ASSESSING THE ROLE OF COMMUNITY-BASED REHABILITATION IN PROMOTING INCLUSIVE EDUCATION FOR STUDENTS WITH DISABILITIES.
Subject Area:	Rehabilitation and inclusive education
Name of the Guide:	MR. FREEZA JEFUTALA
Designation :	
Address with Phone No.: DMI UNIVERSITY,P.O.BOX 2398,LILONGWE(+265994308038)	
No. of projects & students currently working under the Guide:	

Signature of the Student **Signature of the Guide with seal.....**

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BIO-DATA OF THE PROPOSED GUIDE FOR PROJECT WORK

1. PERSONAL INFORMATION

NAME (in block letters) : MR. FREEZER JEFUTALA
Sex : MALE
Qualifications : BSW, MSW
Official Address : DMI. St. John Baptist University, P.O. Box 2398, Lilongwe
Phone No. and Fax. : +265992371901
Residential Address : Paul Kagame Road. Area 4/083, LILONGWE
Phone No., and e-mail id : +265992371901

2. DETAILS OF EMPLOYMENT

Designation : LECTURE II
Field of Specialization : PROJECT MANAGEMENT
Teaching Experience (in years) : 8
Industrial Experience (in years) : 8
Particulars of contribution / experience in the field of specialization:
No. of Projects guided:

I, **FREEZER JEFUTALA** do hereby accept to guide **SELLINA MAGANGA** the student of the BACHELOR OF SOCIAL WORK program of the DMI ST. JOHN BAPTIST UNIVERSITY.

Signature of the Student

.....

Signature of the Guide with Seal

.....



APPENDIX VI

DMI-ST. JOHN THE BAPTIST UNIVERSITY

LILONGWE - MALAWI

BONAFIDE CERTIFICATE

Register No. 24325252001

Certified that this is Bonafide record of work done in **ASSESSING THE ROLE OF COMMUNITY-BASED REHABILITATION IN PROMOTING INCLUSIVE EDUCATION FOR STUDENTS WITH DISABILITIES: A CASE STUDY OF LILONGWE REHABILITATION CENTER** course in SOCIAL WORK Department at DMI St. John the Baptist University during the academic year 2025.

INTERNAL EXAMINER

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EXTERNAL EXAMINER

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ABSTRACT

This study assesses the role of community-based rehabilitation in promoting inclusive education for students with disabilities at Lilongwe rehabilitation center. This research focuses on how on how community-based rehabilitation initiatives enhances education access, participation and outcomes for individuals with disabilities, ensuring a social and academic inclusion. A qualitative approach method to be used to give an insight into the impact of community-based rehabilitation on inclusive education, education programs, their effectiveness and challenges in supporting learners with disabilities. Data will be collected through interviews and focus group discussions where participants will express their views based on their understanding and experience. The population study includes caregivers, students with disabilities and education professionals who were randomly selected from the area. The sampled data comprised 25 participants: educators, students with disabilities, rehabilitation officer, care givers and government official/ policy maker. Exploratory approach design to be used and to analyze data with the aid of thematic data analysis. This research study is effective in contributing to policy development and program improvement in disability inclusive education by identifying best practices and challenges. Findings of this research will aid educational institution, policy makers and disability rights organization in enhancing support mechanism for students with disabilities and promoting their social inclusion and academic success. Evaluation of the community-based rehabilitation roles in inclusive education aims at providing evidence-based recommendations for strengthening education system to accommodate learners with disabilities effectively.

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List of Acronyms

UN	United Nations
UNCRPD.....	United Convention on the Rights of Persons with Disabilities
NGO	Non-Governmental Organization
DFID	Department for International Development
NEEF	National Economic Empowerment Fund
SMEs	Small and Medium Enterprises

CHAPTER ONE

INTRODUCTION

1.1 Introduction

Community- based rehabilitation programs have played a critical role in bridging the gap between policy and practice by working directly with schools, families and communities to promote inclusion and support to students with disabilities including their access to education (IIO UNESCO & WHO, 2004). Education has emerged as a global priority in the pursuit of equal education access for all learners, including persons with disabilities. Community-based rehabilitation as promoted by (WHO) world health organization designed to improve the quality of life of people with disabilities by enhancing access to equal education and social inclusion (world health organisation , 2010). The education component of community-based rehabilitation emphasizes the right of children with disabilities to receive education within their communities through inclusive practices and fostering both academic and social development.

1.2 Background of the study

According to (ARTICLE 24 UNCRPD, 2006) it calls for inclusive education where people with disabilities can learn alongside their peers, Despite the efforts made by the center and international frameworks such as United Nations Convention on the Rights of persons with disabilities many low-income countries face challenges in implementing inclusive education for people with disabilities this challenge includes inaccessible environments, lack of trained personnel and limited resources. Lilongwe rehabilitation center is located in Malawi's capital city; it is one of the country's key public institutions offering specialized rehabilitation services for persons with disabilities. The center collaborates with schools, families and community-based organizations to promote inclusive education. It includes identifying children with disabilities in the communities, facilitating assessments and referrals and supporting their integration into mainstream schools in accordance to (world health organisation , 2010) community-based rehabilitation which emphasizes on the right of children with disabilities to receive equal access of education within

their communities. The centers also offer basic training to caregivers' teachers and community rehabilitation workers on how to support learners with special needs in classroom settings. It also contributes to inclusive education by advocating for accessible environments, providing assistive devices such as wheelchairs and hearing aids and offering school reading programs especially children with physical and intellectual disabilities.

1.3 Problem statement

Due to infrastructural attitudinal and systemic challenges (WHO AND WORLD BANK , 2011) Malawi particularly persons with disabilities face significance barriers in accessing quality and inclusive education. These barriers include lack of trained teachers, inaccessible infrastructure and limited availability of assistive devices and learning materials. Despite national and international commitments to inclusive education and equality education for all (UNITED NATIONS, 2015), persons with disabilities remain excluded from educational mainstream. There is also limited in understanding how community-based rehabilitation programs contribute to supporting inclusive education in persons with disabilities. Various factors may contribute to this problem including limited resources, inadequate specialized teaching staff, stigma and inaccessible infrastructure. This issue may hinder the opportunity of persons with disabilities to inclusive education support effectively. In Malawi institutions like Lilongwe rehabilitation center plays a role in implementing community-based rehabilitation programs. However the extent of which these programs contribute to improved educational access, participation and outcomes for students with disabilities has not been established. There is lack of empirical evidence support to show how community-based rehabilitation supports inclusive education and improves the overall quality of life for persons with disabilities. Without such evidence allocation of resources effectively for successful interventions becomes difficult. This study seeks to assess the role of community-based rehabilitation in supporting inclusive education and enhancing the lives of persons with disabilities using Lilongwe rehabilitation center.

1.4 Research Objectives

1.4.1 Main Objectives

- ❖ Assessing the role of community-based rehabilitation in promoting inclusive education on students with disabilities at Lilongwe rehabilitation center.

1.4.2 Specific Objectives

1. To evaluate the effectiveness of community-based rehabilitation in facilitating access to educational resources at Lilongwe rehabilitation center.
2. To assess the impact of inclusive education at Lilongwe rehabilitation center
3. To identify challenges faced by community-based rehabilitation initiatives in promoting inclusive education at Lilongwe rehabilitation center.
4. To find strategies for strengthening community-based rehabilitation programs in order to enhance the promotion of inclusive education for persons with disabilities at Lilongwe rehabilitation center.

1.5 Research Questions

1. What role do community-based rehabilitation programs play in supporting inclusive education initiatives for students with disabilities at Lilongwe rehabilitation center?
2. How effective are community-based rehabilitation efforts in facilitating access to educational resources at Lilongwe habitation center?
3. What is the impact of inclusive education on students with disabilities at Lilongwe rehabilitation center?
4. What challenges are faced by community-based rehabilitation initiatives in promoting inclusive education at Lilongwe rehabilitation center?
5. How can community-based rehabilitation programs at Lilongwe rehabilitation center be strengthened to more effectively promote inclusive education for persons with disabilities?

1.6 Significance of the study

The study of this research is significant for several stakeholders. This include policy makers who are given a data driven insight to form inclusive education and disability policies. For educator's rehabilitation professionals the study also highlights practices that are effective and areas that need improvements. Communities and organizations may use the findings of the study to strengthen rehabilitation education programs. It also contributes to academic literature on inclusive education and rehabilitation.

1.7 Structure of the report

Chapter 1: Introduction

This chapter includes the introduction of the study, problem statement, background of the study,

Chapter II: Literature review, this chapter contains literature review, definition of terms, empirical evidence and chapter summary.

Chapter III: Research methodology, this will be the methodological part of the study.

Chapter IV: Presentation of results, discussion and interpretation this involves findings, conclusions and recommendations 'Bibliography and references.

Chapter V: Conclusion and recommendations 'Bibliography and references.

1.8 Chapter summary

This chapter has outlined the introduction, background of the study, problem statement, research objectives and research questions, significance of the study, structure of the report and chapter summary respectively.

CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

This literature aims to examine existing literature related to community-based rehabilitation and its influence on inclusive education and the overall quality of life of students with disabilities. By analyzing the findings and methodologies of previous studies, this review seeks to provide a theoretical and comprehensive understanding the role of community-based rehabilitation in promoting inclusive education. The review will focus on global, regional and local contexts, highlighting gaps that this research aims to address at Lilongwe rehabilitation center.

2.2 Definition of terms

2.2.1 Community based rehabilitation

Community based rehabilitation is a multi-sector strategy that promotes the rights and inclusion of people with disabilities. According to (world health organization, 2010) It emphasizes education social inclusion and empowerment.

2.2.2 Inclusive education

Inclusive education refers to a process of addressing and responding to diversity of needs of all learners. According to (UNESCO, 2009) inclusive education address and responds to diversity needs of all learners by increasing participation in learning and reducing exclusion from education.

2.2.3 Persons with disabilities

Persons with disabilities according to united (UNITED, 2006) are those who have long-term physical, mental, intellectual sensory impairments which in interaction with various barriers may hinder full and effective participation in society.

2.2.4 Rehabilitation

World health organization (WHO, 2011) defined rehabilitation as a process aimed at enabling person with disabilities to attain and maintain optimal physical, sensory, intellectual and psychological functioning and independence.

2.2.5 Caregiver

An individual who assist in identification, prevention of an illness or disability, according to American Heritage (American Heritage, 2016). In this study a caregiver is a person who his/her job description is to provide care to person with disabilities with their daily activities.

2.3 Empirical evidence

2.3.1 Community-based programs on inclusive education

Community-based rehabilitation was introduced by world health organization in 1980s as a strategy to enhance a quality of life to people with disabilities (world health organisation , 2010).

In Malawi community-based rehabilitation initiatives facilitated by governmental and non-governmental organization have led to greater community acceptance of inclusive education with local volunteers supporting home-school transitions and classroom integration. Education-focused CBR programs include train community and school personnel to support inclusive teaching, promote awareness to reduce stigma around disability in educational contexts and increase access to quality, inclusive education to children with disabilities.

Within education community-based rehabilitation supports inclusive education by mobilizing communities, creating awareness and facilitating linkages between families, schools and services. According to (AL, 2012) community-based rehabilitation plays a role in raising awareness, identifying children with disabilities and enrollment of children with disabilities by engaging parents and sensitizing teachers. Community-based rehabilitation initiatives also work hand in hand with families, schools and communities to address barriers to inclusive education to ensure inclusive and equitable quality education for all.

Empowerment CBR programs equip individuals with disabilities with the knowledge, skills and resources to advocate for their rights and access to education and create supportive environments

for all learners. They achieve this through combination of raising awareness, providing information, building capacity and facilitating participation, this ultimately led to greater control and decision-making for people with disabilities. Community-based rehabilitation programs ensures accessibility of schools to individuals with disabilities through physical modifications and other support services.

Addressing barriers and promoting social inclusion, community-based rehabilitation programs identifies and addresses barriers to education, such as lack of resources, discrimination and lack of awareness. Community-based rehabilitation programs ensures that individuals with disabilities have equal opportunities to participate and benefit from education and social activities. Community-based rehabilitation programs promote inclusion through empowering communities to recognize and value contributions of individuals with disabilities, and providing support and services and accommodations that enable them to access education and participate fully in society.

Provision of family support and collaboration with professionals, they work with professionals such as therapists and special education teachers to develop and implement individualized education plans, CBR programs often provide support to families helping them understand their child needs and advocate for their rights.

Promoting inclusive practices, CBR programs promote the adoption of inclusive teaching methods and strategies in schools to support persons with disabilities. Community-based rehabilitation programs ensures that individuals with disabilities have equal opportunities to access quality education and according to Uganda it highlighted the importance of inclusive education programs that adapt the individual needs of all students with support and compassion in the least restrictive environment.

2.3.2 Effectiveness of community-based rehabilitation in facilitating educational resources

kvam and Braathen 2008 showed that community sensitization and advocacy have been effective tools employed by CBR programs to influence policy and resources allocation. Collaboration of governmental and non-governmental organization on the other hand has enabled many CBR programs to secure necessary educational supports for learners with disabilities. Studies shows that in India CBR initiatives significantly contribute to increased enrollment of children with

disabilities by facilitating access and providing mobility aids and learning support. In Tanzania, a study by Mwakyeja (MWAKYEJA, 2013) showed that community-based rehabilitation programs facilitated partnership with local organizations to build accessible schools toilets and ramps, distribute braille materials and support inclusive teacher training. And according to (KASONGA, 2014) in Zambia, school supported by community-based rehabilitation programs saw a 40% increase in school attendance due to improved availability of adapted materials and inclusive learning environments. Community-based rehabilitation programs have improved access to education by distributing devices, learning materials and providing teachers training (LYNCH ET AL., 2014). They also played a vital role in advocating for inclusive policies and mobilizing community resources.

Increased access CBR programs can help bridge the gap in accessing educational resources by working with local communities and relevant organizations to ensure that people with disabilities have access to appropriate educational settings, services and support. Community-based rehabilitation programs also contribute to an educational environment by promoting a culture of acceptance and understanding within schools and communities, leading into greater social participation and integration of people with disabilities.

Increased access to information and empowerment, by providing accessible information and empowering individuals of persons with disabilities, their families and communities can promote inclusive education and break down barriers to learning. This can be achieved through various means such as, providing accessible educational materials, promoting disability awareness and inclusive practices. Empowered individuals with disabilities can advocate for their rights and access educational opportunities, while empowered communities can create supportive environments that foster inclusive education by leveraging technology, community resources and partnerships. According to world health organization (WHO, 2018) community-based programs can increase access to information and empowerment, ultimately enhancing the educational outcomes and opportunities for persons with disabilities.

Enhances the accessibility of education resources for people with disabilities, community-based rehabilitation programs can improve accessibility by providing assistive devices, adapting curricula and training educators to use inclusive teaching methods. In addition to that CBR programs promote the use of accessible devices such as Braille, large print or digital formats and

leverage technology to enhance access to education. By enhancing this accessibility CBR programs can help ensure that students with disabilities have equal opportunities to access quality education participate fully in learning activities and achieve their academic potential. According to United Nations Education Outcomes (UNESCO, 2019) accessibility can also lead to improved educational outcomes increased social inclusion and enhanced economic opportunities for individuals with disabilities.

2.3.3 Impact on inclusive education

Inclusive education has led to increase learner participation and better at academic and social outcomes for children with disabilities at centers like Lilongwe rehabilitation center. Banda and Mhango (2019) reported improvements in classroom interaction, confidence and learning achievements among students with disabilities due to individualized support plans and regular monitoring by rehabilitation staff. According to Mhango and chataika centers collaboration with local schools and stakeholders has enabled the development of an inclusive curriculum and the training of mainstream teachers in inclusive pedagogies (2020). Additionally, children with disabilities reported a greater sense of belonging and reduced stigma within their communities.

In Nepal, CBR programs that provided Braille materials and teacher training increased the retention of visually impaired students in regular schools, and provision of inclusive education toolkit through CBR enhanced teacher's ability to differentiate instruction. Access to funding and intersection coordination also significantly influence the availability and effectiveness of these resources. Provision of CBR integrate education resources such as adapted learning devices, materials, assistive devices and trained personnel have also achieved a greater success. Inclusive education can also increase job satisfaction and professional growth among teachers, inclusive education provides opportunities for teachers to expand their skills and learn new strategies for differentiated instruction. On the wider community inclusive education helps create a more inclusive and equitable society, where everyone is valued and respected, reducing discrimination by promoting and understanding empathy and promoting social harmony and promotes a sense of belonging for all members.

Positive learning environments inclusive classrooms are more welcoming and inclusive, fostering a culture of acceptance, empathy and mutual respect. Inclusive education also promotes social interaction, understanding and friendship among students of diverse backgrounds and abilities

creating a supportive and welcoming atmosphere. By valuing diversity and promoting participation inclusive education breaks down barriers reducing bullying and stereotypes, preparing students to thrive in an increasingly diverse and complex world.

Reduced social stigma and increased acceptance inclusion helps overcome prejudice and discrimination, promoting acceptance of differences and fostering a sense of belonging for all students. Stigma is reduced as students with disabilities learn alongside their peers with disabilities, fostering a culture of understanding and acceptance. Research has shown that inclusive education can have a positive impact on the social and emotional developments of all students regardless of their abilities.

Increased empathy and social skills, inclusion allows students to interact with different learning needs and perspectives. By interacting with students with disabilities, non-disabled students develop essential life skills such as communication, cooperation and conflict resolution. This interaction promotes empathy allowing students to appreciate individual differences and develop more positive attitudes towards others. According to savage. R.C Pearson (savage et.) It shows that inclusive education significantly enhances social skills and empathy in students leading into more harmonious and supportive school environment.

Improved academic outcomes, inclusive settings can be effective for students with disabilities and may benefit students without disabilities by providing a more engaging and diverse learning environment. Inclusive education provide promotes a tailored instruction, accommodations and support services that cater to diverse learning needs, enabling students to reach their full potential. Inclusive education leads to increased academic achievement, improved social-emotional learning and enhanced overall educational experiences for all students. By valuing diversity and promoting participation inclusive education creates a positive learning environment that benefits students of all abilities leading to better academic outcomes and increased opportunities for future success, and by using all this approaches it helps close the achievement gap and fosters a love of learning.

2.3.4 Challenges faced by community-based initiatives

Despite successes community-based rehabilitation initiatives in promoting inclusive education several challenges hinder the effectiveness of CBR in supporting inclusive education. Key barriers include limited funding, lack of qualified personnel, poor infrastructure and entrenched societal

stigma towards disability (2008) Lang and Upah. According to Mungo et al. (2010) it highlighted that many community-based rehabilitation initiatives lack consistent government support and suffer from weak inter-sectoral collaboration. In rural areas, transportation difficulties and shortage of assistive devices further limit education access, moreover insufficient data on disability prevalence undermines planning and service delivery.

Community-based rehabilitation programs also operate with under-qualified staff lacking specific skills for inclusive education particularly in rural areas. Staff members may lack training on inclusive education, disability support and rehabilitation support which can hinder the effectiveness of CBR programs. Under-qualified staff may also struggle to adapt teaching methods, and materials to meet the diverse needs of children with disabilities. Staff members may also struggle to provide equipped support to children with disabilities hindering their access to inclusive education. Teaching in an inclusive classroom can be challenging leading to teachers stress and burnout affecting teacher's performance in work place, and according to the international labor office it has classified teaching as profession of high physical and mental risk it proposes that stress may be caused by work organizations and design and it happens when the demand of the profession do not match the competences of the employee (ILO, 2016 P.2).

Lack of assistive devices, the absence of essential assistive devices like wheelchairs, crutches and white canes for those with disabilities hinders their ability to participate fully in community life and access services. Without wheelchairs or other mobility aids, individuals with disabilities may struggle to perform and participate in social activities. According to save the children (save the children, 2017) students with disabilities may require assistive devices such as hearing aids, or Braille materials to access education and without this devices they may face significant barriers to learning.

Stigma and discrimination, negative attitude and beliefs about people with disabilities can lead to social exclusion and limit participation in CBR programs. Stigma can lead to feeling of shame, low self-esteem and isolation hindering the effectiveness of CBR programs. Discrimination can limit access to education, employment healthcare and other social services, further marginalizing individuals with disabilities. In many communities, cultural and traditional beliefs perpetuate stigma making it difficult for individuals with disabilities to fully participate in society.

Lack of funding community-based rehabilitation lack financial funding to afford materials for inclusive education and provide education support to children with disabilities. According to Bruce (2016) in Ghana it shows that there is no government funding available for community-based rehabilitation care, and if persons with disabilities and their families cannot afford to pay for it, they will not receive it. CBR programs in Ghana were shutting down due to lack of government support. Although funding is available sometimes it is often not sufficiently stable to plan for long-term and once the non-governmental organizations removes the funding CBR program is usually not sustainable.

2.3.5 Strategies for strengthening community-based initiatives

The following strategies are recommended to address and enhance the role of CBR in promoting inclusive education. According to WHO (world health organisation , 2010) capacity building is one of the strategies, capacity building involves investing in training community-based rehabilitation workers and inclusive education teachers, training CBR workers on topics like rehabilitation disability awareness rehabilitation techniques ensures competent and confidence in workers. Policy integration aligning CBR with national inclusive education policies to ensure systemic support (UNESCO, 2017), CBR initiatives by providing a legal and political framework for its implementation helps in promoting rights and inclusion of people with disabilities and also ensures that CBR programs are recognized and supported, national inclusive policies raise awareness about disability issues and the importance of rehabilitation creating a supportive environment for CBR initiatives.

Sustainable funding is also one of the strategies, it involves developing partnership with NGOs, government's bodies and donors to increase funding, sustainable funding ensures the long-term viability of CBR initiatives by enabling them to address needs of individuals with disabilities more effectively and promote their social inclusion. Community engagement and participation active involvement of community members in identifying CBR needs developing solutions and implementing programs fosters ownership and ensures that program aligns with local priorities and cultural context. Community engagement and participation strategies also builds strong relationships between the government non-governmental organizations disability organizations and community leaders.

Technology and innovation, exploring and utilizing appropriate technology to enhance rehabilitation services this include using digital tools for remote rehabilitation, assistive technology for enhanced mobility and educational resources for wider community engagement. Digital platforms like health and online video consultation can reach individuals in remote areas bringing geographical barriers to rehabilitation services. Tools like mobile applications can provide personalized rehabilitation exercises, reminders and progress tracking making rehabilitation more convenient and accessible. And assistive technology devices like exoskeletons and therapeutic robots facilitate motor recovery, while virtual reality and augmented reality applications offer immersive experiences for cognitive and physical rehabilitation.

Monitoring and evaluation, this is one of the crucial strategies in strengthening community-based rehabilitation initiatives by ensuring that programs are effective, efficient and responsive to community needs. Monitoring and evaluation are done through systematic tracking of progress and outcomes, M&E helps in identifying strength and weaknesses, informing decision-making and program adjustments. This enables community-based programs to adapt to changing community context, optimize resource use and ultimately enhance the quality of life for persons with disabilities and access to inclusive education. According to Hartley, s & Murira, N it shows that by integrating M&E into CBR initiatives organizations can foster a culture of accountability, learning and continuous improvements, leading to more impact and sustainable outcomes. monitoring and evaluation can also improve inclusive education by tracking the participation and progress of students with disabilities, identifying barriers to inclusive education and informing strategies to promote accessible and supportive learning environments.

2.4 Theoretical framework

This study is guided by the social model of disability, which argues that disability is not caused by a person's impairment but barriers within the environment, society and institutions. According to this model, learners with disabilities are excluded from education not because of their conditions but because schools and communities fail to provide supportive, accessible and inclusive environments.

2.5 Chapter summary

This chapter defined the important terms of the study as well as literature reviews related to CBR and its role in promoting inclusive education for persons with disabilities. It will examine how CBR support inclusive initiatives, facilitates access to educational resources and impacts learner outcomes. Review identified major implementation challenges and provided strategic recommendation to strengthen initiatives.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter will explore methodologies to be used when assessing the role of community-based rehabilitation on inclusive education in enhancing the lives of persons with disabilities at Lilongwe rehabilitation center. Research methodology refers to the systematic process researchers use to conduct their studies. It encompasses various steps such as data collection, analysis, interpretation, and drawing conclusions. According to Saunders (2018) Research methodology is the systematic, theoretical analysis of the methods applied to a field of study. It comprises the theoretical analysis of the body of methods and principles associated with a branch of knowledge.

3.2.1 Research methodology

Qualitative research method is essential in this study as it will provide an in-depth insight, it allows to investigate deeply into the thoughts, feelings, and experiences of individuals or groups. It can uncover underlying motivations, beliefs, and attitudes that quantitative methods may not capture. Through in-depth interviews and focus group discussions this approach will allow the complexities and meanings of participant's experiences. Qualitative approach is particularly suitable for exploring the lived experiences of individuals with disabilities and understanding the contextual factors that influence the effectiveness of community-based rehabilitation programs.

3.2.2 Research design

This study will use the exploratory research design all about gathering information, generating insights, and forming initial hypotheses. Creswell (2018) showed that this design is also suitable for gaining deeper understanding of phenomenon or issue that has been extensively studied. This design allows researchers to explore the experiences, perceptions and outcomes of community-based rehabilitation programs in promoting inclusive education for individuals with disabilities. Through in-depth interviews and focus group discussions the exploratory design enables the collection of rich, qualitative data that can provide insights into complex interactions between CBR programs educator's rehabilitation officers and individuals with disabilities.

3.3 Research setting

This study will take place at Lilongwe rehabilitation center as a prominent rehabilitation center in the region that provides a range of services such as educational support to individuals with various types of disabilities. CBR programs like the one at Lilongwe rehabilitation center play a vital role in promoting inclusive education and community participation for persons with disabilities (Kaunda, 2018).

3.4 Target population

The target population will include Lilongwe rehabilitation staff, students with disabilities, caregivers and educational professionals. This individual will be selected because they will have hands on experience with community-based rehabilitation on inclusive education which significantly enhance the lives of persons with disabilities by promoting inclusive education chilala an Mkandawire (2016).

3.5 Sampling techniques

This study will use the random sampling technique and purposive sampling as their sampling techniques. Random sampling involves random selection of participants from Lilongwe rehabilitation center. By randomly selecting individuals from a population, every member has an equal chance of being selected (creswell, 2014). This reduces the likelihood of systematic errors or favoritism in the selection process. As a result, the sample is more likely to be representative of the entire population, allowing for more accurate and reliable conclusions to be drawn.

Another sampling technique is purposive sampling, this method involves intentionally selecting participants based on specific criteria relevant to the research question. In this context individuals with disabilities will be selected intentionally and those who are actively involved in both CBR programs and inclusive education. Purposive sampling ensures that your study includes individuals whose experiences are most relevant to understanding the impact of CBR on inclusive education. It allows you to target specific subgroups or communities where CBR programs are actively implemented and have measurable effects.

3.6 Sample size

The research will use an estimate of 25 participants as a sample size. This participant comprises of 5 educators who will provide instructional support to students with disabilities, students with

disabilities who are beneficiaries of the rehabilitation program, rehabilitation officers who implement and facilitate community-based rehabilitation initiatives and caregivers who provide primary support to the students with disabilities. This diverse sample will provide a comprehensive understanding of effectiveness of community-based rehabilitation in promoting inclusive education and enhancing the lives of persons with disabilities.

3.7 Research instruments

This study will use interviews and focus group discussions, interviews to be used to gather in-depth information from individuals with disabilities, educators and rehabilitation officers (Creswell, 2014). And focus group discussion to explore collective experiences and perception of community-based rehabilitation.

3.7.1 Data collection procedure

This study will use interview guide as the data collection tool. Interviews offer several advantages as a data collection tool, for example Rich Data, interviews allow for in-depth exploration of topics, providing rich qualitative data that can capture nuances and complexities not easily captured by other methods. Flexibility, Interviewers can adapt questions in real-time based on the interviewee's responses, allowing for deeper exploration of interesting topics or clarification of unclear points. Contextual Understanding, Interviews enable researchers to gain insights into the interviewee's perspectives, experiences, and emotions, providing a more comprehensive understanding of the topic being studied.

Focus group discussion will also be used to explore shared experience and collective views among groups of Lilongwe rehabilitation staff. This approach encourages interaction among participants which can give an insight on different perspective and agreements. In focus group discussions a number of people are asked to come together in a group to discuss a specific topic Krueger & Casey (2015). In the context of community-based rehabilitation on inclusive education focus group discussions can help rich contextual insights into the experiences, perceptions and opinions of stakeholders, including individuals with disabilities, educators and rehabilitation professionals.

3.8 Pilot study

A pilot study will test the interviews and focus group discussions study with 10 participants, this will be conducted to gather preliminary data on the affective of CBR in promoting inclusive education and enhancing lives of persons with disabilities.

3.9 Data analysis

This study will use thematic data analysis method, Thematic analysis is a method for analyzing qualitative data that involves reading through a set of data and looking for patterns in the meaning of the data to find themes. It is an active process of reflexivity in which the researcher's subjective experience is at the center of making sense of the data. Thematic analysis involves identifying, analyzing, and reporting patterns or themes within data. It's commonly used in qualitative research to uncover the underlying meanings and concepts present in the data. Researchers systematically organize and interpret the data to identify recurring themes that provide insight into the research question or topic being studied.

3.10 Ethical consideration

Ethical priorities will be considered to ensure that dignity rights and welfare of participants are protected. Informed consent will be obtained from all participants, including people with disabilities, educators' caregivers and educators ensuring that they understand the purpose, risk and benefits of the research. Confidentiality and anonymity will be maintained by using pseudonyms and coding information and storing data securely. The research will also be conducted with respect and sensitivity avoiding harm or exploitation and ensuring that participants are not pressured into participating. Necessary approvals from relevant authorities, including the Lilongwe rehabilitation center and consent letter from school will be included to ensure that the research meets ethical standards.

3.10 Chapter summary

This chapter focuses on the research methodology and design employed to assess the role of community-based rehabilitation on inclusive education in enhancing lives of persons with disabilities. This chapter also outlines the research approach, design and methods used to collect and analyze data, specifically it details the exploratory research design adopted to gain an in-depth understanding of the experiences and perceptions of individuals with disabilities, educators, rehabilitation officers and caregivers affiliated with the Lilongwe rehabilitation center. The chapter

also outlines research instruments, focus groups and interviews as well as sampling strategies, data analysis procedures and ethical considerations that were taken into account to ensure the integrity and validity of the research findings.

CHAPTER 4

DATA ANALYSIS AND PRESENTATION

4.1 Introduction

This chapter presents the analysis and interpretation of data collected from twenty-five respondents in exploring the role of community-based rehabilitation in promoting inclusive education for children with disabilities. The purpose of the data analysis is to interpret the views, experiences and perceptions of various stakeholders including CBR workers, teachers, and parents, learners with disabilities, community leaders and policy makers in order to address the study objectives. Both demographic and qualitative are analyzed to provide a comprehensive understanding of the current strength, challenges and opportunities within CBR initiatives. The demographic analysis provides an overview of the characteristics of the respondents, while the thematic analysis provides insights into the patterns that emerged from interview data. Themes were also generated in line with the study objectives and guiding questions in interview guide.

4.2 Response rate

A total number of 25 respondents participated in the study, representing a 100% response rate based on the targeted sample size. The demographic characteristics of the participants provide essential context for interpreting the findings of research on the role community-based rehabilitation in promoting inclusive education. The respondents came from diverse backgrounds, allowing the study to capture a wide range of perspectives, experiences and insights relevant to the objectives of the research.

4.3 Demographic information

Demographic characteristics were collected to provide background context on the respondents' gender, age and respondents roles, providing important context for understanding the perspectives expressed the findings.

4.3.1 Gender of respondents

The study achieved a balanced gender representation. Both male and female respondents participated in nearly equal numbers ensuring that views captures reflect perspectives from

different gender groups. This balance of gender strengthens the credibility of the data by minimizing gender bias in the response.

4.3.2 Age range of respondents

Participants represented a wide age span, ranging from young adults to older adults, generally between 18, and 45 years. For analysis ages were grouped into categories as follows 18-24 years, 25-34, years, 35-44 years and 45-50years. The distribution of the respondents was as follows 18-24, 25-34, 35-44,45-50. The largest proportion of respondents fell within 25-34 years of age group, this is indicating that the study was primarily informed by relatively young adults who are often active in education community work and care-giving roles. The second largest group were respondents aged 35-44, followed by the 18-24 years showing participation from younger stakeholders as well. The smallest category was 45-50 years of group suggesting fewer older participants took part in the study.

4.3.3 Role of respondents

The study engaged individuals from different categories who interact with Lilongwe CBR initiatives and inclusive education systems. The role represented include Lilongwe rehabilitation center staff, its educators, and students with disabilities, government official and guardians.

4.4 Presentation of research findings

4.4.1 To assess the role of community-based rehabilitation at Lilongwe rehabilitation center

The findings show that community-based rehabilitation plays a critical role in promoting inclusive education. The most prominent themes “awareness and attitude change referral and linkage, indicate that CBR workers at Lilongwe rehabilitation center are central in connecting children with disabilities to schools, conducting community sensitization and improving parental willingness to enroll children in mainstream education. Collaboration between CBR staff and teachers was also noted at Lilongwe rehabilitation center demonstrating CBR’s importance in preparing learners socially and academically for inclusion. Lilongwe rehabilitation center initiatives for inclusive education also raise awareness changing communities and preparing learners for school inclusion.

Awareness and attitude change

This theme refers to how Lilongwe rehabilitation CBR workers engage communities, parents and schools to reduce stigma and increase understanding about the rights and abilities of children with disabilities. Through sensitization meetings and home visits, attitude become more positive towards inclusive education. At Lilongwe rehabilitation center CBR workers identify children with disabilities in the community and conduct an initial assessment in the community. As one of Lilongwe CBR worker noted that, “*we organize community meetings to educate parents and community leaders about the rights of children with disabilities*” and according to (Cornienelje et al, 2025) this has increased enrollment in schools.

Referral and linkage

Community-based rehabilitation links children with disabilities to schools, assessment centers, hospitals and social services. This makes it easier for learners to enter schools and receive the support they need. A teacher reported that CBR workers help them identify children with disabilities and link them to our schools ensuring they receive the support they need (Lilongwe rehabilitation center, 2020)

Preparation for inclusion

Community-based rehabilitation initiatives at Lilongwe rehabilitation center also helps children develop social, mobility and communication skills before entering school. This improves their readiness to learn in inclusive setting. A Lilongwe CBR worker stated, “*We provide training in sign language and mobility skills to prepare children for inclusive education.*”

Advocacy

Community based-rehabilitation advocates rights to education by influencing schools’ authorities, requesting special accommodations and ensuring enrollment of children who may otherwise be left out. Lilongwe rehabilitation center advocate for inclusive education policies and ensure that schools provide necessary accommodations for children with disabilities. (Lilongwe rehabilitation center, 2020)

4.4.2 To assess the effectiveness of CBR programs in facilitating access to educational resources for children with disabilities at Lilongwe rehabilitation center

The most frequent themes include provision of assistive devices and resource barriers, it shows that while CBR programs at Lilongwe rehabilitation center do make efforts to secure learning

materials, mobility aids and assistive devices, they also face consistent challenges due to limited funding and delayed procurement process. Some respondents also highlighted the role of community mobilization in supplementing resource shortages. CBR is effective in sourcing essential learning aids but struggles with funding limitations and supply delays which restrict equitable access to resources.

Provision of assistive devices

Community-based rehabilitation at Lilongwe rehabilitation center helps acquire learning and mobility aids such as hearing aids, wheelchairs, braille materials and large-print books enabling learners to participate effectively in schools (World health organisation, 2010). A learner with disability shared “*CBR provided me with a wheel chair which has made it easier for me to attend school*”.

Resource barriers

Limited funding, shortages of materials and lack of specialized equipment restrict CBR’s ability to fully support learners with disabilities. Lilongwe rehabilitation center often face challenges in accessing resources, which limits our ability to support learners with disabilities.

Timeliness of support

Some educational resources at Lilongwe rehabilitation center are provided late due to financial constraints or delayed procurement processes affecting consistent and learning support (Lilongwe rehabilitation center, 2020). A teacher stated that “*sometimes we receive resources late which affects learning process for children with disabilities*”.

Community mobilization

Community based rehabilitation mobilizes members and local leaders contribute funds, materials, labor strengthening resources availability for inclusive education. Community leaders mobilize local resources to support schools and ensure that children with disabilities have access to education.

Limited effectiveness

A Lilongwe CBR worker stated that “*despite the center’s efforts not all children with disabilities receive the needed support, often due to high demand limited resources*”.

4.4.3 Impact of inclusive education on children with disabilities

The findings show that the key themes were increased confidence, skill development and family impact. It reveals that through Lilongwe rehabilitation center inclusive education positively influences children's academic performance, social participation and self-esteem. Respondents reported improved communication skills, greater independence and enhanced engagement with peers, and families also became more optimistic about their children's future.

Increased confidence

Learners become more independent, outspoken and socially active when they learn alongside their peers in inclusive classrooms. According to (Lilongwe rehabilitation center, 2020) inclusive education helped children develop self-esteem and independence. A teacher reported that *"I have seen children gain confidence and participate more in class since joining inclusive education"*.

Skill development

Children develop academic, communication and social skills improving their overall performance and participation. Inclusive education at Lilongwe rehabilitation center helped learners acquire academic skills, communication skills and social abilities. According to (World health organisation, 2010) most parents noted that their children have developed significantly in terms of communication and social skills since starting inclusive education.

Family impact

Families become more hopeful and supportive when they see improvements in their children's abilities and behavior's. Parents became more hopeful, supportive and involve. A parent shared that *"inclusive education has given me hope for my child's future and has made me more involved in their education"*.

Improved opportunities

Lilongwe rehabilitation inclusive education opens pathways for higher learning, vocational training and future employment opportunities for children with disabilities. Inclusive education helped students with disabilities access further education or vocational training opening doors for students with disabilities.

Challenges noted

According to (Lilongwe rehabilitation center, 2020) it shows that despite benefits, learners may still face bullying, stress or limited support showing that inclusive education is not without difficulties. Some learners face stress or bullying despite inclusion. A learners stated that *“sometimes I feel stressed and bullied by my peers”*.

4.4.4 Challenges faced by CBR initiatives at Lilongwe rehabilitation center

The findings heighten several barriers faced at Lilongwe rehabilitation center, including funding and materials shortages, negative community attitudes policy gaps and insufficient support for certain disability types. These challenges limit scalability and sustainability of CBR initiatives. Attitudinal barriers remain particularly problematic with some community members still doubting the abilities of learners with disabilities.

Funding and materials shortage

Insufficient financial resources prevent CBR from reaching all children and supplying necessary learning aids. Insufficient budget limits reach of services. Lilongwe rehabilitation center struggles with limited funding which affects our ability to support students with disabilities

Negative attitudes

Community stigma, misconceptions and resistance to inclusion undermine impact of CBR efforts. Some community members still have negative attitudes towards students with disabilities which hinders their right to inclusive education.

Policy or systemic gaps

Lack of strong policies, unclear roles or poor coordination between ministries limits the effectiveness of inclusive education. A policy maker shared that *“we need clear policies and better coordination to support inclusive education”*.

Disability-specific barriers

According to Lilongwe rehabilitation some disabilities such as intellectual or severe disabilities receive less support than physical disabilities due to limited expertise or resources.

Sustainability issues

Community-based rehabilitation often depends on short-term donor funding threatening long-term continuity of support programs. Lilongwe rehabilitation center inclusive programs rely on donors and short-term projects. Most programs sustainability is a concern due to reliance on donor funding (Lilongwe rehabilitation center, 2020).

4.4.5 ways to strengthen CBR programs at Lilongwe rehabilitation center

The findings show that themes such as stronger partnerships, community engagement strategies and staff training need suggest that they strengthen CBR programs at Lilongwe rehabilitation center. These themes require collaboration between schools, government departments, NGOs and community structures. Respondents advocate for more training in disability-specific teaching methods, greater community involvement and clearer inclusive education policies.

Stronger partnership

Improved collaboration between government NGOs schools and communities enhances resource sharing and coordinated support for children. Collaboration between government NGOs and schools are crucial for strengthening CBR inclusive education programs.

Community engagement

Encouraging involvement from local leaders around Lilongwe rehabilitation center, parents and community groups increases acceptance awareness and support for inclusive education. A community leader stated that “*community involvement is key to ensuring that CBR programs are effective and sustainable*”

Staff training needs

CBR workers and teachers need training in areas such as sign language, braille literacy and disability-specific teaching methods to improve service delivery. A teacher shared that “*training in inclusive education methods has improved my ability to support learners with disabilities at Lilongwe rehabilitation center*”.

Policy support

Clear guidelines, stronger funding commitments and inclusive education policies help institutionalize CBR support. According to (World health organisation, 2010) it shows that clear policies and adequate resources are essential for supporting inclusive education.

Future vision (5year projection)

A CBR worker stated that that “*our vision is to have inclusive schools with trained staff and reliable support systems for students with disabilities*”. Stakeholder envision accessible schools, better trained staff and sustainable CBR structures to support learners consistently.

4.5 Chapter summary

This chapter represented the results of the study aimed at assessing the role of community-based rehabilitation in promoting inclusive education for students with disabilities. Findings revealed that CBR plays a significant role in promoting inclusive education for students with disabilities by improving school access, enhancing participation and strengthening collaboration between families’ schools and communities. Results showed that CBR supports early identification of children with disabilities, raises awareness and reduces stigma leading to increased school enrolment. Through provision of rehabilitation services, basic therapy and assistive devices CBR also improves functional abilities and classroom engagement. However, challenges such as limited resources inadequate assistive devices, negative attitudes, poor infrastructure were identified as barriers that hinder the full effectiveness of CBR interventions. Overall, the findings indicated that while CBR significantly contribute to inclusive education, its impact would be greater if existing challenges were addressed.

CHAPTER FIVE

CONCLUSION AND RECCOMENDATIONS

5.1 Introduction

This chapter presents the final conclusions drawn from the study and provides recommendations based on the findings. It summarizes the key insights that emerged from the research and highlights their implications for improving the role of community-based rehabilitation in inclusive education for students with disabilities.

5.2 Summary of research findings

The study found that CBR contributes significantly to inclusive education through community sensitization, promoting positive attitudes, and increasing awareness about disability rights. CBR workers facilitate referrals and linkages between families, schools, and service providers, enabling learners with disabilities to access educational opportunities. Collaboration with teachers and preparation of learners prior to school enrolment were also prominent, demonstrating CBRs important supportive function in the inclusion process. The findings revealed that CBR is reasonably effective in mobilizing and providing assistive devices such as wheelchairs, hearing aids, and learning materials. However, the effectiveness is hindered by persistent resource gaps, including insufficient funding, delays in acquiring materials, and limited availability of specialized equipment. Although community mobilization contributes to resource support, the overall provision remains inadequate to meet the growing needs of learners with disabilities. The study also showed that inclusive education has a generally positive impact on students with disabilities. Learners experience increased confidence, improved social and communication skills, and greater independence. Families reported feeling more hopeful about their children's futures. Inclusion also opened better educational and vocational opportunities for students. Despite these gains, some challenges such as bullying, limited teacher capacity, and occasional emotional stress among learners were noted.

CBR initiatives face multiple barriers that affect their ability to support inclusion effectively. Key challenges include inadequate funding, shortage of learning materials, and negative attitudes within communities. Systemic challenges such as weak policy implementation, poor coordination among education stakeholders, and insufficient disability-specific support were also identified. Sustainability concerns were highlighted due to heavy reliance on donor funding. The findings also indicated need for stronger collaboration between CBR programs, government institutions, schools, NGOs, and community structures. Improved community engagement and capacity building for CBR workers and teachers were identified as essential strategies. Strengthening policy frameworks, securing more stable funding, and increasing training in disability-specific teaching methods were also suggested as key measures to enhance the effectiveness and sustainability of CBR in supporting inclusive education.

5.3 Conclusion

The study concluded that Community-Based Rehabilitation (CBR) plays a crucial and supportive role in advancing inclusive education for students with disabilities through raising awareness, linking families to schools, advocating for enrolment, and helping prepare learners for participation in mainstream classrooms. Inclusive education was shown to greatly benefit students by improving their confidence, social abilities, and academic engagement, as well as strengthening family hope and involvement. However, the impact of CBR is constrained by persistent challenges such as shortages of educational resources, limited funding, negative community attitudes, gaps in policy implementation, and insufficient specialized support for diverse disability needs. The findings highlight that while CBR has strong potential to enhance inclusive education, its success relies heavily on strengthened partnerships, improved training, increased community engagement, and a supportive and adequately funded policy environment.

5.4 Recommendations

Based on the study findings, several recommendations have been developed to assess the role of community-based rehabilitation in promoting inclusive education. The study revealed that although the initiatives have created meaningful change, there are still areas that require strengthening. Therefore, it is recommended that,

CBR initiatives Strengthen Collaboration between CBR Programs and Education Stakeholders. The study recommends stronger partnerships between CBR workers, schools, government ministries, NGOs, and disability organizations. Improved coordination will enhance resource-sharing, streamline referral processes, and ensure more consistent support for learners with disabilities. Joint planning, regular meetings, and integrated service delivery can help address gaps in implementation and improve the quality of inclusive education.

Increase Funding and Provision of Assistive Devices and Learning. Materials adequate funding is necessary for CBR programs to meet the educational needs of learners with disabilities. Government and partners should allocate specific budgets for assistive devices, learning aids, mobility equipment, and classroom materials. Timely procurement and distribution of resources will help eliminate delays and ensure that children receive support when they need it most.

Enhance Capacity Building for CBR Staff and Teachers. Training in disability specific teaching methods including sign language, Braille literacy, use of assistive technology, and classroom adaptations is essential. Capacity building ensures that both CBR workers and teachers are equipped with the skills needed to effectively support diverse learners and manage inclusive classrooms. Continuous professional development should be institutionalized.

Strengthen Community Sensitization and Policy Support for Inclusive Education. To address negative attitudes and misconceptions, more awareness campaigns and community dialogues should be conducted. Educating families and communities on disability rights, inclusion benefits, and the role of CBR will foster acceptance and reduce stigma. Additionally, government institutions should strengthen implementation of inclusive education policies by providing clear guidelines, monitoring systems, and sustainable financial support.

5.5 Areas for further studies

Future research should explore the varied experiences of students with different types of disabilities within inclusive education settings. Such studies could provide a deeper understanding of how learners with physical, sensory, intellectual, or developmental disabilities navigate inclusive classrooms and what forms of support best promote their academic and social development. Additionally, further investigation is needed into the effectiveness of teacher training programs in preparing educators to handle the diverse needs present in inclusive schools.

Understanding teacher readiness and the impact of professional development would help strengthen classroom practices and improve learning outcomes for students with disabilities.

Further studies may also examine the long-term impact of CBR interventions on children's educational progression, skill development, and eventual transition into adulthood or employment. This would provide valuable insights into the sustainability and lasting effects of CBR support. In addition, work is needed to better understand community attitudes toward disability and how cultural beliefs influence enrolment, retention, and support for inclusive education. Investigating these social factors can help design more effective sensitization strategies that strengthen community involvement and acceptance of learners with disabilities.

REFERENCES

- Banda, M., & Mhango, T. (2019). *Inclusive education practices in Malawi: Experiences from Lilongwe Rehabilitation Centre*. *African Journal of Disability*, 8(1), 1-10.
- ILO, UNESCO, & WHO. (2004). *CBR: A strategy for rehabilitation, equalization of opportunities, poverty reduction and social inclusion of people with disabilities*.
- United Nations. (2006). *Convention on the rights of persons with disabilities*.
- United Nations. (2015). *transforming our world: The 2030 agenda for sustainable development*.
- Chavuta, A. (2011). *Community-Based Rehabilitation in Malawi: A strategy for inclusive education and disability rights*. *CBM International Reports*.
- Kasonka, L. (2014). *Enhancing inclusive education through community-based rehabilitation in Zambia*. *Disability and Society Journal*, 29(5), 643-659.
- Lang, R., & Upah, L. (2008). *Scoping study: Disability issues in Nigeria*. *Department for International Development (DFID)*.
- Lynch, P., Gladstone, M., McLinden, M., & Douglas, G. (2014). *Inclusive education for children with visual impairment in developing countries: A review of literature*. *International Journal of Inclusive Education*, 18(4), 343-356.
- Miles, S., Kaplan, I., & Howes, A. (2012). *Learning from differences: An action research guide for capturing the experience of disability and education*. *EENET*.
- Mhango, T., & Chataika, T. (2020). *Inclusive education challenges in Malawi: The case of Lilongwe Rehabilitation Centre*. *Journal of Education and Practice*, 11(12), 75-83.
- Mugo, J. K., Oranga, J., & Singal, N. (2010). *Testing youth transitions in Kenya: Are young people with disabilities falling through the cracks?* *EFA Global Monitoring Report Background Paper*.
- Mwakyeja, M. (2013). *Teaching students with visual impairments in inclusive classrooms: A case study of one secondary school in Tanzania*. *University of Oslo Thesis*.
- Stubbs, S. (2008). *Inclusive education: Where there are few resources*. *Atlas Alliance*.
- UNESCO. (2017). *A guide for ensuring inclusion and equity in education*. *UNESCO*.

World Health Organization. (2010). *Community-based rehabilitation: CBR guidelines*. WHO Press

Deepak, S., Kumar, J., Ortali, F., & Tewari, A. (2011). *CBR Matrix and CBR indicators: Tools for monitoring and evaluation of community-based rehabilitation programs*. *Disability, CBR & Inclusive Development*, 22(1), 71–89.

Kuiper's, P., Wirz, S., & Hartley, S. (2008). *Systematic review of the effectiveness of community-based rehabilitation (CBR) in improving quality of life, access to services and inclusion*. *Disability and Rehabilitation*, 30(1), 33–45.

Lang, R., Murangira, A., & Kett, M. (2011). *Community-based rehabilitation and the health component of the CBR matrix: A case study from Uganda*. *Disability, CBR & Inclusive Development*, 22(1), 103–110

Miles, S., & Signal, N. (2010). *The education for all and inclusive education debate: Conflict, contradiction or opportunity?* *International Journal of Inclusive Education*, 14(1), 1–15.

Shrestha, R. M., Shah, P. K., & Onta, S. R. (2013). *Inclusive education: Perceptions of parents of children with disabilities in rural Nepal*. *Journal of Nepal Health Research Council*, 11(23), 259–263.

UNESCO. (2015). *Education 2030: Incheon declaration and framework for action*. Paris: UNESCO.

World Health Organization (WHO). (2010). *Community-Based Rehabilitation: CBR Guidelines*. Geneva: WHO

Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches (4th ed.)*. Sage Publications


Kaunda, B. (2018). *Disability and inclusion in Malawi: A review of the literature*. *Journal of Disability Research*, 60(3), 249-262.

Krueger, R. A., & Casey, M. A. (2015). *Focus groups: A practical guide for applied research*. SAGE Publications.

Morgan, D. L. (1997). *Focus groups as qualitative research*. SAGE Publications.

APPENDICES

APPENDIX I: LETTER FROM THE SCHOOL AND PERMISSION FROM LILONGWE REHABILITATION CENTER


1/1

(Run by Fathers of DMI, Sisters of DMI and Collaborators)
P.O. Box 500, 2000
Lilongwe, Malawi
Phone: +265992371901, +265981047008
Email: dmi@lilongwe@gmail.com
www.dmi.lilongwe.mw

TO WHOM IT MAY CONCERN

Dear Sir/Madam,

SELLINA MAGANGA REGISTRATION NUMBER 24325252020

This is to certify that the above captioned is a student of DMI ST. John The Baptist University, Lilongwe Campus, Malawi pursuing a 4-year Bachelor of Social Work- PMI:


As part of her studies, she is required to carry out research work on a chosen topic in partial fulfillment of the requirements for the award of a Bachelor's Degree. Her proposed study is entitled:


ASSESSING THE ROLE OF COMMUNITY BASED REHABILITATION IN PROMOTING INCLUSIVE EDUCATION FOR STUDENTS WITH DISABILITIES. A STUDY OF LILONGWE REHABILITATION CENTER.

Any help rendered in the fulfillment of this part of the Degree will be highly appreciated by our institution.

Thanking you in advance for your attention.

Regards,


Head of Social Work Department- Lilongwe Campus


Page 1

APPENDIX II: INTERVIEW GUIDE

Assessing the role of community-based rehabilitation in promoting inclusive education for students with disabilities.

Introduction

My name is Sellina Maganga and I am a student from DMI-St John the Baptist University. I am conducting a study to understand the role of community based-rehabilitation in promoting inclusive education for students with disabilities. The goal is to see how the program is helping students with disabilities and improving their educational outcomes.

Your participation in this interview is voluntary. You can choose not to answer any question, and you can stop the interview at any time without any negative consequences. Everything you say will be kept confidential and your name will not be used in the final report. The interview should take about 15-30 minutes.

Section A: Demographic Information

1. Participant Category:

- CBR Program Staff
- Educator/Teacher
- Parent/Guardian of a student with a disability
- Student/Person with a disability
- Community Leader
- Policy Maker/Government Official

2. Gender: Male ☐ Female ☐ Prefer not to say ☐

3. How long have you been involved with or benefited from the Lilongwe Rehabilitation Center?
(Years/Months)_____

Section B: interview guide

OBJECTIVES 1: Assessing the role of community-based rehabilitation programs in promoting inclusive education initiatives for persons with disabilities at Lilongwe rehabilitation center.

1. Can you describe how the CBR program connects persons with disabilities from the community to the educational services at the Lilongwe Rehabilitation Center?

2. In what ways does the CBR program work to raise awareness and change attitudes within families and the wider community about the importance of education for children with disabilities?

3. How do CBR workers and educators at the center collaborate? Can you give me a specific example of this partnership in action?

4. What specific activities does the CBR program undertake to prepare a child with a disability to enter or reintegrate into an inclusive learning environment?

5. From your perspective, what is the most significant role the CBR program plays in advocating for the educational rights of persons with disabilities?

OBJECTIVE 2: To evaluate the effectiveness of community-based rehabilitation efforts in facilitating access to educational resources at Lilongwe rehabilitation center.

1. Can you tell me about a time when the CBR program successfully helped a student obtain a specific educational resource (e.g., Braille materials, a wheelchair, hearing aids, large-print books)?

2. What are the most common barriers in accessing educational resources, and how does the CBR program try to overcome them?

3. In your experience, when a resource is needed, how effective is the process in terms of timeliness and meeting the actual need of the student?

4. How does the CBR program mobilize local resources or community support to help provide these educational materials or tools?

5. On a scale of efforts, would you describe the CBR's role in providing access to resources as highly effective, moderately effective, or struggling? Please explain your answer with an example.

OBJECTIVE 3: To assess the impact of inclusive education on students with disabilities at Lilongwe rehabilitation center.

1. Can you share a story that illustrates how inclusive education here has impacted a student's learning or development of new skills?

2. What changes have you observed in the confidence, social interactions, or overall happiness of students since they began participating in inclusive education programs?

3. How do you think inclusive education at the center influences the future opportunities (e.g., employment, further training, community participation) for persons with disabilities?

4. For parents/guardians: How has your child's participation in inclusive education affected your family's life and your hopes for your child's future?

5. While focusing on the impact, have you also observed any negative or challenging aspects for students participating in inclusive education here?

OBJECTIVE 4. To identify the challenges that are faced by community-based rehabilitation initiatives in promoting inclusive education at Lilongwe rehabilitation center.

1. What are the biggest resource-related challenges (e.g., funding, staff, transportation, materials) that the CBR program faces in promoting inclusive education?

2. What negative attitudes or misconceptions within the community or families most hinder the CBR's work in promoting inclusive education?

3. Can you describe any systemic challenges, such as policies, coordination with government, or physical infrastructure, that make this work difficult?

4. Are there challenges specific to supporting certain types of disabilities (e.g., visual, intellectual, physical) that are more pronounced?

5. What do you see as the biggest threat to the long-term sustainability of the CBR initiatives in inclusive education at the center?

OBJECTIVE 5: To identify how community-based rehabilitation programs at Lilongwe rehabilitation center can be strengthened to more effectively promote inclusive education for persons with disabilities.

1. If you had the power to improve one thing about the training or skills of the CBR staff, what would it be and why?

2. What new strategies or approaches could be used to better engage the community as partners in supporting inclusive education?

3. What organizations or sectors (e.g., government, private businesses, NGOs) should the center build stronger relationships with, and what would that partnership look like?

4. What specific policy changes, at a local or national level, would most significantly empower the CBR program to do its job better?

5. Imagine the CBR program at Lilongwe is perfectly supporting inclusive education five years from now. What does that look like? What key things have changed from today?
