



International Conference: Evidence in Global Disability and Health

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ABSTRACT

Title:	Disability disaggregation of Fiji's Education Management Information System – is the Washington Group/UNICEF children's functioning and disability module fit for purpose?
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Background: Measuring progress toward targets for access to education for children with disabilities requires disability disaggregated education datasets. The process of disaggregation must be practical in places where clinical diagnosis is not available and not too burdensome for over-stretched education systems.

The study aimed to investigate the validity and reliability of the draft *WG/UNICEF Module on Children's Functioning and Disability* to identify children with disabilities at school level in Fiji. The specific objectives were:

1. To determine the inter-rater reliability of the draft WG/UNICEF Module on Children's Functioning and Disability between teachers and parents in Fiji in identifying children with disabilities.
2. To determine the sensitivity and specificity of different cut off values for the draft WG/UNICEF Module on Children's Functioning and Disability in identifying children with disabilities when compared to standard clinical assessments.

Methods: A cross-sectional study was conducted to investigate the diagnostic accuracy of the draft Washington Group/UNICEF Module on Children's Functioning and Disability for identifying disability amongst primary school aged children (5-15 years old). Study participants (n=473) included primary school children with and without disabilities in Fiji, their teachers and parents. Parents and teachers separately completed the WG/UNICEF Module and clinical screening assessments were undertaken as the comparison.

Results: Results for vision, hearing and mobility impairments are presented. The WG/UNICEF response category at least 'some difficulty' as a cut off had good to substantial agreement (kappa values ranging from 0.46 to 0.83) for both parent and teacher responses when compared to clinical assessments on all domains. The sensitivity and specificity values for all domains were high (>70%) for at least 'some difficulty' cut off for both parent and teacher responses. At higher cut off values, i.e. at least 'a lot of difficulty' and 'cannot do at all', teacher responses for seeing difficulty had better agreement with clinical assessment than parents. Parents (k ranging from 0.33 to 0.60) and teachers (k ranging from 0.28 to 0.64) had poor to good agreement with clinical assessments for hearing and walking. However, the sensitivity of these higher cut off values were not acceptable (<60%) for both parents and teachers on all domains, indicating that higher cut off values will miss a large proportion of children with disabilities.

Conclusions: The draft WG/UNICEF Module on children's functioning and disability appears to be a useful tool for teachers to identify children with vision, hearing and mobility impairments in Fiji. The cut off 'some difficulty' should be used to avoid missing large numbers of children with disabilities who are reported by both parents and teachers within this level. However, to avoid over-estimations and potentially misleading categorisation, and to ensure that children with service needs have those met, it is strongly recommended that children having 'some difficulty' and above in any of the three domains receive relevant screening, assessment and services.

Deadline for abstract submission: November 30, 2015

Please submit your abstract to: disabilitycentre@lshtm.ac.uk

Restricted to one first author abstract per participant.

If you have any questions, please write to:

disabilitycentre@lshtm.ac.uk