

# Beyond Enrolment: Understanding Educational Exclusion among Children with Disabilities in Rural India

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## Abstract:

While education is widely recognized as a fundamental right and a crucial tool for social mobility, children with disabilities in rural India continue to encounter significant obstacles in accessing quality education (2024). This study explores all the barriers to inclusive education faced by children with disabilities (CWDs) in rural India, moving beyond the narrow metric of school enrolment. Drawing on a structured survey of 400 parents of CWDs across all talukas of Dharwad district, the research investigates infrastructural gaps, social stigma, inadequacy of rehabilitative services, and parental perceptions of inclusion. Findings reveal that despite high enrolment rates, children continue to face exclusion through inaccessible facilities, undertrained teachers, peer bullying, and lack of support services. The study highlights the urgent need for holistic, policy-aligned implementation to ensure that educational inclusion is both meaningful and equitable.

**Keywords:** Inclusive Education; Children with Disabilities; Educational Exclusion; Rural India; RPWD Act 2016; National Education Policy 2020; Accessibility; Parental Perception.

## 1. Introduction

India has made significant progress in promoting the educational rights of children with disabilities, particularly through the Rights of Persons with Disabilities (RPWD) Act, 2016, and the National Education Policy (NEP) 2020. These frameworks emphasize inclusive education, mandating that children with disabilities be integrated into mainstream schools and receive adequate accommodations. However, enrolment numbers alone do not capture the lived reality of these children in the classroom. Educational exclusion persists in many other forms—through inaccessible infrastructure, inadequate teacher preparedness, and unwelcoming peer environments.

Examining the educational experiences of children with disabilities in rural India reveals a complex interplay of systemic challenges, socio-cultural factors, and economic constraints that contribute to their exclusion from mainstream education (Manomano et al., 2017; Sanjeev & Kumar, 2007).

Despite constitutional guarantees and legislative provisions that advocate for inclusive education, a significant proportion of children with disabilities remain out of school, particularly in rural areas, highlighting a persistent gap between policy and practice (Sharma et al., 2017).

This disparity underscores the urgent need to investigate the multifaceted barriers that hinder their access to quality education and to develop targeted interventions that address the specific needs of this vulnerable

population. Understanding the nuances of educational exclusion in this context necessitates a departure from universal templates of inclusive education, acknowledging the lived realities and indigenous knowledge systems prevalent in rural communities (Kalyanpur, 2020).

This study seeks to move beyond the quantitative measure of enrolment to understand the broader challenges that CWDs and their families face. Focusing on rural Karnataka, where implementation gaps are more pronounced, this research aims to explore the social, infrastructural, and systemic barriers that continue to hinder true educational inclusion.

## 2. Literature Review

Research in both global and Indian contexts has shown that inclusive education is often hindered by structural and attitudinal barriers. Ainscow & Miles (2008) stress that mere presence in school does not equate to participation or learning. Indian studies, including those by Singal (2015) and Das & Kattumuri (2020), highlight disparities in access to learning aids, trained teachers, and peer acceptance. Barriers include physical infrastructure like ramps and toilets, absence of trained educators, lack of individual support plans, and stigma from peers and even school authorities. These challenges are intensified in rural areas, where resources are limited, and awareness is low. This study contributes to existing literature by providing data-driven insights from a rural district and by centering the perspectives of parents—key stakeholders often left out of policy discourse.

Inclusive education, as a concept, aims to ensure that all students, regardless of their abilities or disabilities, learn and participate together in mainstream schools (Panigrahi, 2024).

The marginalization experienced by students with disabilities can lead to the development of inferiority complexes in both the students and their parents or guardians, which underscores the importance of inclusive education initiatives (Sanjeev & Kumar, 2007).

However, the implementation of inclusive education in rural India faces numerous hurdles, including a lack of infrastructure, inadequate teacher training, and pervasive societal attitudes that perpetuate discrimination and stigma (Sharma et al., 2017).

The concept of inclusive education has broadened to encompass all barriers to access and learning, including factors such as migration status, conflict, income, and linguistic status (Shaeffer, 2019).

India has long advocated for inclusive education through various policies, legal enactments, schemes, programs, and plans (Panigrahi, 2024).

The Rights of Persons with Disabilities Act 2016 mandates that students with and without disabilities learn together, with teaching and learning methods adapted to meet diverse needs (2024). However, the effective implementation of these provisions remains a challenge, particularly in rural areas where resources are scarce and awareness is limited.

The National Curriculum Framework for School Education recommended inclusive schools for learners with special educational needs by making appropriate modifications in the content, presentation and transaction strategies, preparing teachers and developing learning friendly evaluation procedures (Sarao, 2016).

## 3. Methodology

The study was conducted in Dharwad district, Karnataka, encompassing all its talukas. A purposive sampling method was used to survey 400 parents of CWDs. The questionnaire covered demographic details, disability types, school enrolment, infrastructural access, teacher support, bullying experiences,

and access to rehabilitative services.

Quantitative data were analysed using descriptive statistics and Chi-square tests to examine associations between variables such as type of school, type of disability, and exclusion indicators.

In addition to the primary survey, relevant secondary data were collected from local NGOs, government records, and Village Rehabilitation Workers (VRWs) to supplement and validate parent-reported experiences.

## **4. Results and Analysis**

### **4.1 Enrolment vs. Disability Type**

Chi-square analysis revealed a mild association between type of disability and school enrolment,  $\chi^2(5, N=400) = 10.36, p = 0.08$ . Children with intellectual or multiple disabilities were more likely to be out of school compared to those with physical or sensory disabilities.

### **4.2 Infrastructure Gaps**

- Only 41% of parents reported that their child's school had an accessible toilet.
- Ramps were available in just 37% of the schools.
- Transportation remained a challenge, especially for children with high support needs.

### **4.3 Teacher Preparedness**

- 74% of parents felt that teachers were not adequately trained to educate CWDs.
- This belief was particularly strong among parents of children with autism, intellectual disabilities, and multiple disabilities.

### **4.4 Social Exclusion**

- 52% of parents reported that their children were teased or sidelined in school.
- Aided schools reported the highest levels of teasing incidents, while private schools reported the least, though the sample size differed.

### **4.5 Service Access**

- Only 18% of children had access to physiotherapy.
- Vision and hearing screening were largely absent.
- Counselling services were almost non-existent in government schools.

### **4.6 Parental Perceptions**

- 98.5% agreed that inclusive education benefits all children.
- However, 31% believed that CWDs distract other students, with this belief being more prevalent among less educated parents.

## **5. Discussion**

This study reveals that while enrolment may be high, it does not ensure inclusion. Schools lack the infrastructure, services, and trained staff necessary to support CWDs. Furthermore, societal attitudes—both from peers and some parents—continue to hinder genuine participation.

The implementation of RPWD and NEP 2020 remains superficial in many rural settings. Teachers are rarely provided with disability-specific training, and budget allocations for rehabilitative services are insufficient. Inclusive education cannot succeed without a systemic change or transformation that includes curriculum adjustments, infrastructural investment, teacher development, and ongoing monitoring.

Some policy and practice recommendations come bring a lot of changes ex. provide in-service teacher training on inclusive pedagogy, mandating accessible infrastructure in all school buildings, offering

physiotherapy, counselling, and academic support and also, introducing community-based disability awareness programs and monitoring policy implementation through decentralized education committees could be game changers for inclusive education.

## 6. Conclusion

The results of this study illustrate a deeply rooted problem: that enrolment in schools alone is an insufficient metric to gauge educational inclusion for children with disabilities (CWDs) in rural India. Each layer of data right from infrastructure to attitudes exposes specific but interconnected barriers that limit not just access, but also full participation.

The mild association between disability type and school enrolment, as shown by the Chi-square analysis ( $\chi^2(5, N=400) = 10.36, p = 0.08$ ), indicates that children with intellectual and multiple disabilities face greater exclusion from schooling. This reflects a broader pattern in India, where these disability groups are often deprioritized due to perceived limitations in their ability to benefit from formal education or due to lack of specialized support. Such exclusion reinforces a cycle of marginalization and dependence.

The data on infrastructural access is particularly alarming. Despite policies mandating accessible environments under the RPWD Act, only 41% of schools had accessible toilets, and just 37% had ramps. The absence of basic physical accommodations undermines the very intent of inclusive education. For children with mobility impairments, this creates physical and psychological barriers, discouraging attendance and participation.

Teacher preparedness emerged as a significant concern, with 74% of parents believing that teachers are not adequately trained to educate CWDs. The lack of pedagogical competence not only hinders learning outcomes but also limits teacher confidence and willingness to engage with diverse learners. This was especially pronounced in cases involving children with autism or intellectual disabilities, where more nuanced, individualized strategies are often required.

Social exclusion remains a major undercurrent, with 52% of parents reporting that their child was teased or sidelined. The variation across school types—with aided schools showing the highest levels of teasing—suggests that inclusive policies are not uniformly implemented or reinforced. The presence of CWDs in school without corresponding awareness and sensitivity programs perpetuates bullying and isolation.

Service access, a cornerstone of inclusive education, was notably poor. Only 18% of children had access to physiotherapy, and critical services like counseling and vision/hearing screening were nearly absent, especially in government schools. These services are not merely add-ons—they are essential for supporting the holistic development and sustained inclusion of CWDs.

Interestingly, while 98.5% of parents supported the idea of inclusive education, 31% simultaneously believed that CWDs distract other students. This contradiction underscores the complexity of societal attitudes—parents may accept the principle of inclusion but harbor subconscious biases about classroom dynamics. This perception was more common among less educated parents, pointing to the need for community-level sensitization and awareness initiatives.

In summary, the study reveals that the presence of CWDs in schools does not equate to their inclusion. Structural gaps, social attitudes, and lack of institutional support continue to exclude children in visible and invisible ways. To build an inclusive system, efforts must move beyond enrollment targets and instead prioritize the lived educational experience of every child.

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