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**Abstract**

For the past 15 years (2003–2018), Ghana has followed international legal frameworks and taken steps to implement inclusive education. This has triggered research that seeks to assess the effectiveness of its practices by documenting the perspectives and experiences of key stakeholders, including parents, students, teachers and other educators. In light of international interest and the complexities surrounding inclusive practices, this study took stock of the research evidence to appraise the effectiveness of inclusive education practices, identify gaps in the literature and draw attention to areas that policymakers could strengthen to advance those practices. Adopting Ainscow and Miles’s (2009) inclusive education measurement indicators (concept, policy, structure and system, and practice) as a conceptual framework, we reviewed empirical studies that have been conducted on inclusive education in Ghana since the policy was formally incorporated into the education system in 2013. Ten databases, along with manual searches in journals and the reference lists of selected articles, yielded a total of 426 studies, of which 35 satisfied the pre-determined inclusion and quality-assessment criteria. Based on our measurement indicators, we found barriers to inclusive practices at all levels of education. Teachers in particular have not been adequately informed and supported to teach students with disabilities in regular classrooms. The implications of the findings for policymaking and future research are discussed in detail.

**Keywords**:Inclusive education, scoping review,Ghana,stakeholder, policy, practice*s*

**Introduction**

In the past three decades, inclusive education has evolved from being a ‘revolutionary’ educational concept (Ainscow & Miles, 2009) to being widely adopted, with a commitment by many educational systems to provide equal access to education. At the core of inclusive practice is a commitment to social justice that emphasises the need for all students to be educated in schools located within their communities (Ainscow & Sandill, 2010). This emphasis rests on the assumption that inclusive education will afford children with disabilities and their typically developing peers the opportunity to learn together and understand one another (e.g. Ainscow & Sandill, 2010), potentially contributing to the emergence of an inclusive society in which all persons are accepted and tolerated. Because of the complexities of inclusive practices, a clarion call has gone out to schools and policymakers to take deliberate steps to address the needs of all students through education planning and policy reforms (Ainscow, Booth & Dyson, 2006; Teixeira, Correia, Monteiro, Kuok & Forlin, 2018). In their efforts to practice inclusive education, most countries follow the guidelines provided by international conventions and frameworks, such as the forums on Education for All and the Salamanca Conference on Special Needs Education when developing their policies.

Many countries have difficulty translating policy into practice, however, as a number of barriers restrict the participation of children with disabilities in regular schools (e.g. Begum et al., 2018). Even Western countries, such as Australia and Canada, face challenges pertaining to adequate teacher training as well as to access to appropriate teaching and learning materials (e.g. Round, Subban and Sharma 2016), and many developing countries are struggling to promote equitable access to education for children with disabilities (e.g. Okyere, Aldersey, Lysaght, Sulaiman, 2018; Sharma et al., 2013; Sharma et al., 2017). In a review of the literature regarding 13 Asian-Pacific countries, Sharma et al. (2013) found that inclusive education was poorly implemented. In particular, the intended goals outlined in policy documents were found to be unrealistic, unachievable and in conflict with cultural practices. In some cultures, disability is perceived to be a consequence of sin, which makes teachers and society reluctant to support inclusive education (Anthony, 2011; Sharma et al. 2013). However, the international development partners who provided funding, formulated inclusive policies and revised teacher-training curricula appeared to be unaware of local contexts and rarely consulted local communities (Sharma et al. 2017). This has contributed to calls for collaboration between stakeholders, including policymakers, teacher educators, parents and teachers, to develop a contextual response in the reformation of system to promote inclusive education (Sharma et al. 2013).

Ghana’s implementation of inclusive education, which began in selected schools during the 2003/4 academic year, is rooted in a human-rights approach of non-discrimination against any children (Anthony, 2011; Ministry of Education, 2016). Inclusive education was further enhanced by the passage of Disability Act 715 in 2006, followed by the ratification of the CRPD in 2012. Specifically, the CRPD asserts the right of students with disabilities to study in regular classrooms alongside their typically developing peers. It is important to mention here that Ghana operates a dual education structure, with special and regular schools. The special schools are designed to respond to the unique needs of students with hearing, visual and intellectual disabilities (Opoku, 2016). Also, the regular schools have a three-tier structure: after two years of optional preschool education, children are expected to enrol for six years of primary education and then continue to junior high school (JHS) (years 7–9). Primary and JHS are referred to as basic schools. Access to senior high school (SHS) (years 10–12) depends on students’ ability to pass external examinations. After three years of SHS, students can enrol in tertiary institutions, such as colleges of education (which train teachers for primary school and JHS), nursing colleges and universities.

 The intention of Ghana’s government was to extend the implementation of inclusive education to all schools by 2015 (Opoku, Badu et al., 2015), but this could not be achieved due to the lack of a policy to guide practices. As a consequence of this lack, various stakeholders involved in the implementation of inclusive education were unaware of their roles, the needed pedagogical skills and the support services available to guide the implementation of inclusive education (e.g. Mantey 2017). In the same year, the government, in partnership with UNESCO and UNICEF, designed its Inclusive Education Policy (Republic of Ghana, 2015) to provide guidelines to teachers and schools. Although the development of an inclusive policy represents a major milestone in the effort to promote equitable access to education for all, recent studies have reported that children with disabilities remained unable to participate in regular schools (e.g. Mantey, 2017), making special schools their preferred destination to access education (Gregorius, 2016). However, there are few special schools and they are located in urban areas, making it likely that many children with disabilities will not receive any form of education (Opoku, 2016). In light of the potential for educating students with disabilities in schools in their communities (Ainscow & Sandill, 2010), it is essential to take stock of the research on inclusive education practices in Ghana in order to provide a critical perspective that may advance policy reforms and sustainable practices.

**Conceptual Framework**

In this study, we adopted Ainscow and Miles’s (2009) four inclusive education indicators (concept, policy, structure and systems, and practice) as a conceptual framework for examining inclusive practices in Ghana (see Table 1). We operationally defined these themes as follows: (1) *concept* refers to the existence of systems to monitor and encourage access and participation of all students in regular schools. This includes making the curriculum accessible to all students and providing physically accessible and child-friendly facilities; (2) *policy* denotes the codification by regulatory bodies of an inclusive policy document that is known to all stakeholders, including the school leaders who directly disseminate information about the policy to teachers and communities; (3) *structure and systems* refers to the available supports to complement the efforts of classroom teachers, including school resources such as special educators and allied health professionals; (4) *practice* describes the availability of qualified teachers to support the teaching of all students in one classroom. In addition, this indicator prescribes that schools have measures in place to promote the learning of all students and that they make conscious efforts to develop the skills of teachers so that they can adopt effective inclusive teaching practices.

**Method**

In conducting this literature review, we were guided by Oliver, Dickson & Bangpan (2015), who outlined the following seven steps of a review: review initiation, review question, search for studies, description of papers, quality assessment, synthesis and writing the review. Initially, the first author discussed the aim of the research with the co-authors (review initiation). Further refinement of the research question was advanced at fortnightly meetings, and consensus was reached among the team. Next, a search for relevant literature was performed on the following databases: A+ Education, Education Source, ERIC, Google Scholar, Sage, Scopus, Sociological Abstracts and Web of Science. This was followed by a web search of international peer review journals and further reference-page scanning. Five keywords/phrases were developed in consultation with an expert outside the research team: (1) *Ghana*, (2) *inclusive education*, (3) *access to education*, (4) *equal education* and (5) *disability*. The keywords were used in combination on all the databases using the Boolean operator “and”. For instance, phrases 1 and 2 were used on all databases and helped to identify 40% of the papers; 1, 2 and 3 helped to identify 25% of the papers; phrases 1, 2, 3 and 5 produced 20%; and 1, 2, 3, 4 and 5 enabled the identification of 15% of the papers.

To reduce the risk of bias, we employed an iterative literature search, readings of full texts, interrater agreement between authors and the involvement of an expert outside the research team. The literature search was conducted iteratively from December 2016 through December 2018 by the first and second authors and the expert from outside the research team. This search yielded 426 papers, which were then screened against the inclusion criteria. To be included for further analysis, these studies had to be: (a) published in English, with a focus only on Ghanaian samples; (b) published between 2003 (the inception of inclusive education in Ghana) and 2018 (the current year) in international peer-reviewed journals; and (c) empirical studies on inclusive education conducted an any level of regular school. The excluded papers comprised: (a) theses and papers published in other languages; (b) comparative studies and technical or governmental reports; (c) studies conducted in special schools and (d) review or argumentative papers.



Records found through searches on databases (*n=426*)

Additional records identified through

other sources (*n=36*)

Records excluded (*n=343*) because they were:

* Theses (*n=8*)
* Not focused on Ghana (*n=225*)
* Not focused on inclusive education (*n=98*)
* Opinion essays (*n=12*)

Titles and abstracts screened for inclusion in this study

(*n=119*)

|  |
| --- |
| Studies excluded (*n=68*) because they were:* Not relevant to inclusion (*n=36*)
* Focused on special schools (*n=10*)
* Technical reports (*n=2*)
* Policy reviews (*n=5*)
* Documentary review (*n=6*)
* Comparative studies (*n=9*)
 |

Full-text of articles assessed for eligibility (*n=69*)

Eligible studies

(*n=51*)

|  |
| --- |
| (*n=16*) excluded for not meeting the assessment criteria |

Studies satisfying quality assessment

(*n*=*35*)

Figure 3 Flow Chart of Literature Search and Papers Included in this Study

The papers were screened independently by the first and second authors, who subsequently met to discuss and reach consensus on the papers to be included in the study. After excluding papers based on screening of titles (*n=343*), the remaining papers (*n=119*) were further screened via an examination of their abstracts, whereupon an additional 50 papers were excluded using the above inclusion/exclusion criteria. After full-text analyses of the remaining 69 studies, 51 were found to satisfy all the inclusion criteria (see Figure 3).

We then applied an adaptation of Koufogiannakis, Booth and Brettle’s (2006) ‘Readers’ Guide to the Literature on Intervention Addressing the Need for Education and Training’ (ReLIANT) quality-assessment criteria to assess the study design, the educational context in which the study was conducted, the data analysis and study results and the relevance of the study purpose. In regard to the study design, we assessed the suitability of the methods used and the description and quality of the instrument(s) used for data collection. The second criterion was the justification of the study and a detailed description of the educational context (e.g. primary, secondary or tertiary) within which the study was conducted. The third criterion for assessing paper quality was the results of the study, the quality of its analysis and whether it addressed the research questions. The last criterion was the relevance of the study to inclusive practices. Here, attention was paid to how the issues raised in the studies had potential to directly contribute to inclusive practices. The first and second authors discussed the quality assessment and reached consensus on the papers to retain for analysis. Based on these criteria, 16 studies were excluded from the study, with 35 remaining for analysis.

Finally, we established processes to perform thematic analyses of the papers (Braun and Clarke 2006) that satisfied the criteria, adapting Okyere et al.’s (2018) charting strategy to extract the findings of each of the studies. The papers were read several times by the first author, and emerging ideas were noted. After each reading, the first author summarised the study sample, method and key findings in a chart (see Table 2), and all the emerging ideas were manually coded. Next, the findings of each study were sorted and grouped under the measurement indicators (concept, policy, structure and systems, and practice) that were used as *a priori* themes. A summary of these findings is presented in Table 2. The first and second authors then discussed the sorting and agreed on the categorisation of the findings. The first author mapped the similarities and differences between the studies and developed the review’s structure. Drafts were written and shared among the authors for suggestions until a consensus was reached on the final draft.

Table 1

Charting of Studies Based on Measurement Indicators

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Author | Concept | Policy  | Structure and system | Practices  |
| 1. Ackah Jnr & Danso (2018)
 | x |  | x | x |
| 1. Agbenyega & Davis (2015)
 |  |  |  | x |
| 1. Agbenyega & Deku (2011)
 | x |  |  | x |
| 1. Agbenyega & Klinthong (2011)
 | x |  |  | x |
| 1. Agbenyega (2008)
 |  | x | x |  |
| 1. Agbenyega (2007)
 |  |  | x | x |
| 1. Agbenyega (2006)
 |  |  |  | x |
| 1. Alhassan & Abosi (2014)
 |  |  |  | x |
| 1. Amponteng, Opoku, Agyei-Okyere, Afriyie & Tawiah, 2019
 |  | x |  |  |
| 1. Anthony (2011)
 |  | x |  |  |
| 1. Butakor, Ampadu & Suleiman (2018)
 |  |  |  | x |
| 1. Danso, Owusu-Ansah & Alorwu (2012)
 | x |  |  |  |
| 1. Sefa Dei (2005)
 |  | x |  |  |
| 1. Deku & Ackah Jnr (2012)
 |  |  |  | x |
| 1. Gregorius (2016)
 |  |  | x | x |
| 1. Kuyini & Desai (2007)
 |  |  |  | x |
| 1. Kuyini & Desai (2008)
 |  |  |  | x |
| 1. Kuyini, Yeboah, Das, Alhassan & Mangope (2016)
 |  |  |  | x |
| 1. Kuyini, Desai & Sharma (2018)
 |  |  |  | x |
| 1. Mamah, Deku, Darling & Avoke (2011)
 | x |  | x | x |
| 1. Mantey (2017)
 | x | x | x | x |
| 1. Mprah, Dwomoh, Opoku, Owusu & Ampratwum (2016)
 | x | x | x | x |
| 1. Nketsia & Salovita (2013)
 |  |  |  | x |
| 1. Nketsia, Salovita & Gyimah (2016)
 |  |  | x | x |
| 1. Nketsia (2017)
 |  |  |  | x |
| 1. Ntuli & Traore (2013)
 |  | x | x | x |
| 1. Obeng (2012)
 |  | x | x | x |
| 1. Opoku, Badu et al. (2015)
 | x | x | x | x |
| 1. Opoku, Mprah, Owusu, Badu & Torgbenu, (2015)
 |  |  |  |  |
| 1. Opoku, J-F et al (2017)
 | x | x | x | x |
| 1. Opoku, Tawiah, Agyei-Okyere, Osman & Afriyie, (2019)
 | x | x | x | x |
| 1. Singal, Salifu, Iddrisu, Casely-Hayford & Lundebye (2015)
 | x | x | x | x |
| 1. Subbey (2018)
 | x | x |  |  |
| 1. Tudzi, Bugri & Danso (2017)
 | x |  |  |  |
| 1. Vanderpuye, Obosu & Nishimuko (2018)
 |  |  | x | x |

**Study Characteristics**

All the studies included in this review were conducted in public schools. Of the 35 papers, 17 used qualitative methods (interviews, documentary review, photo elicitation, focus-group discussions or observations); 11 used quantitative methods (e.g. a questionnaire), and the remaining seven papers used mixed methods. Many of the studies were focused on early childhood (children less than six years old) and basic schools (years 1–9; n=16), and seven were conducted in tertiary institutions (participants included preservice teachers, lecturers, administrators and university students with disabilities) (see Table 2).

With respect to those from whom the data were collected, six studies involved diverse stakeholders (including parents, teachers, students and other educators), two recruited teachers from SHS, two recruited students with disabilities, and one study each recruited participants from basic schools, secondary schools and parents only. Table 2 presents the details of the 35 papers included in this study.

Table 2

Summary of Studies Included in this Study

|  |  |  |
| --- | --- | --- |
| **Authors**  | **Study design**  | **Participant characteristics**  |
| 1. Ackah-Jnr & Danso (2018)
 | Questionnaire and observation | 164 primary and JHS school teachers  |
| 1. Agbenyega (2006)
 | Questionnaire, observation and interviews | 122 stakeholders (teachers, students and policymakers)  |
| 1. Agbenyega (2007)
 | Questionnaire and interviews | 100 primary and junior secondary school teachers  |
| 1. Agbenyega (2008)
 | Photo elicitation and interviews | 50 junior secondary school students |
| 1. Agbenyega & Deku (2011)
 | Focus group discussion and observation | 21 pre-service teachers (colleges of education)  |
| 1. Agbenyega & Klinthong (2011)
 | Focus group discussion | 21 pre-service teachers (college of education)  |
| 1. Agbenyega & Davis (2015)
 | Observation and interviews | 18 primary school participants (teachers and typical developing peers) |
| 1. Alhassan & Abosi, (2014)
 | Questionnaire and observation | 381 primary school teachers  |
| 1. Amponteng et al. (2019)
 | Questionnaire | 411 parents of children with disabilities and typical developing peers |
| 1. Anthony (2011)
 | Interviews | 30 stakeholders (professionals, family members and community members) |
| 1. Butakor et al., (2018)
 | Questionnaire | 300 teachers from basic and SHS  |
| 1. Danso et al., (2012)
 | Observation | 21 senior secondary school facilities  |
| 1. Sefa Dei (2005)
 | Interviews | 69 participants (university lecturers, tutors and university students) |
| 1. Deku & Ackah Jnr (2012)
 | Questionnaire | 132 primary and junior secondary teachers  |
| 1. Gregorius (2016)
 | Interviews, focus group discussion and observation | 42 in school and out of school students with disabilities  |
| 1. Kuyini & Desai (2007)
 | Questionnaire | 128 primary school teachers and principals  |
| 1. Kuyini & Desai (2008)
 | Questionnaire and observation | 34 primary school teachers  |
| 1. Kuyini et al., (2016)
 | Questionnaire | 163 primary school teachers  |
| 1. Kuyini et al., (2018)
 | Questionnaire | 134 primary school teachers  |
| 1. Mamah et al., (2011)
 | Questionnaire | 110 university lecturers  |
| 1. Mantey (2017)
 | Interviews | 19 primary school stakeholders (parents, children with disabilities, teachers, special educators) |
| 1. Mprah et al. (2016)
 | Interviews | 40 stakeholders (teachers, resource teachers and principals) |
| 1. Nketsia & Salovita (2013)
 | Questionnaire | 200 pre-service teachers (colleges of education) |
| 1. Nketsia et al., (2016)
 | Questionnaire | 125 tutors in (colleges of education) |
| 1. Nketsia (2017)
 | Questionnaire | 501 pre-service teachers (college of education) |
| 1. Ntuli & Traore (2013)
 | Interviews | 10 female early childhood teachers  |
| 1. Obeng (2012)
 | Questionnaire and interviews | 67 early childhood teachers  |
| 1. Opoku, Badu et al. (2015)
 | Interviews | 31 stakeholders (teachers, resource teachers, special educators and principals)  |
| 1. Opoku, Mprah et al. (2016)
 | Interviews | 31 stakeholders (teachers, special educators, resource teachers and principals) |
| 1. Opoku, J-F et al. (2017)
 | Document review and interviews | 60 stakeholders (basic school teachers and principals, resource teachers and special educators) |
| 1. Opoku, Tawiah et al. (2019)
 | Interviews and focus group | 14 secondary school mathematics teachers  |
| 1. Singal et al. (2015)
 | Interviews | 23 young persons with disabilities, parents, community leaders |
| 1. Subbey (2018)
 | Interviews | 15 primary and junior secondary school leaders |
| 1. Tudzi et al. (2017)
 | Questionnaire and interviews | 53 students with disabilities and university administrators  |
| 1. Vanderpuye et al. (2018)
 | Questionnaire | 142 teachers in basic schools  |

*Basic school = year 1 to 9; Junior secondary school = year 7 to 9; Senior secondary school = year 10 – 12****;*** *College of Education = Institutions that train basic school teachers; Category A secondary school = Very resourced schools*

**Thematic Analysis**

**Concept**

Access to school is considered the first step towards achieving the goal of inclusive education. In the Ghanaian context, studies have reported that schools were inaccessible to students with disabilities. Twelve studies (e.g., Ackah-Jnr & Danso, 2018; Danso et al., 2012; Mantey, 2017; Opoku, J-F et al., 2017; Tudzi et al., 2017) reported that access to schools was restricted due to factors such as unfriendly environments and a lack of school facilities. For example, in an observational study, Danso et al. (2012) reported that Category A (well-resourced) secondary schools did not offer ramps to classrooms located in multi-storey buildings. Thus, students with physical and visual disabilities were unable to attend lessons. Moreover, there were communities in which there were no schools for children with disabilities to attend (Singal et al., 2015). Children with disabilities living in rural areas were more likely not to have access to any form of education (Singal et al., 2015). The inability of students with disabilities to reach classrooms is perhaps the first barrier to overcome in attempting to promote their participation in teaching and learning activities.

 Teachers struggled to support students with disabilities who were enrolled in regular schools. Nine studies reported that the curriculum of schools was rigid and did not afford teachers the time or space to include students with disabilities (e.g. Agbenyega and Deku 2011; Agbenyega and Klibthong 2011; Mprah et al., 2016; Opoku, Badu et al., 2015; Opoku, Tawiah et al., 2019). For example, Opoku, Tawiah et al. (2019) explored the preparedness of mathematics teachers in secondary schools to support students with Down syndrome. Many teachers described the presence of students with Down syndrome in regular classrooms as a burden and indicated that spending time with them negatively affected the learning of their typically developing peers. In fact, nine studies found that some teachers held negative attitudes towards children with disabilities and questioned their inclusion in regular schools (e.g. Agbenyega 2007; Mantey 2017; Opoku, Badu et al., 2015). They saw their inclusion as unnecessary and posited that special schools were the ideal places for them to be educated (Mprah et al., 2016; Opoku, Badu et al., 2015). Exacerbating this situation were large class sizes of 50 or more that made it difficult for teachers to individualise their lessons (Agbenyega 2007, 2008; Ntuli and Traore 2013; Opoku, Badu et al., 2015; Opoku, J-F et al. 2017). Because of large class sizes, coupled with demands to complete the syllabus, teachers were unable to make time or to adopt inclusive teaching practices such as individualised teaching.

 Poor planning and inadequate stakeholder engagement have been identified as barriers to the success of inclusive education. Of the six studies that described poor coordination between regulatory bodies, three attributed it to the involvement of multiple funders in the implementation of inclusive education (e.g., Opoku, Badu et al., 2015; Opoku, J-F et al., 2017). In qualitative studies by Opoku, Badu et al. (2015), Opoku, Mprah et al. (2015) and Opoku, J-F et al. (2017), it emerged that while the Ghanaian government was piloting inclusive policy in selected schools in three regions, UNICEF was piloting the policy in all schools in some districts. Similarly, UNESCO selected 60 schools in six districts from two regions to implement the policy. On the ground, however, few schools were accepting students with disabilities. Teachers and special educators were receiving contradictory communications concerning the focus of the practice in their districts. This resulted in inconsistencies in the enactment of inclusive education (Opoku, J-F et al., 2017). Poor collaboration between policymakers may adversely affect practices, as teachers may not know which directive to follow.

 The lack of sufficient preparation for the introduction of the inclusive policy in schools was reported in some studies. Teachers were supposed to both participate in workshops on inclusion and be educated about the resources available to support them. Five studies reported that teachers were not properly engaged or consulted before the policy was introduced in their schools (Agbenyega, 2007; Mprah et al., 2016; Opoku, Badu et al., 2015; Opoku et al., 2016; Subbey 2018). For instance, in a study by Agbenyega (2007), teachers in both inclusive and non-inclusive schools claimed that they had not been informed about the inclusive programme. The teachers felt that they had been compelled to teach students about whom they had no knowledge about their learning needs. In some instances, resource teachers were posted to schools without the knowledge of the teachers teaching in those schools (Agbenyega, 2007; Opoku, Badu et al., 2015; Opoku et al., 2016). Due to limited knowledge and information, the teachers prevented the resource teachers from working with students with disabilities in their classrooms (Opoku, Badu et al., 2015). They saw their presence as disruptive to academic work and did not cooperate with them.

**Policy**

An understanding of the inclusion policy appears to be instrumental in the successful enactment of inclusive education in schools (Teixeira et al., 2018).It is expected that preservice training and professional development will promote awareness of the frameworks underpinning such practices. Although there was a policy document on inclusion in education, the extent of awareness among teachers differed across the studies. While five studies found that teachers had an in-depth understanding of the policy (Obeng 2012; Opoku, Tawiah et al. 2019), seven studies mentioned that the teachers were unaware of its content (Mantey 2017; Mprah et al., 2016; Ntuli & Traore 2013; Subbey 2018). In some of these studies, the classroom teachers were unaware of the policy document, while their principals claimed that they (the principals) were aware of the policy document’s content and very positive towards inclusive education (Mprah et al., 2016; Subbey 2018). Five studies reported that principals were simply told to start accepting all children without receiving training about the policy and the resources available to support teachers (e.g. Mantey 2017; Opoku, Badu et al., 2015; Subbey 2018).

It appears that school leaders, teachers and the government have yet to sensitise parents about the implementation of inclusive education. Limited knowledge among parents about inclusive education was reported in six studies (Amponteng et al., 2019; Mantey 2017; Opoku, Badu et al., 2015). In a study of 411 parents by Amponteng et al. (2019) both the parents of children with disabilities and those of their typically developing peers indicated that they were positive towards inclusion; however, they had limited knowledge about the legal framework underpinning its implementation. Understandably, poor understanding by parents, who are key stakeholders, could adversely affect inclusion. In some instances, the parents claimed that their child with a disability would not be able to learn, and thus they were reluctant to invest financial resources in their education (Opoku, Badu et al., 2015). Parents have often been crucial advocates for inclusive education (De Boer, Pijl and Minnaert, 2010) and could be a useful resource to systems attempting to become more inclusive.

**Structure and Systems**

The importance of appropriate teaching and learning materials to the effective practice of inclusive education has been well explored. However, 21 studies reported the unavailability of teaching and learning materials to facilitate the practice of inclusion (e.g. Mamah et al., 2011; Ntuli & Traore, 2013). In four studies, it emerged that the annual budget allocation to special education was inadequate and that the Special Education Division (the body in charge of disability education) financed only special schools (Opoku, Badu et al., 2015; Opoku, J-F et al., 2017). As public schools are free to all students, schools are unable to generate funds internally to acquire learning materials (Mprah et al., 2016; Opoku, Badu et al., 2015). This difficulty fuelled the perception that special schools were the appropriate place to educate students with disabilities (Gregorius, 2016; Singal et al., 2015).

 Support from allied professionals is vital to the practice of inclusive education (Kuyini et al., 2018). Specifically, their presence in classrooms enables teachers to deliver lessons while they (the support staff) provide individualised attention to students. However, in Ghana, seven studies reported that such support is largely unavailable in schools, a situation that affected teachers’ attitudes and their confidence in practicing inclusion (Ntuli & Traore 2013; Obeng 2012; Opoku, Tawiah et al., 2019). Apart from the resource teachers who were available in selected schools (Kuyini et al., 2018; Opoku, Badu et al., 2015), there were no other professionals available to support teachers (Obeng, 2012). In fact, five studies mentioned that even when resource teachers were attached to regular schools, their services were limited to only a few students and classrooms (e.g. Mprah et al., 2016; Opoku, Badu et al., 2015). In a study of the attitudes and self-efficacy of primary school teachers by Kuyini et al. (2018), the lack of resource teachers to support them in classrooms was high among their concerns. Teachers had to contend with large class sizes and other barriers that restricted their capacity to individualise teaching, and, in some studies, students with disabilities were found to rely on friends to explain concepts to them (Gregorius, 2016; Singal et al., 2015). When students are hostile to their peers with disabilities, the latter may be isolated and not involved in the learning process.

**Practice**

It appears that many schools were unprepared to practice inclusive education. Particularly, six studies reported that schools had yet to develop inclusive policies to guide their practices (e.g. Agbenyega, 2006; Agbenyega & Deku, 2011; Agbenyega & Klibthong, 2011; Mantey, 2017). This seems to have contributed to practices that had negative impacts on inclusion. For example, teachers continued to resort to the use of corporal punishment as a way of enhancing students’ learning and enforcing school rules (Agbenyega & Deku 2011; Mantey, 2017). While students with disabilities and their typically developing peers indicated that corporal punishment was detrimental to their learning experiences, teachers claimed it improved students’ academic performance (Agbenyega, 2006; Agbenyega & Klibthong 2011). Students with disabilities may be afraid to contribute in class because of the threat of punishment. Additionally, some students with disabilities were victims of mockery, labelling and physical and verbal abuse (Mantey, 2017; Opoku, Badu et al., 2015). For example, some teachers used derogatory remarks to refer to students with disabilities because of their poor academic performance or labelled them because of their impairment (Gregorius, 2016; Mprah et al., 2016; Singal et al., 2015).

One major problem that emerged in 26 studies was the teachers’ lack of pedagogical skills to teach in diverse classrooms. Although teachers seemed to accept inclusive education and the need for its implementation (Butakor et al., 2018; Deku & Ackah-Jnr, 2012; Mprah et al., 2016; Ntuli & Traore, 2013; Vanderpuye et al., 2018), they were uncomfortable about teaching students with disabilities (Kuyini et al., 2018; Mprah et al., 2016; Nketsia, 2017; Obeng, 2012). In quantitative studies by Alhassan and Abosi (2014), Kuyini and Desai (2008) and Kuyini et al. (2016), teachers scored low on their own perceived competence to teach students with disabilities. While some studies reported that teachers had no training in inclusive education (Mprah et al., 2016), those who were trained claimed that their training was insufficient (Nketsia, 2017). Indeed, teacher educators confirmed that the pedagogical skills provided to teachers during preservice training was insufficient for them to be able to teach in inclusive classrooms (Nketsia et al., 2016). In addition, teachers had limited opportunities to participate in professional development programmes to enable them to acquire the relevant pedagogical skills (Opoku, Badu et al., 2015; Opoku, Tawiah et al., 2019), and teachers who completed their training before inclusive education was introduced may not have had the opportunity to participate in such training programmes. Inclusive education may be difficult to practice if teacher educators and policymakers are unable to train teachers to acquire the requisite inclusive teaching skills.

 Teachers’ attitudes towards and acceptance of inclusive education varied. It is important to state here that, despite the complexities surrounding inclusive practices, most quantitative studies have focused on teachers’ knowledge of and attitudes towards teaching students with disabilities (e.g. Agbenyega, 2007; Alhassan & Abosi, 2014; Kuyini et al., 2016). Seven studies attempted to identify the teachers’ characteristics that influenced their acceptance of inclusion. For example, in a study assessing teachers’ attitudes, Butakor et al. (2018) reported that male teachers and those with low qualifications were less accepting of inclusion than females and teachers with higher qualifications. Other studies have found that teachers who had training in inclusive education or encountered students with disabilities during their practicum training were more prepared to teach students with disabilities than those without these experiences (Kuyini & Desai, 2008; Kuyini et al., 2018; Nketia & Salovita, 2013). This underscores the fact that distinct variables may affect the extent of acceptance of inclusion among teachers.

**Implications for Policy and Inclusive Education Practices**

In this review, we used Ainscow and Miles’s (2009) inclusive education indicators as an analytical framework for organising and considering the findings of the research on inclusive practice in Ghana. This study has provided a picture of Ghana’s performance in its attempt to practice inclusive education. Across all four indicators, we found formidable barriers to the implementation of inclusive education. At the concept level, we found that schools were generally inaccessible to students with disabilities, with little having been done in terms of adapting school environments and revising schools’ curricula to provide access to all students. Both these elements will impact on children’s access while the latter may partly influence schools’ resistance to admitting students with disabilities (Agbenyega, 2007; Danso et al., 2012; Mprah et al., 2016). The failure to undertake these physical and curricular modifications may reflect a lack of commitment to inclusive education on the part of policy makers or may be reflective of economic or other pressures that the government is facing. Singal et al. (2015) reported that some modifications had been made to schools; however, these were undertaken in both regular *and* special schools, suggesting some ambivalence about inclusion of children with disabilities. This suggests that change in Ghana may be slow or erratic and that external bodies who support an inclusive agenda may need to focus some attention on working with decision makers within the system and developing a culturally appropriate approach to introducing the concepts related to inclusion (Anthony, 2011) rather than pushing for the immediate and widespread adoption of inclusion at the level of the school.

We found limited knowledge about the policies related to inclusion among teachers and parents, the results of which included misunderstandings between classroom and resource teachers. It is unlikely that inclusive education will succeed in an environment in which the architects of learning, such as classroom and resource teachers, do not work together to advance practices. Furthermore, the demand that teachers complete teaching the syllabus interfered with their capacity and willingness to teach students with disabilities (Opoku, Tawiah et al., 2019). It is important to note here that Ghana’s education system is merit based; teachers and schools are assessed based on the performance of their students (Opoku, Tawiah et al., 2019). Moving forward, sensitization programmes could be provided for stakeholders on the basis of Ainscow and colleagues’ (2006) ‘community of practice’ approach, which calls for a collaborative approach to inclusive practices. This would allow stakeholders to discuss the relevance of inclusive education in the Ghanaian context, how the policy will be integrated into Ghana’s education system, the mode of assessment for children with disabilities and a clear definition of the roles of stakeholders.

Furthermore, teaching and learning materials are crucial to the success of inclusive education (Sharma et al., 2017), but, as reported in this study, inclusive practices seemed to have stalled in schools because of the lack of appropriate teaching and learning materials (Agbenyega, 2007; Mantey, 2017; Opoku, Badu et al., 2015). It cannot be doubted that the education of students with disabilities will not succeed in an environment in which limited support is provided to teachers to teach diverse students in one classroom. Therefore, policymakers must engage all stakeholders and agree upon both implementation modalities and the resources that could be provided to schools to foster inclusive practices. An attempt has been made to place resource teachers in schools to support classroom teachers, but it has not been effective due to improper planning and poor communication (Opoku, Badu et al., 2015). It is important to have a thorough discussion about designing guidelines for and clarifying the role of allied health professionals in Ghana’s education system.

Teachers’ skills in teaching diverse students in the one classroom are critical to inclusive practices (Sharma et al., 2013). Both in-service and preservice teachers had reservations about teaching students with disabilities in the studies reviewed here. Those in the field indicated that they had limited knowledge about inclusive education (Mantey 2017; Opoku, Mprah et al., 2015), while those yet to enter the profession claimed that they had acquired insufficient knowledge to teach in inclusive classrooms (Nketsia et al., 2017). This raises questions about the nature of the teacher-training curriculum and how it has been designed to equip teachers with relevant skills for inclusion. This finding calls for deliberations among teacher educators on a suitable curriculum for training teachers. Specifically, it is important for universities and colleges of education to design a curriculum that recognizes local realities (Sharma et al., 2017).

**Recommendations for Future Research**

The following gaps have been identified in the literature, which should be addressed by future studies. Firstly, there is paucity of literature on inclusive practices in private schools, so we recommend that future studies examine the readiness of private schools to practice inclusive education. Private schools are major providers of quality education, and thus it is crucial to understand inclusive practices in that setting. Secondly, few studies have examined the views of students with disabilities and their typically developing peers about inclusive education. Such studies would provide an in-depth understanding of the experience of education in their community schools of children with disabilities and, in addition, could collect information about student perceptions of the relationships between children with disabilities and their school peers. Such research could inform educators about how these relationships and the acceptance of students with disabilities could be improved. We recommend that future studies examine their perceptions about studying together in regular classrooms.

Thirdly, most of the studies included in this review were conducted at the basic levels of education, as few of the included studies were conducted in senior (years 9–12) and tertiary institutions. It is recommended that future studies explore the effectiveness of inclusive practices in these settings. Such studies are acutely relevant in this era, when the UN (2015), in its SDG, has exhorted countries to extend universal access to education from primary schools through secondary schools. These future studies will provide a deeper understanding of the practices of secondary and tertiary institutions and their preparedness to enact inclusive education. Additionally, few studies have explored the attitudes of parents towards inclusive education. We recommend that future studies assess parents’ feelings about educating their children with disabilities in regular schools with typically developing peers.

Furthermore, most studies have concentrated on examining teachers’ attitudes towards teaching students with disabilities. Due to the complexities surrounding inclusive practices (Ainscow & Miles 2009), we recommend that future studies use a theoretical lens to examine inclusive practices among teachers. Moreover, although two distinct types of institution (colleges of education and universities) train teachers in Ghana, studies have yet to explore the readiness of preservice university teachers to support inclusive practices. Available studies have focused only on colleges of education, so it will be necessary to ascertain the perceptions of student teachers in universities in Ghana.

**Study limitations**

This study relied on the results of empirical studies without considering reports or evidence in technical reports, which may contain information that could have strengthened the findings. Also, the use of Koufogiannakis and colleagues’ (2006) ReLIANT strategy may have resulted in the exclusion of studies that contained some useful pointers and extended the matters considered. However, we made the judgement that restricting the review to high quality research is a vital requirement for reviews (Oliver et al., 2015), was more important than including all published research that met the inclusion criteria.

**Conclusion**

This review has shown that, after inclusive education has been practiced in Ghana for 15 years, much remains to be done to sustain inclusive practices. The review shows that, from primary to tertiary education, barriers to the participation of students with disabilities still exist. The barriers identified in this paper may explain the gap between the government’s stated intention to extend inclusive education to all school levels by 2015 and the reality. Persons with disabilities are living under deplorable conditions (Opoku, J-F et al., 2019), and, because access to education in regular classroom has been identified as vital to improving their wellbeing and acceptance (Singal et al., 2015), mechanisms need to be put in place to promote their education in regular schools.

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