

**EXPLORING ACADEMIC EXPERIENCES OF DEAF CHILDREN IN A PRIMARY
SCHOOL IN ZIMBABWE**

By

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Supervisor: Doctor Mukuna Kananga Robert

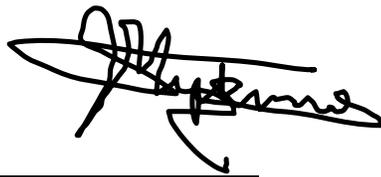
June 2020

Declaration

I declare that *Exploring academic experiences of deaf children in a primary school in Zimbabwe* is my work and that it has not been submitted for any degree or examination in any other university. All sources and quotations cited in this work have been fully acknowledged by the researcher.

Signed 
Maizere James

June 2020


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Dedication

I dedicate this study to my late father, **Zenous Shumba**, who left the inspiration for me to be in love with books.

List of abbreviations and acronyms

ABCD Asset-based Community Development

ACPF African Child Policy Forum

ADHD Attention Deficit Hyperactivity Disorder

AIDS Acquired Immunodeficiency Syndrome

BEAM Basic Education Assistance Module

BEd-Bachelor of Education

BEMGEM Boys empowerment movement, girls' empowerment movement

BSc-Bachelor of Science

BTE Behind-The-Ear

CAR Central African Republic

CBC Competence-Based Curriculum

CE-Certificate in Education

CIET Commission of Inquiry into Education and Training

CODA Children of Deaf Adults

Curr-Curriculum

DipEd-Diploma in Education

DRT District Remedial Tutor

DSI District Schools Inspector

DZT Deaf Zimbabwe Trust

ECD Early Childhood Development

EFA Education for All

Eng-English

EP Educational Psychologist

FGDs Focus Group Discussions

FM Frequency Modulation

HIV Human Immunodeficiency Virus

HIV Human Immunodeficiency Virus

Hons-Honours

ICT Information Communication Technology

IDEA Individuals with Disabilities Education Act

IE-Inclusive Education
IEP Individualised Education Programmes
ITE In-The-Ear
LRE Least Restrictive Environment
MoPSE Ministry of Primary and Secondary Education
MR Mental Retardation
MRC Medical Research Council
NAD National Association of the Deaf
NCLB No Child is Left Behind
NCLB No Child Left Behind
NGOs Non-Governmental Organisations
OVC Orphans and Vulnerable Children
PEP Principal Educational Psychologist
PL Public Law
R/U-Resource Unit
SNE Special Needs Education
SPS Schools Psychological Services
SREOPD Standard Rules on the Equalisation of Opportunities for Person with Disabilities
SRV Social Role Valorisation
UK United Kingdom
UN-CRPD Convention on the Rights of Persons with Disabilities
UNESCO United Nations Educational, Scientific and Cultural Organization
UNICEF United Nations International Children's Emergency Fund
US United States
USA United States of America
WHO World Health Organisation
WMA World Medical Association
ZIMSEC Zimbabwe Schools Examination Council

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ABSTRACT

It is important to consider that deaf children use sign language as their language in all communications although some school staff members could not sign. The study aimed to explore the academic experiences of deaf children at a primary school in Zimbabwe. The Asset-Based Community Development (ABCD) was adopted as the theoretical framework for the study. The study adopted a qualitative approach. The study also adopted the interpretive paradigm. A narrative case study design was used as a master plan for the conduction of the study. The sample was purposively selected to get relevant and rich information on the academic experiences of deaf children at the selected school. The sample comprised three educational psychologists (n=3) in the Harare Metropolitan Province in which the school is located, five deaf children (n=5), two administrators (n=2), twelve teachers (n=12) and one deaf teacher (n=1) all from the selected school. Interview schedules were used as data collection instruments to collect data from school administrators, psychologists, the deaf teacher and deaf children while focus group discussions guides were used to collect data from teachers. Data were presented in narrative form and analysed using Riessman's interactional model. Findings suggested that deaf children were placed in the school by the Schools Psychological Services after psychological and audiological assessments. The mainstream school curriculum was used to teach deaf children. The school offered deaf children academic and psychosocial supports while the government weighed in with financial support and psychosocial supports as well. The Department of Schools Psychological Services also offered deaf children psychosocial supports mainly in the form of guidance and counselling. Deaf children mainly learnt in resource units which were manned by specialist teachers and occasionally attended mainstream classes. Examinations were adjusted to meet the time and language needs of deaf children. The study found that time was only allowed when deaf children needed it while Sign language catered for their language needs. The study found that resources were generally neither accommodative nor adequate for the education of deaf children. The resource units were not accommodative and visual learning aids which were critical in the teaching and learning of deaf children were not available. The study also found that relationships between the deaf and hearing children were sour due to communication challenges between them. The study further found that deaf children participated in exclusive sports but performed all duties and responsibilities performed by the hearing children. It was interesting to find that deaf children learnt cultural norms and values of the mainstream society from primary school. The study found

that there was no policy specific to the education of deaf children or children with disabilities in general. A policy specific to the education of deaf children was recommended. The study also recommended the use of a modified curriculum that fully accommodates the needs of deaf children in primary schools. In light of the scarce teaching and learning resources specific to deaf children, the study recommended the procurement of resources specific to deaf children in their education.

Keywords

Deaf children, Primary school, Specialist teacher, Resource unit, Institution

CHAPTER 1

GENERAL INTRODUCTION

1.1 Introduction and background to the study

In the last decade, the term inclusion has been described in developmental education and psychology as a process which is culturally, politically, medically, philosophically and historically relative in its interpretations of the education of children living with disabilities (Hyde, Ohna & Hjulstadt, 2005). Inclusive Education (IE) focuses on the Principles of Normalisation and Social Role Valorisation as humane services provided to people who are devalued in society (Wolfensberger, 1972; Kumar, Singh, & Thressiakutty, 2015). Singh and Theressiakutty (2015:1) refer to inclusive education “As a consequence of Normalization, disability as a whole, and intellectual disability, in particular, received the attention of the mass and the intelligentsia began advocating normalization ideologies which became very popular across the globe as the right based ideology, which in turn, initiated integration, inclusion, community-based rehabilitation and other non-segregating practices” Therefore, it is out of the Principle of Normalisation that the contemporary world celebrates the rights of persons with disabilities, the acceptance of diversity and deinstitutionalisation commonly known as inclusion. The Principle of Normalisation was first promulgated by Bengt Nirje and developed by Wolf Wolfensberger (1972) and was strictly meant for people with mental retardation in Europe, specifically in the Scandinavian countries (Blakely & Dziadosz, 2015; Kumar & Theresiakutty, 2012). However, the Principle of Normalisation was misconstrued as making people normal (Nirje, 1985; Kumar & Theresiakutty, 2012). Wolf Wolfensberger was concerned about the conditions pitted against children living with mental retardation (MR) in learning institutions and therefore reformulated, redefined and generalised the Principle of Normalisation to improve the living and learning conditions of all people living with disabilities regardless of their family and cultural backgrounds (Wolfensberger, 1972). Wolfensberger, (1972) noted that children living with mental retardation strictly lived and learnt in institutions where they had virtually no access to their families, societies or cultures and eventually, they died there without anyone of their families or cultures knowing, a scenario confirming that they were devalued members in their respective societies. Their families and societies did not care about their welfare or whereabouts. The same scenario obtains in many institutions, even those in Zimbabwe, which were built far from homes and mainstream schools

(Deaf Zimbabwe Trust [(DZT)], 2013). Therefore, the reformulation and redefinition of the Principle of Normalisation was inevitable as it would enable children living with mental retardation in particular, and all other children with disabilities in general, to learn within their cultural contexts, that is, schools in their societies, to expose them to their culture (Education Act [Zimbabwe], 1987; UNESCO, 1994; Blakely & Dziadosz, 2015). The definition of normalisation has been highly controversial even between the pioneers of the principle, Bengt Nirje and Wolfensberger; hence, the services that were offered under the Principle of Normalisation were not really addressing the needs of devalued people in society. Some of the misconceptions of the principle were that normalisation meant that the mentally retarded people would be made normal and that it was strictly a Scandinavian principle that applied only to the Scandinavian children living with mental retardation. Wolfensberger had to reformulate the Principle of Normalisation to the Principle of Social Role Valorisation (SRV), which refers to the application of what can be used to enable, establish, enhance, maintain, and/or defend valued social roles for people (Wolfensberger, 1995a). This principle is wider in scope than the Principle of Normalisation, both in its target population and the services it renders to the target population. Through the Principle of Social Role Valorisation, Wolfensberger urges communities to create or support socially valued roles for community members because if a member holds valued social roles, they are highly likely to receive from the same community those valued things that are available to that community, and that can be conveyed by community or at least by the opportunities for obtaining these esteemed goods or services. Wolfensberger notes that all sorts of valued things that other people can convey are almost automatically apt to be accorded to an individual who performs valued societal roles, at least within the resources and norms of their society. By implication, therefore, when deaf children were educated in mainstream schools, they were likely to receive the valued services or goods that were available to the mainstream schools. They would not be discriminated and excluded during the distribution of resources that were available to the mainstream schools. Regarding the Principle of Inclusive Education, all children should attend their nearest regular schools to afford them the opportunity to learn within their cultural contexts where teachers could impart the cultural values of the society to deaf children in the mainstream schools and this helps them to be as culturally normative as their hearing peers and the society at large (Education Act, 1987; UNESCO, 1994; Wolfensberger, 2019). The UNESCO, (1994) further emphasised the view that teaching and learning should be related to learners' socio-cultural experiences both to motivate

them and address their learning needs. Education should be directed towards the intellectual, social and cultural development of children and community development (*ibid*). Thus, children must learn in their cultural context for them to contribute towards the development of their community. It is against this background that community development owes a great deal to community members, particularly those who are educated within the precincts of their cultural environment (Kretzmann & McKnight, 1993). It is critical to note that culture is relative to places; thus, if devalued people or unrecognised assets were educated in institutions, a critical question may be posed as to whose culture was used in their education. Actually, a foreign culture had been taught to them. However, the patterns and conditions of the lives of children living with mental retardation should be influenced by their culture and sometimes the Principle of Normalisation should not necessarily resemble those of the American or European countries (Wolfensberger, 1972; Kretzmann & McKnight, 1993).

The thrust of inclusive education is to catch up with current trends in education and it should be implemented at school, national and regional levels (UNESCO, 1994). Margaret Spellings, the United States (US) Secretary for Education, in the US Department of Education, (2007) states that as barriers to inclusive education continue, the United States continues to seek to learn more about other nations' cultures, foster the sharing of policy and best practices to make them (United States) more effective in the education of children with disabilities. The sharing of best practices through research may influence the sound education of deaf children in regular schools. Research on the education of deaf children is, therefore, a critical element. The UNESCO, (1994) states that best practices may lead to improvements in the teaching and learning of children with disabilities while the findings of the current research on the education of children with disabilities may improve the existing practices in the teaching and learning of such children. However, Kaputa and Charema (2017) claim that lack of research on inclusive education makes it difficult to successfully implement this initiative. Sibanda, (2018) concurs, pointing out that there is a paucity of research on the education of children with disabilities in mainstream schools, especially in underdeveloped countries such as Zimbabwe.

In line with international policy pronouncements, the Zimbabwean Government, being a signatory to such international protocols, crafted the Education Act of 1987. This Education Act stipulates that every child has the right to formal education. The Act stipulates that no child should be refused admission to any school; neither should they be discriminated against through the imposition of

onerous terms and conditions regulating the admission of children to any school on the basis of race, tribe, place of origin, national or ethnic origin, political opinions, colour, creed or gender. Apart from the Education Act, (1987), the Constitution of Zimbabwe Amendment Act No. 20 of 2013, provides that every child has the right to basic State-funded education which the State must progressively make available and accessible. Section 83 of the Constitution of Zimbabwe [Amendment No. 20] Act, (2013) stipulates that the government is responsible for the provision of special facilities and where necessary, State-funded education and training for the education of children with disabilities. In light of this constitutional and policy thrust, the study explores the academic experiences of deaf children in terms of educational provisions as required by the Zimbabwean law and international policy frameworks. While these provisions are in place, the inclusion of deaf children does not seem to be in sync with these legal provisions (UNESCO, 1994) as evidenced by the insignificant number of deaf children passing their terminal examinations or progressing to high school as found by studies conducted by Antia et al., (2009) and the DZT, (2013). Their academic experiences are determined by how their peers and academic and non-academic staff perceive their hearing impairment (Oppong & Fobi, 2018). However, Antia et al., (2009) opine that deaf children in mainstream academic settings outperform their counterparts in self-contained classrooms, justifying the rationale for advocating the adoption of inclusive education. This suggests that the bulk of the challenges experienced by deaf children regarding inclusive education manifest within the primary education system. This study, therefore, explores the experiences of deaf children in a selected primary school in Zimbabwe to proffer knowledge that would improve their academic experiences.

1.2 Statement of the problem

The Principle of Normalisation basically relates to transacting humane services for the mentally retarded children (Nirje, 1969; Wolf Wolfensberger, 1972). Wolfensberger (1972) was concerned about the academic life and conditions of the children with mental retardation who learnt in institutions divorced from their culture and died there without any of their family members knowing about their fate. Evidence from local and international national literature shows that parents are not involved in their children's social, financial and academic welfare in learning institutions (DZT, 2013). Wolfensberger (1972) assessed the services being offered to the mentally retarded children and went a step further to include all the other children who were too devalued

to access humane services in their community. The Social Role Valorisation advocates that all the services being accessed by valued members of the community be availed also to the devalued members of the same community including deaf children. The Social Role Valorisation assumes that deaf children learning in mainstream schools in their communities access the same culture as their hearing peers and hence they are naturally entitled to valued services as their hearing peers in the same community. Indeed, as the researcher was an educator moving around schools, he realised that indeed there are deaf children learning in mainstream schools. With this background to the education of the deaf, the researcher developed an interest in understanding how deaf children accessed their education in regular schools. The researcher observed that some deaf children had hearing aids while others did not. The social relationships were not quite predictable and the researcher established them as he visited these schools for some other businesses for specified and short periods. Many unclear issues regarding the education of deaf children in regular schools cropped up in the mind of the researcher particularly the manner in which deaf children are being educated in a school together with hearing children, how they are communicating with the hearing children and teachers, and whether or not they do have the same curriculum as hearing children. Generally, these issues mainly bordered on the academic challenges deaf children could have been experiencing in regular schools. These issues also focused on the psychosocial challenges that influenced the academic achievement of deaf children in primary schools. More critical are the availability of resources for the education of deaf children as well as their successes and challenges in their academic pursuits in the schools. A study conducted by Antia, et al., (2009); Musengi, et al., (2012) found that deaf children were not performing well in their norm-referenced tests while their hearing counterparts were doing well. Similarly, a study conducted by the DZT, (2013) found that, unlike the hearing children, deaf children were not performing well and were not passing their grade seven terminal examinations. Generally, the researcher observed that deaf children in the mainstream schools were not socially attached to their hearing peers and teachers. Virtually, there were two schools in one location, with children from School A not mixing with those from School B. According to Westerberg, Skowronski, Stewart, Stewart, Bernauer and Mudarikwa, (2005) Zimbabwe has over five thousand five hundred and twenty-eight school children with significant hearing loss. The district had twenty-five deaf children all of whom were enrolled by the school (Pe.Com). At the time of data collection, nine of the deaf children who were enrolled by the school had just completed their grade seven examinations. The researcher became

interested in exploring the psychological experiences of deaf children in primary schools in order to determine the impact of these experiences on these learners' academic achievement, the curriculum, the learning environment, teaching and learning resources, and infrastructure. The literature on the education of deaf children in primary schools reveals that deaf children experience various challenges that include, but not limited to, academic, psychosocial, financial challenges and shortage of human and material resources (UNESCO, 1994; Musengi & Chireshe, 2012; Tshifura, 2012; Batten, Oakes & Alexander, 2013; Kaputa & Charema, 2017; Ntinda et al., 2019). The experiences of the researcher and the reviewed literature prompted the researcher's desire to contribute towards the experiences of deaf children in primary schools through eliciting for their perceptions in order to improve their education. The experiences of the researcher and the reviewed literature have also shown that indeed deaf children learn in mainstream schools. An understanding of their experiences in these mainstream settings therefore determines the successful implementation of learning programmes meant for deaf children. The background to this study has also shown that deaf learners are not performing quite well academically, which could be a result of the adverse psychosocial and academic problems they are experiencing in the mainstream schools. The background has also shown scant research on the education of deaf children in primary schools, which could mean that the experiences of deaf children are not sufficiently documented (Kaputa & Charema, 2017; Sibanda, 2018). A few studies conducted on the experiences of deaf children focused on the elementary levels (Mantey, 2011; Oponng & Fobi, 2016; Oponng, Fobi, & Fobi, 2016). The literature also indicates that deaf children in inclusive primary schools performed better than their peers in exclusive or self-contained academic settings (Antia, Jones, Reed, & Kreimeyer, 2009; Marschark, Shaver, Nagle & Newman, 2015). The literature also attests to the fact that deaf children performed below their hearing counterparts if Sign Language was not used in their teaching and learning activities (Musengi, Ndofirepi & Shumba, 2012; DZT, 2013; Hrastinski & Wilbur, 2016; Dostal, Gabriel & Weir, 2017; Alasim, 2018). These scenarios illustrate that the experiences of deaf learners are unknown because of lack of documentation and that these learners experience various challenges that adversely influence their education.

Therefore, the study seeks to explore the academic experiences of deaf children in a primary school in Zimbabwe.

1.3 Research questions

1.3.1 The main research question

What are the academic experiences of deaf children in a primary school in Zimbabwe?

1.3.2 Sub research questions

1. What are the academic experiences of deaf children in primary schools concerning resources?
2. What academic support services are available for deaf children in primary schools?
3. What are the psycho-social experiences of deaf children in primary schools?
4. What challenges are experienced in offering psycho-social support services to deaf children in primary schools?

1.4 Aim and objectives of the study

1.4.1 Aim

To explore the academic experiences of deaf children in a primary school in Zimbabwe

1.4.2 Objectives

1. To establish the academic experiences of deaf children in primary schools concerning resources;
2. To establish academic support services that are available for deaf children in primary schools;
3. To determine the psycho-social experiences of deaf children in primary schools;
4. To explore the challenges that are experienced in offering psycho-social support services to deaf children in primary schools.

1.5 Significance of the study

The study is significant to the education sectors for several reasons. First, the establishment and documentation of the experiences of deaf children can help school administrators and teacher to improve the quality of education for deaf children in primary schools. Educational administrators may improve on the procurement of resources meant for deaf children in their schools following

the findings on material resources. Educational administrators may increase their budgetary allocations as well as lobby for more financial support from the Ministry of Primary and Secondary Education for the education of deaf children in primary schools. The administrators may also adjust and re-capacitate their Sign Language programmes following the realisation that hearing people need more time to learn the Sign Language. Teachers may have an insight of the academic experiences of deaf children and develop strategies to improve these academic experiences. Furthermore, teachers may ensure that deaf children participate in inclusive social activities like drama or inclusive sports as the findings suggest that deaf children are good at these activities. Generally, school administrators and teachers may be stimulated to adopt all-inclusive strategies that promote inclusive tendencies that benefit deaf children in primary schools. The study findings on attitudes towards deaf children may influence the school administrators, teachers, hearing children, educational administrators and the government to develop positive attitudes towards deaf children and advocate for their inclusion in primary schools. Such positive attitudes could manifest through availing funds to support the education of deaf children, particularly the procurement of resources specific to the education of deaf children and the fostering of effective communication. School administrators and teachers can work towards the improvement and maintenance of the positive experiences of the deaf children at school, for instance, participating in Paralympic and inclusive games and sports. Steps that the successfully handle the experiences of deaf children may be maintained. Teachers' realisation of deaf children's academic experiences, like the exclusive curriculum and lack of resources, helps them manoeuvre the challenges facing deaf children. Knowledge drawn from this study will capacitate teachers to implement strategies that deal with the challenges of lack of teaching and learning resources.

The study appeals to psychologists, drawing their attention to the psychosocial experiences of deaf children and this improves the psychosocial support services rendered to these children. An improvement in the psychosocial support services offered by the psychologists improves the social and academic inclusion of deaf children. The findings of the study may influence policymakers to craft policies that regulate the education of deaf children and that can help in curtailing the adverse experiences of deaf children in primary schools. Such policies could focus on the curriculum, mainly the language of instruction, subject-time allocation, inclusive class sizes and resources for the education of deaf children. It is hoped that the study findings could also influence curriculum designers in teacher education to include content relevant to deaf children and influence the

deployment of specialist teachers for deaf children to relevant schools; hence, the teacher education curriculum could be modelled around the findings of the study. The study could further influence the employment of teachers specialised to teach deaf children. Such teachers should be specialised in Deaf Studies and Sign Language to mitigate communication challenges between deaf children and the hearing people or qualified deaf teachers.

1.6 Overview of the research methodology

1.6.1 Approach

This study adopted a qualitative research approach. According to Rakotsoane (2012), the qualitative approach entails an in-depth understanding of human behaviours and the underlying motives behind such behaviours. Qualitative researchers conduct their researches in natural settings and interpret phenomena in terms of the meanings brought to them by the participants basing on the assumption that social realities are constructed by the participants (*ibid*). In qualitative research, data are generated within the contexts of the participants and the subjectivity of data is recognised and incorporated in the analysis rather than being viewed as a bias (Young & Hren, 2017). The qualitative approach is concerned with the quality of the collected data and the quality of the responses to these data. Rakotsoane (2012) further posits that in a qualitative approach, data collection mainly hinges on the participation of the respondents in their natural setting. The approach allows the researcher to interview the participants in order to understand the social and cultural contexts underpinning their lives and behaviours, a phenomenon that is not possible if data are quantified (Rakotsoane, 2012).

1.6.2 Paradigm

This study adopted the interpretive paradigm. Interpretivism refers to the meaningfulness of people's character and participation in both social and cultural lives (Elster, 2007, cited in Chowdhury, 2014). Kothari and Garg (2014) concur, positing that it is only through the subjective interpretation of social reality and intervention in reality, can that reality be fully understood. The study of phenomena in their natural settings, which may invite many interpretations of reality, is central in the interpretive paradigm (*ibid*). Thus, the interpretivist paradigm is the ideal paradigm for the interpretation of social realities in this qualitative study, as it enables the researcher to

engage teachers, psychologists, school administrators and deaf children through interviews and focus group discussions.

1.6.3 Research design

A research design is a master plan stipulating the laying out of research methods, data collection and data analysis procedures. According to Kothari and Garg (2014), a research design is a conceptual structure along which the study is conducted particularly how data are collected and analysed. This study adopted a narrative case study design. Simons (2009), in Starman (2013:21), avers that a “Case study is an in-depth exploration from an institution in a ‘real life.’” As such, a case study should be viewed as a design that incorporates several research methods (*ibid*). According to Laurel (2014), a good case study should be in the narrative form. The proponents of the narrative research design, Connelly and Clandinin (1990), argue that a narrative case study research design allows researchers to describe the lives of participants, collect stories told by participants about their lives and write stories detailing the experiences of these participants. The narrative case study research design captures and investigates the experiences as human beings live them in time, space and in person and relationships (Clandinin & Connelly, 2000). The design is concerned with understanding and inquiring into lived experiences through collaboration between the researcher and the participants over time, in a place and through social interaction with their milieu (Clandinin & Connelly, 2000). The voices of the participants should be heard by stakeholders for there to be improvement in services (Oppong & Fobi, 2018). The narrative research design makes participants feel that sharing their stories is important and that their stories are heard as they are shared (Connelly & Clandinin, 1990).

1.6.4 Population

Best and Kahn (2006) define a population as a group of individuals with one or more common characteristics the researcher is interested in. Thus, population is a group of elements constituting the characteristics that are desirable to the researcher for the study to be possible. In this study, the study population comprises all the educational administrators at regular schools serving deaf children in Zimbabwe, all teachers at regular schools teaching deaf children in Zimbabwe, all deaf children in Zimbabwean primary schools and all practising educational psychologists in Zimbabwe.

1.6.5 Sample

A study sample is a smaller size of the study population selected from a larger population for purposes of gathering data and the generalisation of findings (Kothari & Garg, 2016). The researcher used the purposeful sampling technique. According to Rakotsoane (2012), purposeful sampling entails the selection of particular participants that are informative or representative of the topic under investigation. This ensured the gathering of relevant data from the participants.

1.6.5.1 Sampling procedure

The participants for this study were purposefully sampled for their relevance in managing inclusive educational issues, procuring resources for inclusive education and for implementing educational policies both at national and school levels, thereby being rich in terms of deaf children's academic experiences. Twelve teachers (n=12) from a selected school were chosen and sub-divided into two (2) focus groups of six (6) teachers each. These participants were sampled for their participation in the teaching of deaf children; hence, they were possibly conversant with the academic experiences of deaf children in schools. Teachers were sampled basing on the gender representation (6 females and 6 males). Another set of participants comprised five (n=5) deaf children sampled from the selected school to express their experiences of inclusive education. Two male and three female deaf children were chosen to get a representative share of experiences in terms of gender. The sample also comprised two (n=2) school administrators. These were selected for their administrative role in the mainstream education in general and the education of the deaf children in particular. The final set of participants comprised three (n=3) psychologists who were working around the Harare Metropolitan Province in which the selected school is located and they were sampled to cover information related to the psycho-social experiences of deaf children at schools. All the participants were living at their respective homes, with learners living with their biological parents, in the High/Glen District in which the school is located. All the participants had a common Shona home background.

1.6.6 Data analysis

In-depth interviews were used to solicit for data from deaf children, school administrators and psychologists, while focus group discussions were used to collect data from teachers. Collected

data were presented and analysed in the narrative form. The narrative analysis involves the capturing and investigation of human experiences as they live them in time, space, and in person and relationships (Clandinin & Connelly, 2000). People are naturally story-telling organisms who narrate the way they experience the world around them (Connelly & Clandinin, 1990). This renders this approach relevant for this study. This study adopted Riessman's interactional model of narrative analysis, which focuses on the dialogical exchange between the participant and the researcher, thereby co-constructing the meanings of the narrations (Riessman, 2005). The interactional narrative analysis was relevant to this study since the researcher interacted with participants as they narrated their lived experiences, co-constructing meanings through these interactions. Quality assurance was guaranteed through trustworthiness bordering on criteria such as credibility, transferability, dependability and confirmability (Shenton, 2004; Nowell, Norris, White, & Moules, 2017).

1.6.7 Ethical considerations

Firstly, the researcher got an ethical clearance from the University of the Free State to collect data. The researcher then got the permission from the Ministry of Primary and Secondary Education to access the selected school in Zimbabwe. The researcher also had to solicit for informed consent by informing the participants about the purpose of the study and their role in participating in the study so that they would participate out of their own volition. The researcher also informed the parents of deaf children about the purpose of the research and sought their consent since the deaf children were below eighteen years, the legal age of majority in Zimbabwe (The Constitution of Zimbabwe, Amendment Act No.20, 2013). The researcher assured the respondents of confidentiality and anonymity and indicated that their views were going to be used strictly for this study.

1.7 Assumptions

In respect of this study, the researcher assumed that;

- There were deaf children in primary schools in Zimbabwe;
- Deaf children had positive and adverse academic experiences in primary schools;
- Deaf children had positive and adverse psychosocial experiences in primary schools;

- Psychosocial experiences influenced the academic welfare of deaf children;
- There was legislation governing the education of deaf children in primary schools;
- Participants were going to be co-operative and participate actively during the data collection process.

1.7 Definition of key terms

(i) **Academic experiences:** These are issues that learners go through as they are being enrolled in schools (Mindrup, 2012). Deaf children's academic experiences refer to patterns of enrolment, curriculum design, attendance to the curriculum during teaching and learning and their daily activities in the school (*ibid*). According to Oppong Fobi and Acheampong (2018), academic experiences refer to the teaching and learning processes that deaf children undergo in a school through access to information, assimilation of the concepts taught and assessment criteria. In this study, academic experiences refer to what the deaf children undergo in terms enrolment, teaching and learning, day-to-day educational interactions and activities as sanctioned by the curriculum being offered in primary schools, be it inside or outside the classrooms.

(ii) **Deaf children:** According to the National Association of the Deaf (NAD) (2020), 'deaf' in lowercase refers to the audiological condition of not hearing; while 'Deaf' with uppercase refers to a particular group of deaf people sharing a language and a culture. According to the World Health Organisation (WHO) (2020), deaf people mostly have very little or no hearing at all. Oppong Fobi and Acheampong (2018) define deaf children as individuals who, in addition to failure to perceive auditory sounds naturally via their auditory mechanisms, function by choice as members of the community of a minority group that follows their cultural norms, values, and traditions. In this study, deaf children are learners who cannot access auditory perceptions and belong to the cultural minority group that uses Sign Language in their day-to-day communication.

(iii) **Inclusive Education:** This term refers to the process whereby schools provide for the personal, social and learning needs of all learners in the schools or classrooms (United Nations Educational, Scientific and Cultural Organization [(UNESCO)], (2002). Inclusive education involves the reduction of all types of barriers to learning and the development of ordinary schools to meet the needs of all learners and rid the education system of restrictive environments (UNESCO, 2002). According to UNESCO (1994), inclusive education principally calls for schools

to accommodate all learners irrespective of their social, intellectual, and physical differences, in terms of disability and linguistic or any other difference. According to the European Agency for Special Needs and Inclusive Education (2016), inclusive education occurs when regular schools accommodate all learners regardless of the differences in their physical, intellectual, sensory, emotional or other special needs in the school or classroom, without discriminating, stereotyping, marginalising, alienating, humiliating, teasing, or excluding any of them. It is a process that addresses and responds to the diverse needs of all learners through increasing participation and reducing exclusion within educational circles (UNESCO, 1994). Inclusive education involves changing and modifying the curricular content, approaches, structure and strategies to respond to the needs of a heterogeneous group (Hankebo, 2018). Contextually, the term means unconditionally accepting deaf learners in the schools and the classroom and adjusting their classroom, curriculum and learning material so that they are accommodative and cognisant of their academic and social needs.

(iv) Material resources: According to Obomanu and Akporehwe (2010), material resources are items or structures that facilitate the teaching and learning of children and these are infrastructural facilities such as classroom blocks, workshops, storerooms, staff offices, libraries, library resources and the curriculum. According to Educate a Child (2020), material resources encompass blackboards, interactive boards, chalk, textbooks, computers, student workbooks, and a wide range of supplementary learning aids which necessitate the delivery of quality education at primary level. According to Study.com (2020), material resources are items found in nature, serving practical human purposes considered valuable to humanity. In this study, material resources refer to the facilities that make the teaching and learning of deaf children possible and these include resource units, textbooks, visual learning aids, amplification devices, the curriculum and libraries.

(v) Human resources: Human resources, also referred to as human capital, encompass the workforce of an organisation, industry, the business sector, or the economy (Wikipedia, 2020). According to Obomanu and Akporehwe (2010), human resources contextually refer to teaching and non-teaching staff who are involved in the teaching and learning of children. According to Igberadja (2016), human resources refer to the personnel that perform the required duties as delegated by an institution. According to Educate a Child (2020), human resources are personnel that include planners, administrators, teachers, mentors, managers and support staff;

with teachers being regarded as one of the critical aspects of human resources. In this study, human resources refer to the employees who facilitate the education of deaf children; such personnel include educational psychologists, audiologists, speech therapists, physiotherapists, teachers and administrators.

(vi) Financial resources: Round and Gunson (2017) define financial resources as the funds that are availed to aid the learner's access to education. The European Agency for Special Needs and Inclusive Education (2016) defines financial resources as the funds that are allocated towards the education of children. Financial resources refer to the money for specific reasons like business of academic purposes (Random House, 2001) According to Market Business News (2020), financial resources are any type of money or aid that a person, organisation or government has. Financial assistance may be in the form of guarantees, loans, cost-sharing arrangements, subsidies, or welfare payments. In this study, financial resources mean the money that is made available for the education of deaf children, catering for their school fees or the procurement of their educational needs.

(vii) Academic successes: Cachia, Lynam and Stock (2018) define academic success as the attainment of academic outcomes or any other academic assessments as stipulated by summative assessments. York, Gibson, and Rankin (2015) define academic success as educational achievement, engagement in educationally purposeful activities, educational satisfaction, and the acquisition of desired knowledge, skills, competencies or the attainment of educational outcomes. York and Gibson III (2015) define academic success as inclusive of academic achievement, attainment of learning objectives, acquisition of desired skills and competencies, satisfaction, persistence, and post-college performance. Choi (2005), in York and Gibson III (2015), defines academic successes as the successful completion of an educational course by learners. In this study, academic successes refer to the achievement of academic goals in the school and beyond school life.

(viii) Psychosocial support: According to Mattingly (2017), psychosocial support encompasses preventative programmes that promote resilience and the development of coping strategies in dealing with psychological and social disorders like stress in children. The Department of Health (South Africa) (2016) defines psychosocial support as the on-going care and support of children

to meet their age-appropriate and identified emotional, spiritual, cognitive, social and physical needs, through interactions with their surroundings and care-givers. In this study, psychosocial support refers to the assistance given to the deaf children to ease their psychological and social disorders for them to cope with their social and academic needs.

(ix) Legislation and policy support: According to the Encyclopaedia Britannica (2020), legislation and policy are ordinances, rules and regulations of administrative agencies promulgated in the exercise of delegated legislative functions. According to Legislation and good Governance (2012), policy is a process by which government uses a regulatory instrument to guide the implementation of an activity. The Legislation and good Governance (2018) defines legislation as a law that aligns business with constitutional principles of legality, effectiveness and intelligibility and constitutes the basis of government activities. Legislation enables the implementation of the rule of law and fosters compliance with the country's constitution (*ibid*). Legislation and good Governance (2018) further defines legislation as a regulatory instrument that facilitates the achievement of desired regulatory results, thereby ensuring that members are capacitated to deliver the intended regulatory objectives. In the context of this study, legislation and policy refer to the laws, rules, regulations and guiding principles that determine how the education of deaf children should be implemented as promulgated by the Zimbabwean government through the Ministry of Primary and Secondary Education.

(x) Academic support: This refers to school-based programmes and services that enhance the teaching and learning activities, assisting learners to improve the quality of their academic outcomes and experiences which are inclusive of individual instruction or extra instruction (The Learning Support Centres in Higher Education, 2001). According to Peterson, O'Connor and Strawhun (2014), academic support initiatives are programmes and strategies implemented by schools to increase learners' academic achievements, particularly students who may be at risk of experiencing diminished academic achievements. According to the Glossary of Education Reform (2013), academic support refers to a variety of instructional methods, strategies and educational services or school materials that are availed to the learners to accelerate their learning so that they catch up with their peers and achieve the targeted learning standards or academic outcomes. In this study, academic support refers to programmes and services that are designed for deaf children to help them learn in the least restrictive environment (LRE).

(xi) Financial support: According to the Random House, (2001) financial support refers to the provision of monetary resources for the running of a project or business. Round and Gunson (2017) define financial support as the money paid for the education of a learner including the procurement of his/her academic needs. The European Agency for Special Needs and Inclusive Education (2016) defines financial support as the funding of the academic processes of a learner which encompass classroom attendance and the procurement of academic needs. Definitions.net. STANDS4 LLC (2020) defines financial support as the provision of monetary resources or capital and credit; obtaining or furnishing money or capital for a purchase of the required resources or enterprise and the funds so obtained (The Random House Unabridged Dictionary, 2nd Ed. 2020) In this study, financial support refers to the money the deaf children access for their academic needs.

1.8 Overview of chapters

Chapter 1: General Introduction

The chapter presents the background to the study which focuses on the Principle of Normalisation which offered humanitarian services mainly to the mentally retarded children in the Scandinavian countries. The principle was reformulated to the SRV, which offered its services to all the devalued children in society. This principle was further developed into the Inclusive Education by the World Conference in Salamanca, popularly known as the Salamanca Statement, in Spain in 1994. Inclusive education recognises individual differences and advocates that educational provisions should cater for the needs of all those who are needy. Inclusive education for the deaf children may be in the form of location, social, part-time and full-time mainstream. In this study, it is in the form location as well as part-time. The main research question and four sub-research questions were formulated to guide the research process. The aim of the research, from which four research objectives were derived, was also formulated. The main research question sought to address the aim while the sub-research questions sought to address the objectives. The significance of the study lies in its improvement of the education of deaf children through the research findings. The chapter also gives an overview of the methodology used for this study. Key terms were also defined

in this study. The structure of the thesis is also outlined. The chapter further presents the assumptions made on issues that made this study possible.

Chapter 2: Literature Review

This chapter presents the literature detailing the experiences of deaf children in inclusive academic and psycho-social spheres. The chapter focuses on the challenges experienced by deaf children, particularly in the academic sphere and legislative and policy framework; lack of human, material, infrastructural and financial resources as well as lack of psychosocial support. The chapter further reviews the literature detailing the successes of deaf children in the academic and psychosocial spheres. Moreover, the chapter reviews the literature on the various kinds of support, particularly legislation and policy in various countries as well as academic, psychosocial and financial support. The chapter also unravels the literature on the available resources including material, human, infrastructural and curricular resources. The chapter finally reviews the literature on the strategies developed to overcome the challenges that deaf children encounter in their education.

Chapter 3: Theoretical Framework

This chapter focuses on the Asset-Based Community Development (ABCD) Theory and describes how it influences inclusion and the experiences of individual members in community development. A brainchild of Kretzmann and McKnight, (1993) the theory posits that communities are developed from inside to outside. The theory stresses the indispensability of all community members in community development even if they are devalued. Kretzmann and McKnight, (1993) assert that communities should mobilise their members so that they utilise their talents to develop the community. Thus, schools should mobilise their marginalised deaf learners towards the development of their schools. Generally, the chapter looks at community development using its assets. In this study, this translates to the notion that schools should mobilise all their members towards school development regardless of their status.

Chapter 4: Research Methodology

This chapter constitutes the researchers methodology. The chapter outlines the qualitative research approach which enhances an in-depth understanding of human behaviours and the rationale for such behaviours as they manifest in natural settings. The chapter also characterises the qualitative

approach, outlining its advantages and disadvantages. The chapter describes the interpretive paradigm which was first proposed by Berger and Luckmann (1967). The interpretive paradigm views the meaningfulness of people's character and participation in both social and cultural lives as important in collecting and analysing data; thus, it emphasises that reality is socially constructed through in-depth interviews and focus group discussions. The chapter also dwells on the assumptions of the interpretive paradigm. The chapter also describes the narrative case study design as proposed by Connelly and Clandinin (1990). This narrative case study design dictates that data collection be conducted in the form of narratives from the participants. The chapter also looks at target and accessible population. The chapter defines target population as that which may not be easily accessible while accessible population is that the researcher can easily access. From the population, a sample was drawn, comprising two (n=2) administrators, three (n=3) psychologists, five (n=5) deaf children, all for interviews; and twelve (n=12) teachers for two (2) focus group discussions. The chapter also looks at the theoretical data saturation after fieldwork. Data saturation occurred for focus group discussions and psychologists; hence, one psychologist and one focus group were dropped. One deaf teacher was added to the sample to address the information gap on deaf people. The chapter also looks at the types of bias, namely the instrumentation, response and the researcher's bias. The chapter outlines Riessman's interaction model of data analysis, which denotes that humans experience the world through story-telling. The chapter further looks at quality assurance in the form of trustworthiness whose criteria include credibility, transferability, dependability, confirmability and audit trails as proposed by Nowell, Norris, White, and Moules (2017). Finally, the chapter looks at ethical considerations, particularly the background to ethical considerations, the principles of beneficence, respect and justice.

Chapter 5: Data Presentation and Analysis

This chapter presents and analyses data solicited through in-depth interviews and focus group discussions. Data are collected from administrators, psychologists and deaf children through interviews. Data are also collected from the teachers through focus group discussions. The chapter employs Riessman's model of data presentation and analysis. Therefore, data are presented in

narratives in the form of stories as told by the participants. Data analysis derives from these narrations.

Chapter 6: Discussions of the findings, Conclusions and recommendations

The chapter analyses and discusses data. The findings are summarised, conclusions are drawn and recommendations are proffered basing on the findings.

1.9 Summary

This chapter has presented the general introduction to the experiences of deaf children in primary schools with a focus on the background to the study, which mainly traced the history of inclusive education from the Principle of Normalisation to the inception of the Principle of Inclusive Education. This is the history that has brought about the education of deaf children into mainstream schools. The chapter also drew the statement of the problem from the background to the study. The chapter further looked at the assumptions that made this study possible, presented the aim, objectives, and significance of the study. The chapter also outlined the methodology the study adopted and gave an overview of the organisation of the thesis.

CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

This chapter reviews literature related to the challenges experienced by deaf children in primary schools. The literature focuses on communication, curriculum, financial material and psychosocial challenges. The chapter also deals with academic and psychosocial successes of deaf children in primary schools. The chapter also unravels the literature on the kinds of support that deaf children got in primary schools. These were mainly academic, psychosocial and financial support. The literature also focuses on the availability and adequacy of material, human and curricular resources. Finally, the literature dwells on strategies of overcoming or minimising the challenges experienced by deaf children in primary schools.

2.2 Experiences of deaf children at primary schools

The experiences of deaf children at primary schools are characterised by both challenges and successes as they navigate their educational journey.

2.2.1 Challenges of deaf children at the primary schools

It is important to note that deaf children at primary schools experience a myriad of challenges. These challenges include academic issues, lack of a supportive policy and legislative framework, a lack of psychosocial support, inadequacy of human, material, and financial resources.

2.2.2 Academic challenges of deaf children

The literature depicts deaf children as encountering an array of academic challenges at primary schools. These challenges include communication barriers, an exclusive curriculum, shortage of human, financial and infrastructural resources.

2.2.3 Communicational challenges

The reviewed literature attests to the fact that deaf children experience communicational challenges as they relate with hearing peers and teachers at school. Deaf children usually communicate through Sign Language, a medium of communication they use as a developmental tool of intelligence, academic participation and achievement at school. However, the literature has

shown that deaf children face communication challenges in relating with their teachers and hearing learners in mainstream classes (Gudyanga, Wadesango, Hove & Gudyanga, 2014; Weber, 2016). In their exploration of the challenges facing learners with hearing loss in Zimbabwe, Mpofu and Chimhenga (2013) revealed the controversy around the most effective mode of communication to be used in communicating with the deaf. While the deaf prefer the use of Sign Language, those who argue for oral languages assert that learning a language can only be accomplished when it is heard (Hyde & Power, 2004; Mpofu & Chimhenga, 2013; Khairuddin, Miles & McCracken, 2018; Mapepa & Magano, 2018; Ntinda et al., 2019). It is not clear how Sign Language, which has nothing in connection with hearing, can be learned through hearing. Similarly, the Deaf Zimbabwe Trust (DZT, 2013) highlighted that Sign Language, as the native language of communication for deaf children, should be used as an instructional medium as it allows them to express their thoughts, feelings and abstract concepts in academic and social circles. This recommendation means that concept formation and abstract reasoning for deaf children takes place in Sign Language. The UNESCO has indicated that the use of Sign Language as a medium of communication should be recognised among the deaf in inclusive education and it should be provided to ensure that all deaf persons have access to education in their national sign languages (UNESCO, 1994). Also, UNESCO and SREOPD indicated that the use of Sign Language should be considered within the inclusive education of deaf children, and their communication should be aligned with their linguistic background in their families and communities (SREOPD, 1993; UNESCO, 1994; UN-CRPD, 2006; DZT, 2013). Similarly, Mapepa and Magano revealed that Sign Language is natural for deaf children as it enables them to translate concepts into meanings and knowledge. Evidently, Sign Language is an important tool in deaf children's inclusive education and social life. Furthermore, the Constitution of Zimbabwe (2013) stipulates that the Sign Language is a language of preference for deaf children, and is one of the sixteen official languages used in Zimbabwe (DZT, 2013; Constitution of Zimbabwe, Amendment Act No. 20, 2013). Therefore, it provides that individual citizens have the right to a language of their choice. As such, deaf children are constitutionally entitled to the use of Sign Language as their effective language in learning and social situations. Arguably, use of any other communication other than Sign Language, therefore, may not be the ideal communication for deaf children in academic and social settings (Gudyanga, Wadesango, Hove & Gudyanga, 2014). Several studies carried out to determine the challenges and opportunities arising from the inclusion of deaf children in

mainstream primary schools suggested that headteachers, mainstream teachers, and deaf children incompetently communicated in Sign Language, and this could affect their social and cognitive developments during learning since their teachers and hearing counterparts cannot sign to them (Musengi & Chireshe, 2012; Desalegn & Worku, 2016; Mamba & Mafumbate, 2019). Similarly, Musengi and Chireshe (2012) demonstrated that in Zimbabwe, the main challenge confronting deaf children in inclusive education was communication since they could not speak orally while their teachers and hearing peers preferred spoken languages as they had challenges in signing. Antia, Jones, Reed, and Kreimeyer (2009) concur, mentioning that the lower degree in the ability to communicate and participate in the academic settings could be a challenge that influences the child's academic expectations and academic success. Furthermore, the degree of hearing loss and age of identification affect the level of intervention and the kinds of support available in inclusive schools. Musengi and Chireshe (2012) revealed that mainstream teachers lack skills that enable them to use Sign Language in teaching, speech-reading, and signing and this has necessitated the need for them to be taught on how to teach and communicate with deaf children. This implies that mainstream teachers reverted to traditional methods in the teaching of deaf children as they have forgotten the skills specialist teachers taught them. The DZT (2013) argues that the implementation of Sign Language remains a challenge for teachers, who spend their time teaching in oral languages. This defeats the essence of inclusive education which should recognise the use of Sign Language, the language for the deaf to which they are entitled (SREOPD, 1993; UNESCO, 1994; UN-CRPD, 2006). The Commission of Inquiry into Education and Training (CIET, 1999), popularly known as the Nziramasanga Commission of Inquiry, concurs as its findings indicate that most specialist teachers continue to use the mainstream curriculum, which is not differentiated, thereby sidelining Sign Language deaf children are conversant with. In addition, teachers were reportedly using oral-aural approaches, lecture methods as well as the chalk-and-talk methods of teaching, leading to lack of participation by deaf children in learning (Musengi & Chireshe, 2012; DZT, 2013). The study sought to find how teachers and administrators communicated with deaf children in the school.

Weber (2016) highlighted ten challenges affecting deaf and hard hearing children in the classrooms. These include language deficiencies, classroom acoustics, inadequate lighting, experiential shortages, lip-reading and residual hearing, inadequate knowledge and awareness, social concerns, lack of collaboration with peers, and lack of resources. As compared to their

hearing counterparts, these deaf children face challenges resulting from their more mediocre literacy abilities, rudimentary numeracy skills, difficulty reading comprehension, and general low academic achievement (Qi & Mitchell, 2012; Weber, 2016). Hankebo (2018) found that classrooms for deaf children need adjustments and considerations which take cognisance of such notable changes as fitting the rooms with mirrors (Gudyanga et al., 2014). However, Chireshe (2011) has indicated that the availability of mirrors for speech training and the availability of hearing aids are evidence of the intention to apply oral-aural approaches to the teaching of deaf children by mainstream teachers. Similarly, Musengi, Ndofirepi, and Shumba (2012) investigated the educational challenges and opportunities presented to deaf children in Zimbabwe. Their findings suggest that academically, deaf children performed way below their non-deaf counterparts if Sign Language, was not used in teaching and learning situations. According to Alasim (2018), Sign Language should be taught in schools so that hearing peers, who frequently ask for the meanings of some signs from specialist teachers and Sign Language interpreters, may learn basic aspects of Sign Language for them to communicate with deaf children in academic and social spheres. Precisely, the introduction of Sign Language to all children increases the social and educational participation of deaf children in inclusive settings (*ibid*). This suggests that Sign Language facilitates the learning of deaf children and its introduction in schools could ensure that every child, including hearing children, learn it. This apparently reduces communication challenges between hearing teachers and children, which enables deaf children to participate in both learning and social situations. This scenario calls for the roping in of more specialist teachers and Sign Language interpreters in the teaching of Sign Language.

In academic circles, deaf children also grapple with challenges emanating from an exclusive curriculum. The curriculum for mainstream schools, which include deaf children, should be adaptive, giving room for modifications and differentiation (SREOPD, 1993; UNESCO, 1994). Although the Chief Education [Zimbabwe] Officer's Circular No. 3 of 1989 emphasised the need to adapt the regular school curriculum and teaching methods to suit the needs of children with disabilities, teachers continue to use the unadjusted mainstream curriculum and techniques. Desalegn and Worku's (2016) study revealed that schools that enrolled deaf children used the regular school curriculum, which was not modified to suit the diverse needs of children in Ethiopian schools. Studies carried out on the education of deaf children in inclusive settings or schools revealed that deaf children were exposed to centrally designed, extensive and demanding,

examination-oriented curriculum with a predetermined time for completion, which are not cognisant of the more extended periods needed in the teaching and learning of deaf children (Adoyo, 2007; Thwala, 2015). This defeats the principle of affording additional instruction, time, and individual attention required by deaf children (UNESCO, 1994; Musengi & Chireshe, 2012; Chireshe, 2013). The mainstream curriculum, which is non-accommodative and inflexible to the needs of deaf children, could be challenged to influence the academic performance and development of these children in inclusive schools. Musengi and Chireshe (2012) highlighted that the syllabi do not adequately address the needs of deaf children in mainstream schools.

Early identification and intervention are critical in the life and education of deaf children. The literature has shown that inclusive education for deaf children should be supported by a policy regulating early identification and early intervention to enable deaf children to be exposed to education at a tender age (SREOPD, 1993; UNESCO, 1994; UN-CRPD, 2006). Successful implementation of inclusive education depends on early identification, early intervention, early stimulation, and assessment of deaf children at a tender age (SREOPD, 1993; UNESCO, 1994; UN-CRPD, 2006; Antia et al., 2009). Takala et al., (2009) found that early identification and intervention are important for the development of children with hearing disabilities and are offered initially by the class teacher followed by the whole school if the teacher's programme is not effective. This shows that there is need to introduce Early Childhood Inclusive Education for children with hearing disabilities to promote these children's physical, intellectual and emotional development to enhance their readiness for school, a situation that is cost effective for individuals with hearing disabilities, the family and the society at large as this prevents the adverse effects of the disability. This cuts down on the cost of educational needs which may be procured at a cheaper cost due to the lessened impact of disability. The SREOPD (1993) calls for the need to pay special attention to the enrolment of very young children with hearing disabilities in inclusive education while the UN-CRPD (2006) calls for the early rehabilitation of children with disabilities. The CIET (1999), however, observed that there are no proper facilities and resources for the inclusion of young deaf learners in regular schools, and teachers in the Early Childhood Education (ECD) department are not trained to handle children with hearing disabilities. Hence, they are not competent in the teaching and management of children with disabilities (Musengi & Chireshe, 2012; Thwala, 2015; Majoko, 2019). According to Kaputa and Charema (2017), the implementation of inclusive education fosters the development of positive attitudes and values

among children with disabilities and their non-disabled counterparts regardless of their differences and consider all other people as equal partners in all circles of life, be it in the classroom or society (*ibid*). Kaputa and Charema (2017) further claim that if children are introduced to inclusive education at the early stages of their lives, they will be immersed in it, embracing it as part of their daily lives. According to Antia et al. (2009), the early identification and intervention for deaf children in regular schools inculcates linguistic and communication skills. However, Musengi et al., (2012) have noted that deaf children enter into school at the age of six or seven years when they are already behind their non-deaf peers in terms of language. This means that they are enrolled late, which contradicts the views of the SREOPD (1993), UNESCO (1994) or the UN-CRPD (2006) and that their education focuses mainly on language in the early days of enrolment rather than on the planned curriculum. Musengi et al. (2012) acknowledges that deaf children encounter communication challenges that could derail their participation in social interactions, reading, learning mathematical concepts, and other related academic work in regular classrooms (Antia et al., 2009). Kaputa and Charema (2017) concur with the sentiment, reiterating the fact that learning is more meaningful when learners learn from and along with peers, acquiring societal values and norms. From a global perspective, in the United States of America (USA), there is no consensus on the optimal age for early identification of deafness and early intervention to develop spoken language for deaf children. Hence, the focus is on Sign Language and how it influences the development of oral language skills (Fitzpatrick, Stevens, Garritty, & Moher, 2013). Several studies have concluded that being proficient in Sign Language neither prevents nor interferes with the acquisition of reading skills, but rather, it enhances it (Chamberlain & Mayberry, 2008; Hermans, Knoors, Ormel, & Verhoeven, 2008; Hoffmeister & Caldwell-Harris, 2014). This implies that although Musengi and Chireshe (2012), have noted that deaf children are enrolled when they are between six and seven years old, early identification of their hearing impairment and the subsequent early intervention remain important programmes underpinning the introduction of Sign Language and a second language to deaf children for optimum language development. Studies show that literacy in English for deaf children has a direct positive correlation with their native language, which is Sign Language (Hrastinski & Wilbur, 2016). This brings in the concept of Bilingual-Biculturalism (BiBi), where deaf children have to learn their native Sign Language and use it to learn a second language. Language exposure from birth for deaf children and early

linguistic experiences, just like their hearing counterparts and deaf children from deaf parents, increases their ability to learn languages (Hrastinski & Wilbur, 2016).

It is important to note that literacy is critical in all learning activities. Studies conducted in the United States of America (USA) show that literacy is a crucial tool for academic participation, performance, and, eventually, empowerment (Lederberg, Schick, & Spencer, 2013). For most people, literacy should start at an early age when pre-literacy skills are implemented, which is a disadvantage to deaf children whose enrolment is delayed (Musengi & Chireshe, 2012; Hrastinski & Wilbur, 2016). Once a deaf child has missed out on early admission, early identification of disability and early intervention will not be possible, which hampers maximum participation in in-class activities, leading to poor academic performance, poor social adjustment, and lack of employment later in life (Hrastinski & Wilbur, 2016). Poor social alignment could result in poor performance due to low self-esteem. Several surveys indicate that a significant number of deaf children in the USA read below Grade Four level when graduating at high school with an insignificant number reading at Grade Seven level or above (Hrastinski & Wilbur, 2016). Pagliaro (2010) found that deaf children perform poorly in Mathematics compared to their hearing counterparts, with results showing that they perform at grade five or six levels at their time of graduation from high school. However, the performance of deaf children is better in Mathematics than in English, particularly reading for comprehension (Marschark, Shaver, Nagle, & Newman, 2015). This suggests that deaf children face more challenges in translation than in mathematical concepts. Thus, literacy among deaf children is low, resulting in sparse learning. Deaf children in inclusive education also face difficulties owing to the manner in which assessment is constructed (Adoyo, 2007; Thwala, 2015; Hrastinski & Wilbur, 2016). Deaf children lack oral reading proficiency; hence, they do not have language competency to tackle questions framed in a language they had a deficiency in (Musengi et al., 2012; Thwala, 2015; Hrastinski & Wilbur, 2016).

Successful implementation of inclusive education could also be influenced by research. UNESCO (1994) indicated the need to carry out capacity building programmes and carry out investigations at local, national, and regional levels. The information from these researches could be freely disseminated owing to the Florence Agreement (UNESCO, 1994). UNESCO (1994) advocated for the integration of inclusive education into local and national research programmes and should take note that research findings are valuable in shaping its practice. Basing on the views of Margaret

Spellings, United States Secretary for Education, as quoted in the US Department of Education, (2007), the barriers to inclusive education continue, the US continues to seek to learn more about other nations' cultures, the sharing of policy and best practices to make inclusive education more effective. The sharing of inclusive education practices through research could be essential for a sound inclusive education programme. Some scholars argue that the insufficient and paucity of literature in inclusive education in the underdeveloped countries could be considered as a barrier to the successful implementation of the subject (Kaputa & Charema, 2017; Sibanda, 2018). Therefore, research development plays a significant role, as it answers critical questions in inclusive education leading to clarity, improvements, and the resolution of the challenges it is likely to face (Sibanda, 2018). The study sought to find out how the deaf children in the school related with hearing people when they had a different communication mode from that of deaf children. The study went a step further to investigate if there were other means of communication that the hearing people could use to communicate effectively with deaf children.

2.2.4 Curriculum or policy challenges

The curriculum or legal policy plays a significant role in the educational development of deaf children at primary schools. This can be explained by the implementation of inclusive education for deaf children. However, the effectiveness of the inclusion of deaf children in schools should be supported by clear and accommodative policies regulating the education of children with disabilities (SREOPD, 1993; UNESCO, 1994; UN-CRPD, 2006). Deaf children's right to education is enshrined in various pieces of legislation. Deaf children have a right to education (Education Act [Zimbabwe], 1987; UN-CRPD, 2006; Constitution of Zimbabwe [Amendment Act No. 20], 2013).

It is relevant to note that clear legislation and policy play a significant role in the implementation of inclusive education. Scholarly evidence shows that inadequate and inflexible policy influences the academic development of deaf children in inclusive schools (Weber, 2016; Mamba & Mafumbate, 2019). The UNESCO (1994) recommended that countries should have clear legislation and policies on inclusive education in order to reduce discrimination, stigmatisation, prejudice, and stereotype. Legislative and policy frameworks should address how inclusive education should be practised and how teacher education should be implemented. Strong policy in inclusive education, accompanied by clear goals and objectives, helps to show the language of

instruction, reduce derogatory names and negative attitudes towards children with disabilities as well as determine clear categories of deafness, as not all categories of deafness may be included in regular schools (CIET, 1999; UNESCO, 1994 Gudyanga et al., 2014). SREOPD (1993, Rule 6, Section 9) stipulated that "Owing to the particular needs of deaf and deaf/blind persons, their education may be more suitably provided in special schools or special classes and units in mainstream schools." This assertion alludes to inclusivity as it locates the learning area in 'mainstream schools'. The SREOPD (1993) further indicates that focus should be on culturally sensitive instruction that leads to effective communication skills and maximum independence for deaf and deaf/blind children in schools. Thus, communication plays a pivotal role in the education of deaf children in inclusive educational setups. The UNESCO (1994) and the UN-CRPD (2006) indicated that countries agreed that children with disabilities have a right to education which should be granted inclusively. In concurrence, the Constitution of Zimbabwe (Amendment Act No. 20 of 2013) affirms that children with disabilities have a right to education and gives them the right to funded primary education in inclusive settings. All children in Zimbabwe have a right to education and should attend schools nearest to their homes, that is, schools they were supposed to attend if they had no disabilities (Education [Zimbabwe] Act, (1987); UNESCO, 1994; Constitution of Zimbabwe [Amendment Act No. 20], 2013). Although the CIET (1999) perceives the Education Act (1987) as unclear and unspecific for the implementation of inclusive education, countries promised to ensure that all human rights in their countries apply to every person regardless of disability and that they were going to ensure that rights agreed upon would be integrated into local laws and policies (UN-CRPD, 2006). This, therefore, suggests that the phrase 'all children' as used in the Education [Zimbabwe] Act (1987) refers to deaf children as well. Sibanda (2018) conducted a study and found that Zimbabwe had laws and policies meant for inclusive education, but they were vague on the exact procedures followed, citing Section 83 of the Constitution of Zimbabwe (Amendment Act No. 20 of 2013) which says "The State must take appropriate measures, within the limits of the resources available to it, to ensure that persons with disabilities realize their full mental and physical potential, including measures...(f) to provide special facilities for their education...." Apparently this piece of legislation is ambiguous and focuses on special facilities rather than inclusion (Sibanda, 2018). This also suggests that when resources are not available, the State may not be worried about them as the Constitution focuses on 'within the limits of the resources available. Kaputa and Charema (2017) also revealed that

excuses made on the procurement of resources are a sign of negative attitudes among policymakers and other stakeholders towards people with disabilities and their education due to the absence of people with disabilities in matters that concern them. The Disabled Persons Act (1992), as revised in 2001, does not mention educational issues, but rather, it dwells on the accessibility of general infrastructure. Sibanda (2018) further notes that the Zimbabwean laws and policies are either weak or they are hardly underpinned by enforcement. In concurrence, Mafa's (2012) study revealed that though a lot had been said in Zimbabwean legislation on inclusive education, including on additional policies, there are no clear strategies for enforcement of legislation. Kaputa and Charema (2017) reveal that the policy situation in Zimbabwe is characterised by a lot of rhetoric, leading to piecemeal efforts in some schools regarding the implementation of inclusive education. Virtually, Zimbabwe has no clear policy on inclusive education and recommendations point to the formulation of one which should deal with issues of curriculum for teacher education, curriculum for teaching and learning, the development and learning of Sign Language in Zimbabwe, and the provision of assistive devices among others (CIET, 1999). This noble idea follows from the findings of the CIET (1999) indicating that even lecturers at tertiary institutions have not been trained in inclusive education and that specialist teachers for the deaf from colleges learn Sign Language from the deaf learners they are going to teach. The curriculum for teacher education, therefore, is important for the successful implantation of inclusive education since it spells out all the necessary competencies for a specialist teacher. The Commission further notes that the Ministry of Primary and Secondary Education issues policy circulars from time to time to direct inclusive education activities, a situation implying that the Ministry is practising inclusive education on a caretaker basis, since a policy circular issued today may be overridden by another issued on the following day. The Deaf Zimbabwe Trust (2013), however, recommends the alignment of the Zimbabwean Education Act (1987) to the Constitution of Zimbabwe Amendment Act No. 20 of 2013) to legalise inclusion and the inception of Sign Language as a language of instruction and examination as well as the teaching of Sign Language as an examinable subject. Chireshe (2013) revealed that Zimbabwe has no specific policy on inclusive education. Still, the country's Education Act (1987) and the Disabled Persons Act (1992), which called for non-discrimination of people with disabilities, are silent on inclusive education as well as the language that should be used by the Deaf to give them access to information (CIET, 1999). Contrary to Zimbabwe's lack of clear policy, Carroll-Lind and Lees (2009) indicated that New Zealand Special

Needs Education Policy Guidelines spell out that children with special educational needs have the same right as their non-disabled counterparts. In support of this assertion, Nguyet and Ha (2010) indicated that New Zealand has policies that sufficiently and effectively support inclusive education. The study seeks to investigate the representativeness of the legislation and policy on inclusive education in Zimbabwe in primary schools.

Legislation and policy give guidance on the curriculum to be used in inclusive education (SREOPD, 1993; UNESCO, 1994; Adoyo, 2007). The curriculum should be adaptive and flexible to allow teachers to recognise the sociocultural background of deaf children as well as to make adjustments that suit the needs of deaf children in inclusion (UNESCO, 1994; Adoyo, 2007). Thus, all schools have a curriculum that guides them on the content to be taught in line with policy and legislation. The irrelevant curriculum is one of the most significant barriers to inclusive education if not designed to the extent of being adaptable and inclusive (Adoyo, 2007). Sibanda (2018) stated that the curriculum for primary schools lacked meaning in terms of the inclusive education meant for deaf children which may affect its implementation. Scholars have conducted studies on the challenges impeding the successful implementation of inclusive education (Donohue & Bornman, 2014; Singh, 2015). Donohue and Bornman's (2014) findings from their study revealed that the successful implementation of inclusive education might depend strongly on an accommodative curriculum. Similarly, Singh's (2015) study revealed that successful implementation of inclusive education hinges on teachers' ability to adapt, modify or differentiate curriculum to meet the diverse needs of all learners. However, adapting the curriculum may be hampered by challenges related to lack of skilled human resources (Musengi & Chireshe, 2012; Thwala, 2015; Sibanda, 2018). Adaptive curriculum could solve issues of large class size and subject time allocation. However, studies show that schools use mainstream school curricula which are not adaptable, inflexible, extensive and quite demanding (Adoyo, 2007).

It is essential to note that the availability of skilled human resources could influence the successful adaptation and implementation of the curriculum. The UNESCO, (1994) revealed that policy on inclusive education should be clear on how curriculum should be implemented focusing on its adaptations with emphasis on using the same curriculum to give all children the same or equal education with extra instructional support and assistance being given to needy individuals. Studies show that giving extra instructional support and assistance to deaf children during teaching and

learning was stifled by large teacher-pupil ratios which ranged from 1:40 to as high as 1:100 in some countries (Musengi & Chireshe, 2012; Chireshe, 2013; Thwala, 2015; Sibanda, 2018; Majoko, 2019). To harness the problem, the UN-CRPD (2006) urges countries to ensure that children with disabilities access their right to education via a curriculum that develops their human potential, respect for human life, self-worth and dignity in order to develop their personality and talents to their fullest potential. In line with these sentiments, the Chief Education Officer's Circular No. 3 of 1989 [Zimbabwe] stated that the curriculum for inclusive education should focus on appropriate methodologies giving attention to the individual needs of learners such as the language of instruction (SREOPD, 1993; UNESCO, 1994; UNCRP, 2006). The curriculum for inclusion should be flexible, responsive, and sensitive; it should have room for adaptations, and should meet the diverse learning and assessment needs of children with disabilities (SREOPD, 1993; UNESCO, 1994; CIET, 1999; Department of Education (South Africa), 2001).

The Jomtien Conference (1990) and the UNESCO (1994) emphasise that the inclusion of children with special educational needs should focus on the experiences and needs of individual deaf children to enhance their full participation in the education process. Thwala (2015) found that inclusion of deaf children was a frustrating challenge due to high teacher-pupil ratios of sixty to seventy pupils, with headteachers not concerned about it, making it impossible for teachers to give individual attention and additional assistance to deaf children in inclusive classes. Several studies have shown that large class sizes that include deaf children affect one-on-one communication, thereby depriving deaf children of the individual assistance they could get from teachers in ideal classes (Tefera et al., 2016; Hankebo, 2018). Adoyo's (2007) study found that deaf children in inclusive classes could hardly receive individual attention from regular classroom teachers due to high teacher-pupil ratios resulting from free primary education services offered by the government. Thwala (2015) further revealed that completing the syllabus if the curriculum was not adapted to meet the individual needs of deaf children is a mammoth task, suggesting that teachers in the regular classrooms constantly worry about syllabus completion and pass rates. Adoyo (2007) revealed that schools are often ranked according to summative examinations; hence, headteachers are uncomfortable with enrolling deaf children in the schools for fear of lowering their percentage pass rates owing to the low expectations they hold for deaf children. Musengi and Chireshe's (2012) study findings reveal that teachers lamented that the syllabi, worse still when implemented in large class sizes, did not fully meet the needs of deaf children; hence, they were happy if deaf

children were taught by specialist teachers for the deaf in resourced rooms where they could access individual attention because of the low numbers of children in self-contained classes (CIET, 1999). This is a sign that contrary to the principle of UNESCO (1994) of giving deaf children individual attention and additional assistance in the same curriculum, teachers are failing to offer this service due to the abnormally high teacher-pupil ratios with limited time per period. Studies show that deaf learners were made to sit in front of all the hearing learners so that they would have a full view of the teacher's speech organs, signs, gestures, and the chalkboard, with no hearing gadgets or aids being used (Musengi & Chireshe, 2012). This suggests that teachers engage in total communication at the expense of Sign Language.

In concurrence with the issue of lack of hearing gadgets, a study carried out in Zimbabwe by Chireshe (2011) revealed a lack of resources to meet the individual needs of deaf children learning in mainstream schools. This study seeks to investigate the adaptability of the curriculum in inclusive schools in Zimbabwe. The study aims at examining time allocated for each lesson as well as teacher-pupil ratios in inclusive classes. UNESCO (1994) says that the assessment system should be reviewed to make it formative so as to keep teachers and pupils informed about the educational progress from time to time, thereby taking note of the challenges and harness them at every step. However, Adoyo (2007), and Thwala (2015) noted that the assessment was examination-oriented, leading to the ranking of schools. This implies that examinations in inclusive schools were not entirely based on the needs of deaf children but on the requirements for the school to be ranked high. However, CIET (1999) observed that in Zimbabwe, the assessment system for deaf children was the same as that of their hearing counterparts, with only a time allowance of twenty-five percent, when it was needed. The Deaf Zimbabwe Trust (2013) recommends the creation of subject-based signs to avail all flags to be used in respective subjects during teaching and learning and the assessment of deaf children since Sign Language is their native language.

Literature has shown that curriculum is not accommodative. It is difficult to implement the syllabi in inclusive set ups, especially for severe-to-profound categories. Literature has also shown that there are policies on inclusion of deaf children. The study investigated on the ways in which the curriculum is not accommodative. The studies did not show the significance of legislation in inclusive education which became an area of investigation for this study.

2.2.5 Human resource challenges

Essentially, human resources play a vital role in the inclusion of deaf children in schools. The literature reports that the lack of human resources could affect the academic development of deaf children in inclusive schools. The results of the studies demonstrate that mainstream teachers were incompetent in adapting the regular school curriculum and lacked skills in the handling and teaching of deaf children in inclusive set-ups (CIET, 1999; Adoyo, 2007; Musengi & Chireshe, 2012; Thwala, 2015; Kaputa & Charema, 2017). The literature further suggests that appropriate training of human resources is instrumental in promoting inclusion (UNESCO, 1994; Gudyanga, Wadesango, Hove & Gudyanga, 2014; Mamba & Mafumbate, 2019).

Furthermore, previous studies have found that mainstream teachers fail to attend to individual differences and the needs of deaf children due to the time constraints and crowded classes which were restrictive for each lesson and subject (Chireshe, 2013; Thwala, 2015; Tefera et al., 2016; Hankebo, 2018; Majoko, 2019). To this effect, Musengi and Chireshe (2012) have suggested that deaf children may be best taught in self-contained classrooms with fewer numbers so that specialist teachers may give them individual attention. Mainstream teachers lack skills that enable them to adapt the curriculum since they are not trained in Deaf Studies, a course they are reluctant to undertake for fear of assuming an extra burden of catering for deaf children in addition to lack of remuneration (Musengi & Chireshe, 2012; Thwala, 2015; Desalegn & Worku, 2016). The CIET (1999) also noted that after completing their course in Special Needs Education, specialist teachers get a one-off notch, which does not elevate them to the next promotional grade. This suggests why teachers are not interested in studying Inclusive Education.

Teachers are essential in the teaching and learning of deaf children and the inclusion of deaf teachers in inclusive schools creates role models for deaf children to emulate. Hauser, O'Hearn, McKee, and Steider (2010) found that the availability of deaf teachers in the schools was important for role modelling and for the bridging of communication and relationship gaps between the school hearing community and the deaf children. Similarly, Humphries, Kushalgar, Mathur, Napoli, Padden, and Smith (2013) carried out a study and found that the existence of deaf teachers and deaf adults in schools plays a critical role in the teaching of Sign Language and communication skills. McIlroy (2010) conducted a study and the findings revealed that the role of deaf teachers and deaf adults in schools that include deaf children is to ensure that the deaf children are

introduced to the Deaf Culture. UNESCO (1994) emphasised the need to recruit deaf teachers to teach deaf children and therefore act as role models. Undoubtedly, deaf teachers play a critical role in the education of deaf children in regular schools. Mainstream teachers support inclusion through the provision and use of teaching and learning resources for the teaching and learning of deaf children in inclusive schools (*ibid*). Inclusive schools have human resources in the form of specialist and itinerant teachers specialised in Deaf Studies (Musengi & Chireshe, 2012; Chireshe, 2013). Although inclusive schools had these teachers, they lacked competency in Sign Language with some specialist teachers indicating that Sign Language was not a principal subject in teacher education (*ibid*). Thus, the CIET (1999) recommended the development of a clear policy on the teacher education curriculum in Zimbabwe. The CIET (1999) further indicated that newly graduated specialist teachers learn Sign Language from the very students they teach, which implies that they graduate without having attained the necessary competencies.

Chireshe (2013) noted that many teachers lacked training in inclusive education, although many universities in Zimbabwe train specialist teachers, observations and sentiments also shared by Kaputa and Charema (2017). Musengi and Chireshe (2012) revealed that inclusive schools enrolling deaf children lack adequate specialist teachers though many teachers in Zimbabwe did their diploma courses with the United College of Education (UCE), and their degree programmes in Special Needs Educations with the Great Zimbabwe University (GZU), Zimbabwe Open University (ZOU), the Reformed Church University (RCU) as well as the University of Zimbabwe (UZ). Musengi, Ndofirepi and Shumba (2012) indicated that many teachers have specialised training in Deaf Studies initially offered by the United College of Education, an associate college of the University of Zimbabwe, while the University of Zimbabwe first offered a degree in the Education of the Deaf in 1994, with other institutions subsequently offering degrees in Special Needs Education. This position presupposed that most teachers should be specialists in Deaf Studies, although the existing numbers show the opposite, and academic achievements for deaf children remain low (Musengi et al., 2012). What then needs to be addressed is what happens to these teachers who may have completed their courses in Inclusive Education with these various institutions against the backdrop of studies indicating that schools have a shortage of specialist teachers in Deaf Studies. The CIET (1999) found out that after completing their courses in Inclusive Education, specialist teachers were sent back to their original schools even if the schools did not need them, leaving needy areas with unskilled teachers. This partly explains why inclusive

schools have shortages of teachers specialised in the education of deaf learners. Specialist teachers indicated that the skills they learned were highly technical, adding that they ended up losing the skills due to lack of practice when they are sent back to their original schools where inclusive education is not being implemented; this may be the chief reason why specialist teachers lack competency in Sign Language (CIET, 1999; Musengi & Chireshe, 2012). Sibanda, (2018), however, attributes the low numbers of specialist teachers in Zimbabwe to the freezing of employment of teachers by the government. The study seeks to find out why schools have inadequate specialist teachers when many institutions in Zimbabwe are training specialist teachers.

Specialist teachers indicated that they were using Sign Language when teaching deaf children (Sibanda, 2018). Nonetheless, one specialist teacher for each school (Musengi & Chireshe, 2012) may not be enough to cater for the needs of deaf children who may be scattered across grades, leaving some deaf children without a specialist teacher in attendance as regular teachers indicate profess their incompetency in handling deaf children (*ibid*). Similarly, Desalegn and Worku, (2016) found that mainstream teachers had nothing to offer to deaf children in terms of supporting their learning in mainstream classes. Desalegn and Worku, (2016) further revealed that specialist teachers frequently held programmes meant to capacitate regular classroom teachers on the teaching and communication of deaf children. However, regular classroom teachers indicated that they quickly forgot the Sign Language and other skills they would have learned from specialist teachers. On the contrary, studies have revealed apparent lack of awareness, capacitation and collaboration programmes for inclusive education programmes leading to frustration on the part of regular school teachers who reportedly required special skills needed in the teaching of children with disabilities (Musengi & Chireshe, 2012; Chimhenga, 2016; Mapepa & Magano, 2018; Ntinda et al., 2019). Mukhopadhyay, Nenty and Abosi, (2012) and Ntinda et al., (2019) found out that teachers felt that there was inadequate time for capacitation programmes, collaboration as well as consultations with specialist and other regular classroom practitioners, parents, professionals, and other stakeholders, leading to lack of teamwork and team teaching that may contribute to quality teaching and better services for deaf children. The literature has shown that most regular teachers communicate orally when teaching deaf children (Desalegn & Worku, 2016; Khairuddin et al., 2018; Ntinda et al., 2019), contravening the principles of the UNESCO (1994), the SREOPD (1993), and the UN-CRPD (2006) which all call for the recognition of Sign Language as the native language as well as the language of instruction for deaf children. With regular teachers quickly

forgetting what they learn from specialist teachers during capacitation programmes, one may strongly assert that regular schools, including deaf children, grapple with shortage of human resources, which may pose difficulties in the teaching and learning of deaf children.

Apart from regular teachers, schools were equipped with support staff such as Sign Language interpreters or deaf adult assistants, who collaborated with specialist and mainstream teachers in assisting deaf learners in the mainstream classrooms. Esera's (2008) study found that support staff are a crucial cog in the education of deaf children because they provide in-class assistance which ensures that deaf children understand concepts that prove challenging to them. Additionally, deaf children require the services of Sign Language interpreters who interpret oral languages to enhance their understanding of the concepts (SREOPD, 1993; Adoyo, 2007). Other human resources that are important in the education of deaf children are doctors and nurses who take care of the learners' health (UNESCO, 1994). Evidently, human resources play a part in the academic experiences of deaf children in mainstream classes. Although the mainstream education system resourced with specialists in deaf education, the dynamism that characterise inclusive education could lead to teachers becoming irrelevant as they lack current knowledge in inclusive problems, leading to a lack of knowledge to modify curriculum to meet the needs of deaf children (Skrebneva, 2010). When teachers lack current expertise in the provision of inclusive education to deaf children, they resort to referrals whereby they ought to engage other professionals like educational psychologists for assessments and placement into schools that could meet the needs of these particular learners (Skrebneva, 2010). A study carried out by Makhopadhyay and Musengi (2012), found that human resources in the Special Needs Department did not entirely correlate with the schools and deaf children posing challenges on the referrals made by the schools. This study aims at investigating how schools assessed deaf children and how they subsequently adapt the mainstream curriculum.

Another set of crucial human resources are the psychologists who work in the Ministry of Primary and Secondary Education (Zimbabwe), particularly the Department of Schools Psychological Services and Special Needs Education (SPS/SNE). This department assesses school children, in consultation with teachers, parents, speech, and occupational therapists, in order to place them in schools they suit (Majoko, 2019). The UNESCO (1994), however, avers that schools should be modified to suit the needs of children with disabilities and not the reverse. When deaf children attend the schools they suit, they may not participate in schools nearest to their homes, that is, the

schools they could have attended if they had no disabilities (the Education Act [Zimbabwe], 1987; UNESCO, 1994). According to Majoko (2019), children with disabilities may be placed in part-time resource units, self-contained classrooms, or full-time inclusive settings. Gudyanga et al., (2014) noted that the SPS/SNE Department places deaf children at schools they may be suited to. The placement of deaf children in schools that suit them may be perceived as exclusive. Musengi and Chireshe, (2012) view inclusion as fostering the inculcation of society's socio-cultural norms and values into the psyche of deaf children and the placement of deaf children outside inclusive schools, which may, however, deprive them of the opportunity to acquire society's socio-cultural norms and values.

Similarly, Kaputa and Charema (2017) reveal that all learning should take place in the individual's cultural settings. For instance, children learn how to cook, dress, speak, wash, or eat from other people around them. If one is socially excluded from their community, their learning would be deprived of their society's cultural norms and values. Simultaneously, their 'normal' counterparts may miss out on learning about and from children with disabilities (*ibid*). Thus, inclusion offers all the children in the school the chance to learn from each other, which affords them the opportunity to accept each other. The SREOPD (1993) and the UNESCO (1994) assert that schools should be modified to suit the needs of children with disabilities, not the other way round. The idea of assessing and placing children in schools that they suit contradicts the principle of inclusion (UNESCO, 1994). The preoccupation of this study is to issues that determine the placement of deaf children in regular schools.

In Italy, issues that relate to collaborative teaching are riddled with challenges as the general education teacher reportedly heaps the entire teaching load on the support teacher (Anastasiou, Kauffmann & Nouvo, 2015) who may not have teaching skills needed to handle children in certain circumstances, which compromises the quality of academic services given to deaf children (Anastasiou, Kauffmann & Nouvo, 2015). The Italian laws allow the support teacher to teach the entire class, but the relationship between students with disabilities and this teacher reflects exclusion and signs of isolation (Zanobini, 2013). Although the law allows support teachers to teach the entire class, they are not recognised as part of the school teaching team. In the latter scenario, the support teacher teaches children with disabilities explicitly, mostly informally and outside the classroom (Devecchi, Dettori, Doveston, Sedgwick & Jament, 2012). Anastasiou,

Kauffmann and Nouvo (2015) claim that the Italy scenario is divorced from inclusion as it is merely an insertion of children in the mainstream classrooms with little attention being paid to the needs of children with disabilities, which may not motivate them to reach their full potential. Teacher education is not specialised in fostering the achievement of the aims of *Integrazione Scolastica* (*ibid*). Teachers' attitudes in the Italian education system are so positive that teachers have come up with backdoor systems of inclusive education that are developed at school level and implemented at the local level to meet the needs of children with disabilities (Canevaro, D'Alonzo, Ianes & Caldin, 2011). Since this is not a legal system of inclusive education, there is no answerability in whatever is transpiring in these schools practising backdoor system (*ibid*).

In Italy, inclusive education is full of ethical principles, but not intelligence. Di Nuovo (2012) insists that rhetoric and reality be kept apart, and that data at hand should be studied carefully to reconsider inclusive education basing on empirical data. The findings by Chireshe (2013) also indicate that teachers hold mixed feelings regarding inclusive education as it pertains to deaf children in general. Makhopadhyay and Musengi (2012) found that both headteachers and regular school teachers hold mixed feelings regarding inclusive education, with some opting for full-time inclusion, partial inclusion, and other institutions. Gudyanga, Wadesango, Hove, and Gudyanga (2014) found that mainstream teachers are not ready for inclusive education. The teachers have little training in pedagogy and catering for individual differences (*ibid*). Gudyanga et al. (2014) further note that teachers and headteachers contend that incorporating inclusive education may retard academic progress thereby negatively affecting the performance of the school.

Lack of material resources is a challenge experienced by both teachers and deaf children in inclusive teaching and learning situations. A research carried out by the UNESCO (1994) found that the distribution of resources should be the responsibility of the state regarding the needs of deaf children. Technological devices should be used to enhance academic performance and communication (*ibid*).

The UNESCO (1994) notes that some headmasters or administrators make schools the least restrictive settings for deaf children (UN-CRPD, 2006), as they procure resources and deploy them for maximum utilisation. These resources include human, financial, and material support. According to Makhopadhyay and Musengi (2012), headteachers also have a role in supervising

and monitoring the teaching and learning of deaf children in inclusive educational settings. According to the UNESCO (1994), headteachers play a significant role in making schools more responsive to the needs of children with special educational needs, especially if they had received adequate training in inclusive education and are authorised to implement inclusive education in their schools. The responsibility of the headteachers is to foster positive attitudes among school staff and the surrounding communities as well as ensuring cooperation among teaching staff and support staff as well as among the whole school staff and the community (*ibid*). Specifically, they are responsible for developing flexible management styles, redeploying instructional materials, diversifying learning options through the procurement of resources, fostering friendly relations among learners in inclusive set-ups as well as arranging for the exact roles each stakeholder should play (UNESCO, 1994). A study conducted by Musengi and Chireshe (2012) revealed the existence of one specialist teacher at each school. However, the study does not mention that headteachers are also specialists, which suggests their lack of training in inclusive education and skills relevant in the handling of children with special educational needs. In a study conducted in Zimbabwe by Musengi et al. (2012), a teacher revealed that a deaf adult was assigned to him/her as a helper and she or he had to decide on how to make use of the deaf adult. This suggests that headteachers did not spell out the duties of the deaf adult to the regular class teacher, a situation that often led to a lack of collaboration and trust. For instance, the study by Musengi et al., (2012) indicated that some teachers felt that deaf assistants might ‘misteach’ deaf children, spoon-feeding them with answers leading to lack of learning through discovery; others felt unease with observers who pitched up as Sign Language interpreters or deaf assistants. Some specialist teachers are unsure of how effectively they should utilise deaf assistants as they indicated that they just assigned the deaf assistants, giving them different roles like preparing teaching and learning aids, maintaining class control, organising group work, supervising cleaning activities, and managing communication issues.

All these uncertainties often arise due to a lack of terms of reference for each player, which should be provided by the headteacher. This may lead to a lack of collaboration, which has been cited by various studies as a barrier to the successful implementation of inclusive education (Chireshe, 2013; Mpofu & Chimhenga, 2014; Thwala, 2015; Chimhenga, 2016). Charema (2016) says that the successful implementation of inclusive education in Zimbabwe is hampered by negative attitudes in schools, lack of resources, poor advocacy, inertia in educational provisions, and

inadequate research. These factors mainly put blemish on headteachers. Kaputa and Charema (2017) assert that lack of resources is a sign of policy implementers' negative attitudes towards inclusive education. Arguably, the chief implementers of inclusive education are headteachers. The DZT (2013) observed that headteachers sometimes do not show essential policy circulars on inclusive education to both specialist and mainstream teachers. This attests to negative attitudes towards inclusion. In Some cases, teachers, who already lack skills and competency in teaching deaf children (Adoyo, 2007; Musengi et al., 2012; Musengi & Chireshe, 2012; Thwala, 2015), are allocated an inclusive classroom which has no resources or a teacher considered the laziest is assigned class which is inclusive of deaf children (DZT, 2013), possibly because the assessment is examination-oriented and schools are ranked according to performance, and both teachers and headteachers have low expectations for deaf children (Adoyo, 2007; Musengi & Chireshe, 2012; Thwala, 2015).

Studies have shown that teachers and administrators are critical personnel in the education of deaf children in primary schools. The study investigated the role of these human resources in the education of deaf children. The study further investigated the feelings of these human resources towards the education of deaf children at the school and the reasons for their feelings which are not clearly spelt out in literature. Studies also revealed that it was important to employ deaf teachers to teach deaf children. There was a gap on the significance of deaf teachers in the education of deaf children. The study investigated on the significance of deaf children in the education of deaf children.

2.2.6 Psychosocial challenges

Psychosocial challenges influence the academic development of deaf children in inclusive schools. Scholars have revealed that the psychosocial experiences of deaf children could affect their interpersonal relationships with peers, classmates; their personal interactions with deaf peers, hearing peers' family members, and the community (Hadjikakou, Petridou & Stylianou, 2008; Mindrup, 2012). According to Hadjidakou et al., (2008), social inclusion, which manifests itself in participation in activities in social settings, making friends and being accepted by peers, could affect the psychosocial experiences of deaf children. Hadjidakou et al., (2008) indicated that social inclusion is fundamental to the development of deaf children since it may afford them chances of experiencing social and emotional development through mixing with deaf and hearing peers. Lack

of friendships could deprive deaf children of the confidence and self-esteem, resulting in loneliness and isolation or non-participation in social and class activities (Mpofu & Chimhenga, 2013). The teachers' teaching methods may create or destroy social inclusion (*ibid*). For instance, organising children into mixed groupings may promote social inclusion and participation in class activities while individual work or homogeneous groupings may promote exclusion and lack of participation in academic activities and social settings. The development of social inclusion may be influenced by attitudes of people in the social settings (Adoyo, 2007; Musengi, Ndofirepi & Shumba, 2012), communication (Xie, Potmesil & Peters, 2014), and language used in social settings which may subsequently be used in academic settings (UNESCO, 1994; UN-CRPD, 2006). Gudyanga et al., (2014) note that most teachers in regular schools do not have qualifications inclined towards the education of deaf children. Mukhopadhyay and Musengi (2012), Mapepa and Magano (2018) and Ntinda et al. (2019), found that teachers are not trained to teach children with diverse needs, with teachers and headteachers preferring a scenario where children with special educational needs be educated in self-contained classrooms or institutions where they are taught by specialist teachers, especially those children with severe-profound cases. This sympathy exhibited by regular classroom teachers may be understood as a sign of negative attitudes towards deaf children and their inclusion and may be seen as a polite way of indicating that they are not comfortable with the inclusion of deaf children. Some headteachers and regular classroom teachers in Zimbabwe, however, feel that children with special educational needs should be educated in regular classes to afford them equal access to education as their hearing counterparts (*ibid*). A study conducted by Makhopadhyay and Musengi (2012) also found that the headteachers prefer a situation whereby children with special educational needs are educated in inclusive set-ups, preferably partial inclusion rather than full-time inclusion. These sentiments depict the negative attitudes teachers and headmasters hold regarding the inclusion of deaf children. Most mainstream teachers, parents, peers, and other professionals view deaf children as useless people who require services, people who cannot provide services; this influences them to hold negative attitudes towards their academic work and social inclusion (Gudyanga et al., 2014). Esera (2008) noted that deaf children's communication with teachers, deaf peers, hearing peers, and other professionals promotes the school culture by promoting deaf children's sense of belonging, which reduces their isolation; however, there is limited communication in group work being given by teachers. Moreover, deaf children grapple with challenges related to negative attitudes held by regular

classroom teachers and headteachers towards their full-time inclusion and even enrolment in self-contained classrooms in their schools (Musengi & Chireshe, 2012; Makhopadhyay & Musengi, 2012). Spedding (2008) points out that inclusive education is more influenced by attitudes that people hold towards children with special educational needs than by legislation since attitudes determine the inclusive values and beliefs the school, community, or government holds. UNESCO (1994), however, states that legislation should seriously consider the principle of equality as applied in educational opportunities for children with educational needs. This suggests that legislation may be well crafted, but the attitudes people hold towards both children with disabilities and their inclusion derails the process of inclusion. In concurrence, Nguyet and Ha (2010) say that inclusive education may only be successful if stakeholders held positive attitudes towards disabilities and inclusion. Bunch (2008) notes that inclusive education can only be successfully implemented when all learners are accepted as equal partners in learning with hearing peers and where there is collaboration among human resources. Makhopadhyay and Musengi (2014) found that inclusive education was successful when teachers frequently met parents, other teachers, and stakeholders in inclusive education. However, Makhopadhyay and Musengi (2014) found that the Departments of Schools Psychological Services (SPS)/Special Needs Education (SNE) were detached from both deaf children and the schools and they rarely visited the schools for supervision, yet they should give service to both schools and deaf children. The study seeks to determine if schools and deaf children were receiving services from the departments of SPS/SNE.

Chireshe (2013) and Khairuddin et al., (2018) found that attitudes and social acceptance have improved for children with disabilities, particularly those in inclusive settings. The improvement of social acceptance and beliefs is attributable to inclusion itself, the development of social skills among children with disabilities, children with special educational needs' demonstration of capabilities in both social and academic endeavours (Chireshe, 2013). Inclusive education has increased social acceptance, positive attitudes towards children with special educational needs, and reduced stereotypes, prejudices, discrimination, and stigmatisation of children with disabilities. Children with special educational needs in inclusive settings demonstrate more academic and social achievement than those in institutions (Antia, Jones, Reed & Kreimeyer, 2009; Chireshe, 2011).

Studies have shown that the education of deaf children is promoted by teachers' attitudes towards deaf children and their education. Literature also showed that schools prefer to enrol mild cases of hearing loss. Literature further indicated that the education of deaf children is also influenced by services from Schools Psychological Services and the teachers' teaching strategies. The study sought to investigate the attitudes of the teachers and administrators towards the education of deaf children in primary schools. The study further investigated on the nature of services schools got from Schools Psychological Services which were not spelt out by Literature. Furthermore, the study sought to investigate to find if teachers' teaching strategies promoted the education of deaf children in primary schools.

2.2.7 Challenges related to material resources

Material resources play a vital role in the academic experiences of deaf children in inclusive education. The SREOPD (1993) recommended that all countries should ensure the availability of support services, material resources, and assistive devices for children with disabilities so that they fully exercise their rights and autonomy (UNESCO, 1994; UN-CRPD, 2006). Scholars have demonstrated that the lack of material resources, including hearing aids, cochlear implants, and computers could be the challenges affecting deaf children in inclusive education (Musengi & Chireshe, 2012; Thwala, 2015; Weber, 2016; Alasim, 2018). A study conducted by Mapepa and Magano (2018) found that in South African schools, support in terms of material resources lacked due to the unavailability of these resources. Despite the lack of material resources, there was significant support from the Department of Health (South Africa) in terms of hearing aids (Mapepa & Magano, 2018). UNICEF Malaysia (2014) conducted a study and found that the advent of technological devices has attached the parents of deaf children to the health professionals like doctors or audiologist before their children start school to gain access to hearing aids. Musengi and Chireshe's (2012) study established that schools were equipped with hearing aids. Further, other material resources like textbooks, Sign Language dictionaries, or interactive boards were unavailable in inclusive schools. The available hearing aids were too old to function efficiently, while other resources like mirrors and Sign Language dictionaries were also unavailable (Musengi & Chireshe, 2012; Donohue & Bornman, 2014; Mapepa & Magano, 2018). Alasim (2018) further noted that the lack of material resources in inclusive schools hampered the successful implementation of inclusive education for deaf children.

The provision of adequate material resources, especially amplification devices, is critical for the education of deaf children (Mpofu & Chimhenga, 2013; Yusoff, Umat, & Mukari, 2017; Mapepa & Magano 2018; Goh, Fadzilah, Abdullah, Othman & Umat, 2018). However, teachers should ensure that these materials function properly, and children comprehend what is being said (Musengi & Chireshe, 2012). Most teachers, however, revealed that they lacked knowledge on how to use amplification devices, making it difficult to use them in the teaching and learning of deaf children even if they were available (Sibanda, 2018; Chireshe, 2013; Thwala, 2015). These scholars have revealed that when teachers fit deaf children with hearing aids, they proceed to teach them like hearing learners without paying attention to their individual needs and they do not know how the hearing aids work (Musengi & Chireshe, 2012; Mapolisa & Tshabalala, 2013; Ntinda et al., 2019). Some deaf children revealed that they sometimes switched off their hearing aids to avoid picking a lot of irrelevant background noises made in mainstream classrooms, while others indicated that sometimes their hearing aids are off due to flat batteries (Musengi & Chireshe, 2012). However, Thwala (2015), Mapepa and Magano (2018) found that schools had no teaching and learning material and technological resources, like hearing aids needed to implement inclusive education successfully owing to weak financial muscles of the states and schools' responsible authorities. According to Thwala (2015), most regular classroom teachers face problems using hearing aids for deaf children as they indicated that they had never seen the gadgets physically and that the workshops they attended on hearing aids were merely theoretical and allocated short periods. Teachers should be educated on how to assist deaf children in using the available assistive devices (Thwala, 2015). This should be a target topic for specialist teachers attending capacitation programmes. It is important to note that these resources help deaf children as they enhance early identification and early intervention as well as for amplifying sound (Alasim, 2018). Musengi and Chireshe (2012) concur, adding that deaf children use hearing aids that are very old, whistling and distorting sound and the indicate that though the aids are adequate, they are now leaking, whistling and inefficient.

Mirrors are also being used to aid the teaching of speech to deaf children in primary schools (Musengi & Chireshe, 2012). This implies that teachers and the whole education system are inclined to oralism. Similarly, Musengi et al., (2012) claim that the use of oralism is a sign of traditional conservatism. Musengi and Chireshe, (2012) add that mirrors for speech training are inadequate. Scholars have supported that the progress of inclusive education is retarded by the

inadequacy of material resources (Chireshe, 2013; Kaputa & Charema, 2017; Sibanda, 2018). Generally, regular classrooms lack material support such as teaching aids, computers, textbooks, Sign Language dictionaries and mirrors needed in the teaching of deaf children (Musengi & Chireshe, 2012; Chimhenga, 2016). This study investigated the availability of mirrors for speech training in inclusive schools in Zimbabwe.

The literature reports that the lack of infrastructure is arguably a material resource challenge confronting deaf children in inclusive education. The Zimbabwean government, upon attainment of majority rule in 1980, initiated the expansion of education in Zimbabwe. Several mainstream schools were constructed to cater for both general education and inclusive education, but this was before the promulgation of the Disabled Persons Act (1992) whose main thrust is on the accessibility of infrastructure; hence, many of these schools were not quite accessible to deaf children (Disabled Persons Act, 1992; Sibanda, 2018). Sibanda's (2018) findings reveal that many of these schools were not available in terms of distance and parents had to take their children to and from school daily for fear of long distances as well as for security reasons. However, Directors' Circular Minute No. 12 of 2005 stipulates that primary school children should not walk more than five kilometres to and from school. The scenario of taking children to and from school daily may negatively affect the already financially strained families (Sibanda, 2018). Schools may also be inaccessible in terms of their unsuitable classrooms (Sibanda, 2018). Mapolisa and Tshabalala's (2013) study found that acoustically treated classrooms meant for deaf children were not inadequate to unavailable schools.

Similarly, Gudyanga et al., (2014) found that inclusive classrooms for the deaf should be acoustically treated, that is, they should be carpeted, have thick curtains, and be double-windowed to reduce ambient noise. Chimhenga (2016) also found that there is a lack of suitable classrooms for the inclusion of deaf children. Furthermore, Desalegn and Worku (2016) found that most inclusive schools lack adequate classrooms for the inclusion of deaf children. These classrooms should be equipped with specific material resources suitable for the deaf, assistive devices together with specialist teachers who should assign professional duties to deaf children. These findings indicate that classrooms available for the education of deaf children in inclusive schools are not acoustically treated, exposing deaf children to the dangers of ambient noise, particularly for those using hearing aids. Musengi and Chireshe (2012) revealed that deaf children often remove their

hearing aids to circumvent the loud noise made in classrooms and their surroundings. Studies have shown that the effects of ambient noise for deaf children using hearing aids may be reduced by using Frequency Modulation (FM) and the induction loop where the teacher talks to children at the same frequency as theirs; hence, sounds from other frequencies do not disturb children as they are not heard (Desalegn & Worku, 2016; Goh et al., 2018; Khairuddin et al., 2018). Hadjidakou et al., (2008) indicated that there is, however, less motivation for the specialist teacher in the resource rooms due to poor remuneration compounded by an extra burden of teaching deaf children.

Literature has shown that schools lacked material resources. Common material resources for the education of deaf children in primary schools were hearing aids. Teachers had problems in fitting hearing aids. Literature showed that after fitting deaf children with hearing aids, teachers proceeded to teach as if they were teaching a class of hearing children only. The study investigated on the resources that were available for the teaching and learning of deaf children in primary schools. Although literature indicated that teachers had challenges in fitting hearing aids to deaf children, it did not indicate the solution to this challenge. The study, therefore, investigated if the capacitation programmes focused on the skills that capacitated teachers to help deaf children in the teaching and learning situations.

2.2.8 Challenges related to financial resources

Deaf children attending inclusive schools grapple with financial difficulties related to school fees, procurement of assistive devices and stationery. The UNESCO, (1994) recommended that there should be adequate funding for the successful implementation of inclusive education. The Constitution of Zimbabwe (2013) recognises that children with disabilities have a right to, within the limits of the resources available to the State, State-funded education when they need it (Constitution of Zimbabwe, [Amendment Act No. 20] 2013, Section 83, paragraph (f)). Sibanda (2018) suggested that the availability of funding is dependent on the country's political will and socioeconomic status. It is not clear whether a lack of funding is due to a lack of political will or socioeconomic status. However, Khairuddin's (2018) study found that the government has embraced policy documents related to disability issues which increased political will in Malaysia, mainly as a result of the UN-CRPD. Goh et al., (2018) conducted a study and found that increased political will has disposed equal opportunities for the education of deaf children. Although UNESCO views funding as crucial to the implementation of inclusive education, the Zimbabwean

Constitution (2013) considers limits to the resources available as well as when children with disabilities need funding (UNESCO, 1994; Constitution of Zimbabwe [Amendment Act No. 20] 2013). This could be limiting as this implies that when resources are not available, no action can be taken. This also means that it is the responsibility of deaf children to indicate that they need resources rather than the system putting in place all the necessary resources including funds. This also suggests that this was the reason why inclusive schools lacked material resources as they waited for deaf children to indicate that they needed certain kinds of support when schools did not have money to procure them. The CIET, (1999) acknowledged that children with disabilities were getting a meagre grant from the government, which cannot cater for their boarding fees, which are prohibitively very high. Children with disabilities get assistance from government grants through the Department of Social Dimensions Fund, a department in the Social Welfare Ministry. Most children who benefit from the fund are those enrolled in government schools, but the fund is not disbursed on time (*ibid*). In their study, Takala et al., (2009) found that children with special educational needs were regularly funded one and a half times more than those without special educational needs. This shows that financial support is essential in the education of deaf children. The UNESCO, (1994) noted that the availability and adequacy of financial resources hinges on the educational policy on inclusive education as well as political will at the community, national, and international levels. Kaputa and Charema, (2017) concur, indicating that lack of resources indicates that policymakers and implementers have negative attitudes towards deaf children and their inclusion. The distribution of financial support should be done rationally, considering the needs of deaf children (UNESCO, 1994). This is consistent with the observations of other scholars, who suggest that inclusive education is allocated and operates with 'shoe-string budgets (Chireshe, 2013; Kaputa & Charema, 2017). Charema, (2010) indicates that the allocation of funds for inclusive education is minimal such that countries operate on meagre budgets, which do not fully support the education of deaf children. Mandina, (2013) also indicated that budgetary constraints on the part of the Ministry of Primary and Secondary Education and the schools' responsible authorities hinder the implementation of inclusive education and other activities that require funds in inclusive schools. The Funds from MoPSE and schools' responsible authorities may be found to be limited when a larger portion is chewed by the salaries of those who work for the Ministry and those who work for the responsible authorities, with a smaller portion being channelled towards addressing inclusive educational issues such as learning material resources, infrastructure

and technological assistive devices (Chimhenga, 2016). Hyde and Power's (2004) study found that even if the funding of inclusive education was backed by legislation and policy, there was delayed payment of the funds for practice. The implementation of inclusive education is derailed by the lack of funding (Donohue & Bornman, 2014; Chimhenga, 2016). Mbibeh (2013) further indicated that teachers, parents, and school administrators maintain that low budgets allotted to inclusive education are a source of challenge to the implementation of inclusive education. According to Kaputa and Charema, (2017), low budgetary allocations are a sign of negative attitudes among policymakers and implementers towards people with disabilities in general and inclusive education in particular. For inclusion to be successful, there is a need for all stakeholders in inclusive education to be committed so that each member plays their part for the availability of all the necessary provisions. Low budgetary allocations may not meet the individual needs of deaf children who need different gadgets, for instance, one deaf pupil may need a behind-the-ear hearing aid while another one may need a cochlear implant (*ibid*). Chimhenga, (2016) noted that in Botswana, there are also low budgetary allocations for inclusive education, which eventually led to a lack of various other resources like Sign Language dictionaries, other textbooks, computers, audiometers and hearing aids. Tshifura's (2012) study conducted in South Africa and Namibia revealed that schools have no resources specifically for inclusive education, but the two countries prudently use the available resources to implement it. This dovetails with the sentiments of the UNESCO, (1994), which calls for the utilisation of available resources for the success of inclusive education.

Studies have shown that there should be adequate funding for the successful education deaf children. However, literature has shown that adequate funding is dependent upon political will. Studies further showed that schools operate with shoe-string budgets and, even in cases where inclusive education is backed by legislation, funds are not released on time. The study sought to find if the education of deaf children in primary schools was adequately funded. The study sought to go beyond literature and find who paid for the education of deaf children in scenarios of lack of political will and inadequate funding.

2.3 Successes of deaf children in schools

Although deaf children experience challenges emanating from learning in regular schools, they also have a share of successes. These are mainly centred on academic and psychosocial or emotional achievements.

2.3.1 Academic and psychosocial successes of deaf children in schools

The achievements of deaf children are related to academic performance and progress, mental health and wellbeing and interpersonal relationship in schools.

2.3.2 Deaf children's academic successes

Several studies have shown that deaf children have scored academic successes in inclusive education (Qi & Mitchell, 2012). The Asset-Based Community Development Model (ABCD) recognised that deaf children in inclusive schools have the potential to attain academic success if assets are put at their disposal together with community assistance to overcome barriers to learning (Kretzmann & Mcknight, 1993; Musengi et al., 2012). This scenario of the infirmity model of assessment has seen a few deaf children being enrolled in high schools (Garberoglio, Cawthon & Bond, 2014). Other scholars have indicated that most of the deaf children who have graduated from high school performed better than their hearing peers in reading and language writing (Antia et al., 2009; Hrastinski & Wilbur, 2016). Studies have shown that deaf children exceedingly performed well in Mathematics in inclusive education (Antia et al., 2009; Marschark, Shaver, Nagle & Newman, 2015). Marschark et al. (2015) revealed that the Mathematics test results of deaf children were better than English test results. Deaf children enrolled in regular classrooms performed better in Mathematics than those who were taught by specialist teachers in self-contained classes (Antia et al., 2009). Hrastinski and Wilbur, (2016) also noted that the test achievements of cochlear implants users were average to above average, which implies that cochlear implants were useful in the teaching and learning of deaf children. The success in reading and writing among deaf children without augmentation was attributed to their successes in the use of Sign Language (*ibid*). This means that Sign Language is influential in the learning of reading by deaf children. Xie, Potmesil and Peters's (2014) study confirmed that the provision of hearing aids was necessary for the improvement of oral communication skills, general communication skills, daily living skills, action socialisation, interaction initiation and eventually participation in

both social and academic spheres. However, communication on a one-to-one basis was better than a connection with a group. Miller and Clark, (2012) revealed that many deaf children attend school without a language.

The literature has demonstrated that deaf children learn concepts quickly when using the Sign Language and their teachers revealed that they did not struggle with teaching deaf children when deaf assistants or Sign Language interpreters were available to help in explaining concepts in Sign Language (Musengi et al., 2012; Hrastinski & Wilbur, 2016). Hrastinski and Wilbur (2016) explored the assessment tests in reading comprehension as well as receptive and expressive Sign Language among deaf children and found that early acquisition of and proficiency in Sign Language were beneficial to deaf children as they facilitate reading.

It is essential to mention that proficiency in Sign Language is critical in the learning and cognitive development of deaf children. However, deaf children with a strong background of Sign Language might develop literacy skills to reach proficiency levels equal to those of their non-deaf age-mates, especially if they were exposed to the mainstream curriculum (Dostal, Gabriel & Weir, 2017). Children of deaf adults (CODA) may also attain the same level of language proficiency as their non-deaf counterparts if they were fully exposed to Sign Language at home and later introduced to a spoken language at school (Nyangairi, 2017). Wilbur, (2008) also confirms that early acquisition of Sign Language facilitates deaf children's cognitive development, socio-educational achievement, memory development as well as reading and writing basing on the development of the existing style. Initial Sign Language acquisition neither interferes with the learning of a spoken language nor hampers speech development (*ibid*). Early acquisition of Sign Language, therefore, is instrumental in learning a spoken language, emotional development, and academic achievement (Wilbur, 2008). Antia et al., (2009) conducted a study on the educational status and progress of the deaf and hard-of-hearing students in general education classrooms and revealed that when using Sign Language in teaching deaf children, itinerant teachers indicated that most of their deaf children were academically competitive compared with their hearing counterparts as they could meet all the academic standards in teaching and learning aspects and assessment. Deaf children learned more and achieved better results when Sign Language was used as the language of instruction both in self-contained classrooms and in regular classes (Musengi & Chireshe, 2012). It is crucial to demonstrate the usefulness of Sign Language in the academic development of deaf

children. Alasim, (2018) found that when mainstream teachers asked a question in a spoken language, deaf children did not raise their hands until the Sign Language interpreter encoded the meaning in Sign Language. When Sign Language was used as a language of instruction, deaf children participated in class, and lack of their participation was attributed to non-use of Sign Language during class instruction. Similarly, Musengi and Chireshe, (2012) found that during teaching and learning in classes where there were Sign Language interpreters, deaf children participated fully, interacting and nodding their heads, initiated communication and even repeated what Sign Language interpreters had communicated, although their signing was too fast for teachers to grasp. The Zimbabwe Schools Examinations Council (ZIMSEC) examinations results for grade seven in the past indicated that ten percent of deaf children who sat the tests passed, and this pass rate could have been better had Sign Language been used during class instruction (Deaf Zimbabwe Trust, 2013). Musengi and Chireshe, (2012) observed that, despite Director's Circular No. 2 of 2001's directive that Sign Language should be used and taught in primary schools, teachers were not using it in teaching deaf children, and at the end of term results ranking, deaf children always occupied the bottom of the class list ranking. Contrary to these findings, a study conducted in Zimbabwe by Musengi et al., (2012) revealed that teachers detested using Sign Language as well as getting assistance from Sign Language interpreters and deaf assistants, citing fears that the use of Sign Language would interfere with learning oral languages which they viewed as the cornerstone for social inclusion in deaf children's lives. Some teachers argued that there was no problem with using Sign Language when teaching deaf children except that their examinations were in written form and should be answered in written form. It may be inferred that this is the reason why deaf children are not entirely performing well in the examinations administered by the ZIMSEC (Deaf Zimbabwe Trust, 2013). This view brings in the idea of bilingual-biculturalism, where deaf children learn Sign Language in conjunction with a spoken language and its written form (Wilbur, 2008).

Some deaf children learn Sign Language as the native language and learn a second language in its oral or written form at school (Dostal, Gabriel & Weir, 2017). It is an achievement when deaf children can learn a second language. Some deaf children learn a spoken language at home as their native language through hearing augmentation before they even get to school. At the same time, others, even with development, fail to reach levels of proficiency, posing a challenge that since they had never been exposed to Sign Language, they may not have the ability to write, thereby

lacking communication and social skills. Some deaf children may have augmented hearing but may not have been fully exposed to an oral language, although they may have acquired the necessary communication skills (*ibid*).

Literature has indicated that deaf children perform well in mathematics when they are educated in inclusive set ups. Studies have also shown that deaf children who use augmentation perform up to above average academically. Literature further indicated that the infirmity model of assessment lead to failure by deaf children academically. Moreover, literature showed that proficiency in Sign language for both teachers and deaf children enables deaf children to perform well academically. The study sought to find if deaf children perform well in mathematics in primary schools. Although literature was not clear on how deaf children were assessed in primary schools, the study aimed at finding out the nature of assessment for deaf children in the primary school. Literature also did not show how deaf children were assessed, especially for their terminal examinations. The study, therefore, investigated how deaf children were assessed in norm-referenced tests. The study also investigated on the language of instruction for deaf children.

2.3.3 Psychosocial successes

The psychosocial successes of deaf children could be perceived as their mental health and wellbeing which could help them maintain friendships, social relationships and interactions with their hearing peers (Batten, Oakes & Alexander, 2013). Studies suggest that the bonds and social interactions could be associated with social wellbeing as factors that could suppress stressors and developmental challenges (Musengi & Chireshe, 2012; Batten, Oakes & Alexander, 2013). Batten et al., (2013) highlighted that closer relationships between deaf children and their hearing peers could increase self-esteem, emotional regulation, successful adjustment to academic issues, and positive attitudes towards their academic studies. Therefore, negative attitudes among hearing peers pose the most significant barrier to the social and educational inclusion of deaf children, and this might affect their ways of interacting and participating with teachers and hearing peers within school settings (Kaputa & Charema, 2017; Alasim, 2018). Chireshe, (2013) conducted a study and revealed that the social and academic acceptance of learners with disabilities had improved as a result of inclusive education while society has changed its attitudes towards children with disabilities in general and those in inclusion in particular, a scenario that may improve self-esteem (Batten et al., 2013) of deaf children in both academic and social spheres. Alasim, (2018)

investigated the participation and interaction of deaf and hard-of-hearing students in inclusion classrooms and demonstrated that there is acceptance of deaf children in regular classes as the study revealed that a regular classroom teacher gave her deaf the opportunity to participate academically when she raised her hand despite her inability to sign. By designing a lesson that was dialogical and inclusive of all children, the teacher aimed at developing confidence and raising the self-esteem of her deaf student (*ibid*). The acceptance of deaf children by mainstream society could be attributed to the fact that children with disabilities have developed social skills resulting in their ability to socialise with all people in the community (Chireshe, 2013). Batten et al., (2013) note that hearing screening introduced in the United Kingdom (UK) has eased early identification and early intervention programmes leading to better communication skills that facilitate deaf children's social interactions with the hearing world. Due to these technological developments in the form of screening techniques, the loop, and cochlear implants, parents have raised their expectations for their deaf children. Thus, due to these academic press, deaf children perform better academically and socially (Alasim, 2018). Antia et al., (2009) also note that the communication of deaf children is affected by the age of identification of deafness, the period of enrolment for intervention and family variables like family involvement in the child's education, awareness of school programmes and academic press, ability and willingness to help in homework and adaptation to the child's deafness. Thus, early identification and early intervention are vital programmes insofar as the development of communication and social skills for deaf children is concerned. Peer relationships give deaf children the chance to implement key life competencies in interpersonal interactions like working together, sharing, assertiveness, helping, or negotiating skills (Batten et al., 2013). Bunch, (2008) posits that children with disabilities demonstrate high levels of academic achievement in inclusive set-ups such that non-deaf children, school staff, and the community realised their capabilities and accepted them while social acceptance could have been a result of inclusion. Although a study by Chireshe, (2011) indicated that teachers, non-deaf peers, and the community had negative attitudes toward children with disabilities both in inclusive and in exclusive settings, Chireshe, (2013) reported that people had developed positive attitudes towards children with disabilities as evidenced by low levels of discrimination and stigmatisation displayed by the society in general and the school in particular. Teachers are developing positive attitudes towards children in inclusive set-ups, possibly due to continuous exposure to them and the realisation of deaf children's capabilities and potentials (Chireshe, 2013).

Studies indicated that social and academic acceptance of deaf children in schools has improved. Studies further showed that acceptance of deaf children enables them to have life competencies which could include academic and social competencies. The study sought to find the relationships between the hearing people in the school and deaf children who were enrolled in the primary school. The study went a step further to investigate the impact of language differences between the hearing people in the school and deaf children.

2.4 Kinds of support deaf children receive at schools

This study discusses the various kinds of support that deaf children experience in mainstream or inclusive schools. These forms of support include legislation and policy, academic, financial, and psychosocial support.

2.4.1 Legislation and policy support

2.4.1.1 International perspectives

The study focuses on the legislation and policy support received by deaf children in the inclusive education of two countries such as the United States of America (USA) and Italy.

All countries should have legislation and policy that promote the principle of equality in educational opportunities (SREOPD, 1993; UNESCO, 1994). The UNESCO, (1994) highlighted that inclusive schools should implement clear and forceful policies related to inclusive education to adequately address the inclusion of deaf children in the mainstream education system. The SREOPD, (1993) further recommended that states should promulgate comprehensive policies that are accepted by both the schools and the communities. In addition, the UN-CRPD, (2006) indicated that states should ensure that deaf children have a right to education. The pieces of legislation and policies regulating the education of deaf children at schools in the United States of America (USA) acknowledged that children with disabilities, which featured among other issues of normalisation and deinstitutionalisation, should be recognised into the enactment of the Education for All Children Act of 1975 and known as the Education for All Handicapped Children Act of 1975 (Dudley-Marling & Burns, 2014). The promulgation of the Public Law 94-142 (PL 94-142) addressed the provision of free education for all children with disabilities and urged all school districts to ensure that all children with disabilities benefit from Individualised Education

Programmes (IEP). Through the IEP, the American Government seeks to ensure that each child with disabilities is offered an education programme that suits his/her particular needs. This concurs with the Jomtien Conference's (1990) assertion that education should focus on the basic learning needs of children with disabilities rather than basic education (Jomtien Conference, 1990).

In 2002, the then President of America, George W. Bush, signed the No Child Left Behind (NCLB) Act (2001), which seeks to support the fundamental right to education for all children in the United States of America (Dudley-Marling & Burns, 2014). As a follow-up to the NCLB, the USA Congress reauthorised the Individuals with Disabilities Education Act (IDEA) in 2004, which focused on two essential programmes namely the Individualised Education Programme (IEP) and the Least Restrictive Environment (LRE) (Dudley-Marling & Burns, 2014). The IDEA ensures that each child with disabilities receives educational programmes suitable for their particular needs so that they develop to their fullest potential through IEP while they learn in environments adapted to suit their specific needs, LRE, to develop to their fullest potential. One of the most important clauses of the IDEA is the issue of accountability (Dudley-Marling & Burns, 2014). Schools are accountable for ensuring that children with disabilities are educated in regular classrooms and, at the same time, they are responsible for the success of these children with the regular classroom curriculum (Hossain, 2014). The UNESCO, (1994) spelt out that a regular school curriculum for inclusive schools should be adaptive and reflective. This ensures that teachers are dedicated to work and that deaf children have access to equal education. The idea of children with disabilities being successful with the regular classroom curriculum may not be compatible with the Jomtien Conference, which stresses the concept of basic learning needs at the expense of primary education (Jomtien Conference, 1990). The needs of learners in the regular classroom may differ from those of children with disabilities. Although the IDEA does not mention inclusive education in its clauses, it stresses that schools are responsible for ensuring that children with disabilities access education in the regular classrooms and that they are successful with the mainstream school curriculum (Hossain, 2014). The clause in the IDEA on assessment mandates regular schools to assess children with disabilities together with 'normal' ones and ensure that they are successful, which is different from the Italian Framework Law 104/1992, which calls for a separate assessment for children with disabilities. Legislation and policy support, therefore, shapes how inclusive education for deaf children may be implemented. The study seeks to find out if inclusive schools

in Zimbabwe are least restrictive for the education of deaf children in mainstream settings. The study further seeks to find out if these schools implemented the IEP.

The essence of Italian legislation and policies supporting deaf children in schools hinges on the principles of social integration and anti-discrimination. This support advocates for the right to and the provision of compulsory education for all children, including children with disabilities. (Italian Democratic Constitution of 1948, Articles 3, 33, 34 and 38; D'Alessio, 2011; UN-CRPD, 2016). The purpose of the Articles was to allow the participation of all citizens in the social, economic, and educational circles to remove the social, economic, and educational barriers (D'Alessio, 2011). Similarly, the Italian Constitution, (1948) does not specify how *Integrazione Scolastica* was to be implemented. In 1971, Law No. 118 was promulgated to improve the education of children with disabilities. Anastasiou, Kauffman and Di Nouvo, (2015) conducted a study and found that Law No. 118/71 was the first law in Italy to talk about inclusive education and the rights of children with disabilities, with its key features being deinstitutionalisation, decentralisation of social services of children with disabilities and anti-discrimination against children with special educational needs. This law was backed and reinforced by policies crafted at ministerial level, namely Policy 227/1975 and Policy 235/1975, and was related to the IDEA's provisions on Least Restrictive Environment (IDEA, 2004; D'Alessio, 2011; Yell, 2012; Anastasiou et al., 2015). Apart from providing for the mainstreaming of children with disabilities, Law No. 118/1971 is viewed as a functionalist approach to the assistance of people with disabilities as it stresses payment benefits, welfare assistance, protection and the humanitarian concerns of the social welfare of people with disabilities who are viewed as devalued and deviating from the norm (D'Alessio, 2011). Law 118/1971 is based on the Charity Model of Disability (D'Alessio, 2011). The Charity Model of Disability may hinder independence; it deprives people with disabilities of their dignity as 'normal' people often view them as receivers of services rather than providers of services just like people without disabilities do (D'Alessio, 2011; Nyangairi, 2016). Legislation and policy support of this nature is based on what Kretzmann and McKnight, (1993) term problems and needs-based provisions for community development. Law 118/1971 was not mainly concerned about methodology and practice of *Integrazione Scolastica* (total inclusion without any exception) (Anastasiou et al., 2015) but about provisions of special services and the funding of these special services; for instance, transport to and from schools for children with disabilities and the removal of infrastructural barriers subject to the availability of funds. The issue of these provisions being

subject to the availability of funds resembles the provisions of the Constitution of Zimbabwe (2013), which sticks to the phrase *within the limits of the available resources*. According to D'Alessio, (2011), the word *Integrazione* does not appear in the text of Law No. 118/1971. A study conducted by D'Alessio, (2011) revealed Law No. 118/71 had a serious loophole of not closing down special schools suggesting that mainstreaming of children with disabilities was not its major concern, leaving room for those who were pro special education to maintain special schools leading to evasion of enrolment of children with exceptionalities in mainstream schools. Law No. 118/1971, Section 28, states that compulsory education must take place in regular and public schools except in severe circumstances that render learning difficult (Anastasiou et al., 2015). Similarly, UNESCO, (1994) says that as much as possible, inclusive education should be the practice except in cases where the nature of disability is so severe that the learner does not benefit from inclusion or where segregation is for the benefit of the learner or other learners. In 1975 Senator Franca Falcucci led a national inquiry on research in inclusion to support *Integrazione Scolastica*. The 1975 Falcucci Document, which was commonly referred to as *Ministero della Pubblica Istruzione*, was the first attempt by Italy to research on *Integrazione Scolastica* (D'Alessio, (2011). The research indicated that challenges to *Integrazione Scolastica* were cultural and social factors rather than the biological conditions of the individual. This suggests that cultural and social factors make learning and social environments restrictive. The *Ministero della Pubblica Istruzione* noted that *Integrazione Scolastica* starts with the transformation of the whole education system, the conceptualisation of the system as well as methodologies of teaching. This sounds more inclined to *Integrazione Scolastica* than the other laws. However, a better law, Law No. 517/1977 was enacted in 1977 and was popular for officially closing down special schools and replaced the term *inserimento* (placement) with the phrase *Integrazione Specialistica*, meaning specialist integration. The Law differs from the Zimbabwean Policy Circular No. 36 which recognises the role of the Principal Psychologist in the placement of children with disabilities in schools in which assessed children have to fit well according to their assessment, that is, children with special educational needs fit into schools according to their special educational needs. Contrary to Zimbabwe's Policy Circular No. 36, the Italian Law No. 517/1977 called for the provision of special educational needs to mainstream schools to enable them to cater for children with exceptionalities. Law No. 517/1977 concurs with the SREOPD (1993) and the UNESCO (1994), which call for schools to be adapted to the

needs of children with exceptionalities and not vice-versa. Such special educational needs include human and material resources, pedagogic methodologies, interdisciplinary and multidisciplinary approaches, individualised learning programmes and psycho-social support services. Moreover, the Law maintained the Medical Model of Disability as the main model that supports the education of children with disabilities, as evidenced by its emphasis on specialised personnel to assist children with disabilities. Under this legislation, the Italian government introduced incapacity benefits for people with disabilities, thereby undermining their capabilities in community participation (D'Alessio, 2011). Some people with disabilities left their jobs to rely on these incapacity benefits. This evinces that the Italian Government subscribes to the Charity Model of Disability. The Charity Model of Disability maintains that people with disabilities are recipients of services rather than equal partners in service provision. To this effect, D'Alessio, (2011) argues that Italy practices *Inserimento Selvaggio*, literally translating to wild integration since they practise integration without changing the learning environment to suit the needs of children with disabilities simultaneously not checking whether or not students with disabilities perform better under integration or in the mainstream schools. *Inserimento Selvaggio* contradicts the principles of inclusion and adjusts schools to meet the needs of children with disabilities (UNESCO, 1994). The Italian Government, like the Zimbabwean Government (Nyangairi, 2016), subscribes to the Charity Model of Disability, hence, it conforms to *Inserimento Selvaggio*. This study investigates whether or not the learning environments suit the needs of deaf children.

In 1992, the Italian Government enacted the Framework Law No. 104 as a follow up to Law No. 517/1977. This improved piece of legislation focused on all the spheres of the life of people with disabilities like social issues, education, infrastructure, and all services necessary for the dignified life of people with disabilities. Section 14 of the new Framework Law championed the removal of all social barriers that hinder the full participation of people with disabilities in all societal activities. The Framework Law No. 104/1992 shifted from the Medical Model of disability to the Sociocultural Model of Disability, as stated under Sections 1, 5, 13, and 14 of the Framework Law 104/1992. Part 3 of the Framework Law 104/1992 focuses on the supplying of provisions for children with disabilities according to the degrees of disability while Section 8 of the same Law calls for structural adjustments to the buildings of individual schools for children with severe-profound disabilities, reversing a clause in Law No. 517/1977 which had closed all the different schools. This may be viewed as the Exclusive Education Model and regression of Law No.

517/1977. This concurs with the UNESCO, (1994), which calls for the provision of special education services to severe-profound cases in individual schools when inclusion is seen to be disadvantaging the deaf child or other children. The opening of different schools, however, could simply revert to the Medical Model of Disability. While the [Zimbabwean] Disabled Persons Act of 1992 has a disability body, the Italian Framework Law No.104 lacks the issues of self-representation and self-advocacy.

Global legislation has shown that deaf children have a right to education. Literature has also spelt out that legislation for all countries should promote equality for all learners. Studies have indicated that deaf children should access education in mainstream schools which should ensure that they are successful. Teaching and learning should focus on basic learning needs rather than basic education. The study sought to find if deaf children had a right to education. Literature did not adequately address the issue of how deaf children would access basic learning needs in primary schools. The study, therefore, investigated the nature of education and how deaf children accessed it at the primary school.

2.4.1.2 African perspective of legislation and policy supports

The study focuses on the law and policy support of deaf children receiving inclusive education in three African countries, the Central African Republic, South Africa, and Zimbabwe.

The legislation and policy in the Central African Republic (CAR) recognise the support of deaf children in inclusive schools. According to the ACPF (2011), 2000 *Loi Portant Statut, Protection et Promotion de la Personne Handicapee*, meaning Law for the protection and promotion of Disabled Persons, is the most critical piece of legislation regulating disability issues in the CAR. According to Title 1, Article (3), of this Law, the State in the CAR is responsible for the controlling and screening of disabilities, transportation of children with disabilities to and from school, sporting education, leisure, employment, training of people with disabilities as well as caring for them. Title 1, Article 6, calls for acquittals, exemptions, subsidies, or discounts for people undertaking issues for people with disabilities. This motivates people to engage in activities for the cause of people with disabilities. This is a unique piece of legislation in that it may inculcate positive attitudes in the activities of people without disabilities for the benefit of people with disabilities. Another essential component of the this law is Title 3, Article (8), which says that

children with disabilities should benefit from specific and respective adaptations in examinations, competitions, integration, or grants to facilitate their schooling (Republique Centrafricaine, 2010). Such adaptations like time allowance and Sign Language for deaf children may be necessary for the examinations of children with disabilities. The study seeks to determine whether or not adaptations for examinations in Sign Language or any other adaptations are being made. Another unique aspect of CAR legislation is the fact that it is everyone's responsibility to facilitate the education of children and youths with disabilities in schools, universities, or other learning institutions. Article 8 urges all service providers in training to make necessary adaptations to ensure that children and youths with disabilities participate freely and independently in academic, cultural, sporting and leisure issues (Republique Centrafricaine, 2010).

Concurring with the idea of everyone participating in the education of children with disabilities is the UNESCO (1994), which encourages the participation of parents, organisations of people with disabilities, and communities in the education of children with disabilities. In line with this provision, Title 2 Article (22) of the CAR legislation urges all architectural designers to design infrastructure that accommodates all persons with disabilities to avoid limitations in mobility. This dovetails with the provisions of the [Zimbabwe] Disabled Persons Act (1992), which states that infrastructural adaptations should be made to ensure that people with disabilities access to all the places they want. The issue of the CAR instructing architectures to design universal buildings concurs with Zimbabwe's Disabled Persons Act, (1992), which empowers the Disability Board to order owners of infrastructure that restricts persons with disabilities to adapt them although no litigation is suggested. According to Chapter 1, Article 26 of the *Loi Portant Statut, Protection et Promotion de la Personne*, education for children and youths with disabilities, is provided for in both mainstream schools and in individual schools with children who go to mainstream schools gaining experience and autonomy from different schools first. Thus, the first educational experiences of children with disabilities take place in selected schools in the CAR. Again, this piece of legislation uniquely allows deaf children to familiarise themselves with Deaf Culture before they are involved in another culture, allowing them to go to the mainstream with a language. Chapter 1: Title 3, Article (28), spells out that when mainstream schools enrol children with disabilities, they are provided with specialist teachers and other resources that are adapted to the needs of the enrolled pupils.

In contrast, school authorities should facilitate the adaptation of their infrastructure. The study seeks to find out if inclusive schools are provided with all the necessary resources, be they human, material, or financial resources. The study also seeks to establish if the infrastructure is suitable for the education of deaf children.

The Zimbabwean legislation and policy on inclusive education acknowledged that children with disabilities have a right to State-funded education. With law and policy support, inclusive education may be successful (The Constitution of Zimbabwe [Amendment Act No. 20], 2013).

In 1980, the new Zimbabwean Government introduced mass and free education. In 1987, the government promulgated the Education Act, (1987) [Chapter 25:04] which affords the right to all pupils to attend schools nearest their homes (UNESCO, 1994), which would translate to children with exceptionalities attending mainstream schools nearest to their homes. This is consistent with the UNESCO's (1994) thrust which states that children with disabilities should attend schools nearest to their homes, schools that they could have attended if they had no disability. Section 4, Subsection 2(b) of the Education Act, (1987) further states that there should be no discrimination by imposing onerous terms and conditions in the admission of children on the ground of race, tribe, origin, ethnicity, political opinions, colour, creed or gender. However, discrimination on the basis of disability is not mentioned. This may give room for those who are pro exclusion to proceed in practising it. As such, this is viewed as inadequate and nonspecific in terms of catering for inclusive educational practices considering that the Act includes people who are severely marginalised (CIET, 1999). In May 2013, the new Constitution of Zimbabwe [Amendment Act No. 20] (2013). Chapter one, Section 27, Subsection 1, paragraph (a), says that the State must ensure that children access their right to State-funded primary education. Chapter 4, Section 75, Subsection 1(a) says that children have a right to state-funded education and adds an element of adult education. The aspect of adult education is relevant to deaf children who enrol late for learning. Section 83, paragraph (b) of the Zimbabwean Constitution further specifies that the State should ensure that children with disabilities have a right to State-funded education, including training where necessary. Therefore, education for the deaf is supported by this piece of legislation. Sibanda (2018), however, blames the Constitution of Zimbabwe (2013) for indicating that provisions for the education of children with disabilities are made 'within the limits of the resources available to it' as this suggests that political leaders are not obliged to supply the provisions as they may simply

point at the limits of available resources as the cause of failure to adequately support inclusive schools with the necessary funds for the inclusion of deaf children. Although the title of Section 83 is Right of Persons with Disabilities, the two common words, 'right' and 'entitled,' that are commonly used in the Constitution of Zimbabwe's subsections, in terms rights, have not been used throughout the section. Chapter 1, Section 6, paragraph 1 of the Zimbabwean Constitution recognises Sign Language as an official language. Moreover, paragraph 3(a) of this section calls for the Government of Zimbabwe to ensure that all the officially recognised languages in Zimbabwe are treated equally. Also important is Chapter 1, Subsection 3(b), which calls for the Government of Zimbabwe at all levels to take into account the language of preferences for culturally minority groups who may be affected by communication. The issue of language preference is also supported by the SREOPD (1993), UNESCO, (1994), and the UN-CRPD, (2006). This is consolidated by Section 63 of the Constitution, paragraphs (a) and (b), which state that every citizen has a right to use a language of their choice as well as to participate in the cultural life of their own, of which language is part

Musengi et al., (2012) and Musengi and Chireshe, (2012), however, found that teachers prefer to use spoken languages when teaching deaf children, while Gudyanga et al., (2014) noted that teachers preferred to use total communication to teach deaf children. Theoretically, this is a good piece of legislation. In this case, deaf children are covered in terms of their education, language, and culture. The study seeks to find out if Sign Language is considered a language as well as an expression of preference for deaf children. The right to education is supported by several policy documents like UNESCO, (1994), Convention on the Rights of Persons with Disabilities, (2006), or Convention on the Rights of the Child, (1989). This study seeks to find out if these pieces of legislation fully support deaf children in Zimbabwe by recognising their right to education and language. Some sections of the Zimbabwean Constitution that provides for the constitutional right to education and the Education Act, (1987) typify the law that represent the interests of people with disabilities (CIET, 1999). The word 'every' as used in some sections of the Constitution of Zimbabwe and the Education Act (1987), without explicitly mentioning 'children with disabilities,' is deemed to apply to children with disabilities (UN-CRPD, 2006).

Studies have shown that legislative support has contributed to an increase in the enrolment of deaf learners in mainstream schools. According to Alasim, (2018), increased registration of deaf

children in the mainstream schools is attributed to the pronouncement of legislation underpinning inclusive education for deaf children. Evidently, education for the deaf was pronounced with the enactment of the Individuals with Disabilities Education Act of 2004 (IDEA) in the USA and the world over (*ibid*). The main aim of IDEA, (2004), Section 504, was to provide social skills and relevant and appropriate education to learners with disabilities (Colker, 2008; U.S. Department of Education, 2010). According to Alasim, (2018), the critical goal of IDEA, (2004) is to provide all educational needs and support for children with disabilities in the mainstream education system.

Like global literature, regional literature shows that deaf children have a right to education as provided by world conventions and local legislation. Literature also shows that states have a responsibility to educate deaf children. The language of instruction for deaf children is Sign language and there are adaptations for examinations. Literature did not reveal if legislation and conventions were effectively implemented to promote the education of deaf children in primary schools. The study, therefore, sought to find if pieces of legislation and world conventions were implemented to support the education of deaf children in the primary school.

2.5 Support services for deaf children

This section reviews literature related to support services deaf children get in primary schools.

2.5.1 Academic support

Deaf children have special educational needs that the mainstream curriculum may not meet. According to the UNESCO, (1994) the curriculum implemented in inclusive schools should be adapted to suit the needs of children with disabilities, not the reverse. The curriculum for inclusive schools should be flexible and adaptive, allowing for additions (SREOPD, 1993). Adoyo, (2007) concurs, adding that the curriculum for deaf children should be flexible enough to meet the diverse needs of children in terms of assessment, content to be learned, pedagogy, and communication. It is, however, difficult to implement the mainstream curriculum in an inclusive set-up due to high teacher-pupil ratios instigated by the provision of free primary education for all children (Adoyo, 2007; Musengi & Chireshe, 2012). Since schools are ranked according to their pass rates, mainstream schools do not want deaf children in their schools and may not have time to cater for their diverse needs as they race to complete the syllabus for examination purposes (Adoyo, 2007; Musengi & Chireshe, 2012). Musengi et al., (2012) claim that deaf children lag behind their

hearing peers, especially when their language of instruction and preference is not used. Although Aoyo, (2007), Musengi and Chireshe, (2012), Thwala, (2015), and Musengi et al., (2012) found out that teachers use spoken languages to teach deaf children, in contravention of Director's Circular No. 2 of 2001 which directs schools to use Sign Language when teaching deaf children, the Constitution of Zimbabwe (Amendment Act No. 20) of 2013) urges the government at all levels to take into account the languages of preference for minority cultural groups that may be affected by communication. In this case, deaf children in Zimbabwean mainstream schools are supported, in terms of language, by the Constitution and the Director's Circular No. 2 of 2001. Musengi and Chireshe, (2012) also note that deaf children in Zimbabwe are identified late; hence, they continue to lag behind their non-deaf peers in terms of language acquisition and concept formation. The DZT, (2013) found that deaf children attend school later than their non-deaf peers and are forced to sit their grade Seven ZIMSEC examinations before they are even ready for them. Although Musengi and Chireshe, (2012) and DZT, (2013) posit that deaf children are identified late, the SREOPD, (1993) says that inclusive schools should pay attention to very young children with disabilities and establish pre-schools for them. The CIET, (1999) claims that there are no human, material, and financial resources to implement inclusive education at the Early Childhood Education (ECD) level. The State should ensure the provision of resources and quality training for teachers and support staff to enhance the teaching and learning of deaf children in mainstream settings, including at ECD level (CIET, 1999; SREOPD, 1993). Teachers are instrumental in the management of the teaching and learning deaf children. Thus, the curriculum for inclusive schools for deaf children should accommodate changes that can be made so that it suits learners, a process that requires the services of skilled human resources in the form of specialist and itinerant teachers who are currently in short supply. (Musengi et al., 2012; Mukhopadhyay & Musengi, 2012; Musengi & Chireshe, 2012; Chireshe, 2013; Sibanda, 2018). This is consistent with the UNESCO, (1994) which pronounces that the curriculum for inclusive schools should allow for additional instructions to accommodate children with disabilities using the mainstream curriculum, rather than a different one. Contrary to this assertion, Aoyo, (2007) found that schools use the rigid mainstream school curriculum, without enough room for flexibility and adaptations. Moreover, the curriculum is wide and demanding, with a limited timeframe to complete it, considering the learning process of deaf children (*ibid*). The CIET, (1999) supports this as it found that despite the Chief Education Officer's Circular No. 3 of 1989 emphasising the use of an adaptive curriculum,

most teachers still use the rigid mainstream curriculum which is adaptive, resulting in the poor academic performance of deaf children. This suggests that, in terms of legislation and policy, deaf children are well supported, but the problem lies with implantation (Charema, 2009; Kaputa & Charema, 2017). To sufficiently support deaf children in mainstream classrooms, Adoyo, (2007) and the UN-CRPD, (2006) say that the curriculum for deaf children should consider their origin, values, and cultural lifestyles. In a study carried out in Zimbabwe by Musengi and Chireshe, (2012), mainstream teachers lament mainstream syllabi that do not fully meet the needs of deaf children in the mainstream schools and expressed their happiness in seeing deaf children being taught in self-contained classrooms by specialist teachers, a finding that supports the assertion of Charema, (2009) and Kaputa and Charema, (2017) that there are good policy documents the world over in general and Zimbabwe in particular, but they are not effectively implemented.

The progress of deaf children needs to be monitored closely to ensure that they realise their goals. IDEA, (2004) and Alasim, (2018) posits that the performance of deaf children is measured using their Individualised Educational Plan (IEP), that is, what they have achieved in the set target(s) in the IEP. An IEP is an educational support for deaf children, and it specifies the appropriate educational placement, goals to be completed, and when they should be performed (Roppolo, 2016). A multidisciplinary team comprising specialists like occupational therapists, speech therapists, medical doctors, parents, and teachers, among others, should design an IEP (*ibid*). Thus, the multidisciplinary approach is crucial in the implementation of the IEP support service in the inclusion of deaf children in the mainstream education system. Therefore, one of the support services given to deaf children is the implementation of the IEP. Assessment and achievement in institutions are based on IEP to determine whether or not the pupil remains in the institution or is moved to the mainstream education system, with Sign Language support being provided by Sign Language interpreters (Alasim, 2018).

Deaf children are offered early identification and early intervention services leading to increased enrolment of deaf children in the mainstream education system. Registration for deaf students continues to rise due to early identification and early intervention programmes (Antia, et al., 2009). When deafness has been identified early, intervention strategies may be taken, including the use of hearing aids and communication (*ibid*). Alasim (2018), however, argues that increased enrolment of deaf children in the mainstream education system is attributed to financial issues

where parents are evading exorbitant fees charged by individual schools, expectations of parents for their children, which may be similar to those of hearing pupils or technological advancements like cochlear implants and other forms of hearing aids.

Although schools used rigid mainstream curriculum, literature has shown that curriculum for inclusive schools should be flexible and adaptive. Literature reveals that it is difficult to implement mainstream curriculum due limited time allocated to each subject. Studies show that schools are ranked according to pass rates, hence, schools do not want to enrol deaf children assuming they lower their pass rates. Literature has also shown that deaf children are identified late as a result of which they attend school late. Studies reveal that deaf children should be assessed using IEP. The study investigated on curriculum that was used to teach deaf children. The study also investigated on the age at which deaf children are enrolled. Moreover, the study investigated on how deaf children were assessed.

2.5.2 Psychosocial support

Psychosocial support is mostly channelled through communication, of which language is the cornerstone. The UNESCO, (1994) posits that schools should consider individual differences and situations and insist that Sign Language for the deaf should be used for their communication and ensure that all deaf children access education in their national Sign Languages. The SREOPD, (1993) urges states to consider the use of Sign Language in the teaching and learning of deaf children as well as in their families and communities. Sign Language interpretation services should be availed to support deaf children in communicating with non-deaf people (SREOPD, 1993; Musengi et al., 2012; Musengi & Chireshe, 2012). Musengi and Chireshe, (2012) noted that there are non-deaf children who have an interest in signing to help deaf children communicate with teachers. The UN-CRPD, (2006), under its Article 24 on Education, urges countries to educate deaf children in Sign Language so that they benefit the most out of this education. The Constitution of Zimbabwe (Amendment Act No. 20), (2013), Section 6, Subsection 1, prescribes Sign Language as one of the sixteen official languages to be used in Zimbabwe. Paragraph 3(a) calls for all official languages in Zimbabwe to be treated equitably while Subsection 3(b) calls for the State, all State institutions and all State agencies to consider language preferences (SREOPD, 1993; UNESCO, 1994; UN-CRPD, 2006) for people who are disadvantaged by governmental measures and communication. Section 6, Subsection 4, further says that the government must promote and

advance the use of all official languages, including Sign Language, as well as creating conditions for the development of such communications. The Constitution of Zimbabwe Amendment Act No. 20 of 2013, Section 22, Subsection 2, says that the State, within the limits of the resources available to it, should help children with disabilities to realise their full potential and reduce the disadvantages they encounter in the community through the development of psychosocial programmes that suit their lives, considering their specific requirements, encouraging the development and use of Sign Language for communication purposes and the setting up of social organisations aimed at improving the quality of their lives. It is the development of social organisations and the promotion of Sign Language that is likely to promote emotional and academic development. Under Section 83, paragraphs (a), (b), (c) and (d) on the Rights of Persons with Disabilities, the Constitution of Zimbabwe, Amendment Act (No. 20) (2013) states that the State, within the limits of the resources available to it, and its agencies, should enable deaf children to be self-reliant, to live with their families and fully participate in social, creative and recreational activities; protect deaf children from all forms of abuse as well as enabling them to access psychosocial and functional treatment. These are critical support mechanisms that deaf children should access. Unfortunately, the implementation of provisions for deaf children in Zimbabwe leaves a lot to be desired (Charema, 2009; Kaputa & Charema, 2017); hence, they may not realise these psychosocial support systems. According to Kaputa and Charema, (2017), the issue of lack of implementation of provisions to inclusive education may be addressed by assigning tasks to individuals or by creating groups and assigning them tasks, making it easier to monitor implementation. Another challenge lies in how the provisions are stated, that is, the phrase ‘within the limits of resources available to the State’ exonerates the State from being answerable (Sibanda, 2018). The psychosocial support systems enable deaf children to attain emotional development. The use of Sign Language in the teaching and learning of deaf children is a necessary support service for the emotional and educational development of deaf children (Adoyo, 2007; Antia et al., 2009; Musengi et al., 2012; Musengi & Chireshe, 2012; Alasim, 2018). Therefore, language support is vital in the education of deaf children in mainstream classes. Lack of language may affect deaf children’s cognitive development, emotional growth, and may lead to loneliness.

Although there are cases of exclusion and segregation in the USA, there are calls for at least social inclusion to enhance the mixing and sharing of social issues between deaf and non-deaf children (Durdley-Marling & Burns, 2014). Durdley-Marling and Burns, (2014:3) quote the words of

Edward Stullken who wrote in the 1950s that, “in general, it is best not to segregate any individual by placement in a special group, if he may receive as good or better training in a normal group of pupils.” This quotation supports the principle of inclusion for the social, physical, and cognitive development of children with disabilities. Durdley-Marling and Burns, (2014) are worried about the overrepresentation of minority learners in inclusive classes, positing that special education in its current form is obsolete and unjustifiable. The thrust is on children with disabilities mixing and sharing ideas with their counterparts without disabilities. With deaf children indicating that their critical challenge in mainstream classes is communication, where non-deaf children and teachers cannot sign while they cannot speak (Musengi & Chireshe, 2012; DZT, 2013), both social and full-time inclusion may not be active. Durdley-Marling and Burns, (2014) lament that although there are these calls for the inclusion of children with disabilities in regular education, these children continue to be relegated in special classes. This study sets out to investigate the nature of integration in primary schools in Zimbabwe. The findings of a survey carried out in Zimbabwe by Musengi and Chireshe (2012), however, indicated that deaf students socialise freely with their hearing counterparts although their academic performance was lower than that of their hearing counterparts. Although deaf students mix freely with their hearing peers, regular classroom teachers opt for self-contained classes for deaf children (*ibid*). This is against the principle of inclusion, human rights issues, and, indeed, the views of Edward Stullken (UNESCO, 1994; UN-CRPD, 2006; Durdley-Marling & Burns, 2014). This study investigates the nature of inclusion and acceptance of deaf children in regular classes in inclusive schools in Zimbabwe by both regular classroom teachers and hearing pupils.

Gudyanga et al., (2014) note the importance of language, even total communication, in the development of intelligence and, eventually, academic performance of deaf children, which may as well lead to social information as crucial psychosocial support for deaf children. There is a need to attract the attention of the deaf learner by using cues like touch and teach while directly facing the learner, speaking slowly but naturally, and without exaggerating lip movements (Mpofu & Chimhenga, 2013). Deaf children need more time to complete their tasks (Mpofu & Chimhenga, 2013; Alasim, 2018), a situation that needs tolerance from teachers, hearing peers, and the entire school community. This often leads to deaf children lagging behind their hearing peers in terms of academic performance, confidence, and self-esteem (Antia, et al., 2009; Mpofu & Chimhenga, 2013), leading to lack of self-actualisation. This often reduces social contacts and cause social

isolation or separateness, which lead to poor academic performance. In a study conducted in Zimbabwe by Musengi and Chireshe, (2012), deaf children indicated that their key challenge in social and academic spheres was communication (Constitution of Zimbabwe, [Amendment Act No. 20] 2013; DZT, 2013), since they were not able to communicate orally while teachers and hearing peers could not sign although some hearing peers were eager to sign and help them communicate with teachers and other peers who could not sign. This provision is called for by the Constitution of Zimbabwe [Amendment Act No. 20] (2013). Deaf children further indicated that their communication challenges were eased when specialist teachers had to sign to those who could not sign. However, they were not readily available for their rescue due to other commitments (Musengi & Chireshe, 2012). Regardless of these communication challenges, deaf children indicated that they had many friends, both hearing and deaf, and that they were benefitting from them in social settings and various sporting activities (Musengi & Chireshe, 2012; Mukhopadhyay & Musengi, 2012). The issue that deaf children have many friends was echoed by teachers, although none of the deaf children had leadership delegated to them by the school or their teachers (Musengi & Chireshe, 2012). This study investigates communication support given to deaf children in inclusive regular classes as well as the interpersonal relationships between deaf and non-deaf children.

Deaf children in regular schools should be supported emotionally, although regular classroom teachers have negative attitudes towards them and their education (Alasim, 2018). In Italy, however, the opinions of teachers are either positive or mixed (Canevaro, D'Alonzo, Ianes & Caldina, 2011). In the USA, some teachers and superintendents suggest that children with disabilities should be educated in segregated institutions owing to the negative attitudes they encounter in regular classrooms (Dudley-Marling & Burns, 2014). The UN-CRPD, (2006) calls on countries to ensure that all children with disabilities are involved in all the activities of the community. This is tantamount to inviting communities to have positive attitudes towards children with disabilities so that they communally participate in all activities. In line with this, a study carried out in Zimbabwe by Chireshe, (2013) found that schools and communities have moved from negative attitudes towards accommodative ones. Communities accept children with disabilities in social, economic, and academic activities (Chireshe, 2013). However, a study carried out in Saudi Arabia by Alasim, (2018) found that the despising attitudes of regular classroom teachers influenced the attitudes of hearing learners towards deaf children. This reduces interaction

and communication between the two groups and deaf learners' participation is reduced as they interact in groups that involve hearing peers (Alasim, 2018). Thus, the attitudes of non-deaf children towards deaf children may be influenced by Albert Bandura's Social Learning Theory. Those who have positive attitudes engage deaf children in-class activities, thereby improving hearing children's awareness of Sign Language and deafness (*ibid.* Apart from having negative attitudes towards deaf children and their education, teachers have low expectations for deaf children in their learning, which may result in them learning less than their peers without disabilities; or they may be given sub-standard learning content (Leigh, Ching, Crowe, Cupples, Marnane, & Seeto, 2015). Contrary to these assertions, a study carried out in Zimbabwe by Chireshe, (2013) found that schools and communities had changed their attitudes towards children with disabilities as shown by their positive emotional support, acceptance, and the involvement of children with disabilities in all activities. The study aims at investigating the attitudes and expectations of regular classroom teachers towards deaf children in inclusion.

There is a cyclic relationship between disability and poverty (Leigh, et al., 2015). This vicious circle of poverty and disability depicts poverty as the driver and cause of disability, which in turn leads to social vulnerability which perpetuates poverty and vulnerability (*ibid.*) It is this social vulnerability that may makes children with disabilities to be withdrawn, isolated, discriminated against, prejudiced or stereotyped. Children with disabilities may not only experience low chances of attending school. They may also experience lower chances of accessing health delivery services, which may lead to increased poverty and abuse (Leigh et al., 2015). Palmer, (2011) defines poverty as an individual's lack of capability to convert needs into commodities that the individual needs for their wellbeing. A disability may limit an individual's abilities to translate needs into commodities (Palmer, 2011). Thus, deaf children may not have the capacity to turn requirements into products they need for their survival, resulting in being taken advantage of by those without disabilities or being considered as receivers of services that cannot, at any one moment, provide services. The capability of children with disabilities to attain certain levels of wellbeing, such as social relationships, interaction, participation, or academic excellence, may be limited by segregation, discrimination, stereotyping, and social prejudices (Palmer, 2011). A qualitative study conducted in New Zealand found that children with disabilities had no social networks of friends and acquaintances (Palmer, 2011). Segregation, discrimination, stereotyping, or prejudices could

come from regular classroom teachers, hearing pupils, the entire school community, or society at large (Alasim, 2018).

Nonetheless, a study by Hadjikakou et al., (2008) found that deaf children preferred socialising with hearing peers their parents. In concurrence, Musengi and Chireshe, (2012) found that deaf children had many hearing friends. This study concurs with these findings as it seeks to investigate the deaf children's participation in social interactions in inclusive settings.

Children with disabilities, like any other children, need and have a right to attention, protection, care and stimulation (The Africa Charter on the Rights and Welfare of the Child, (1990); Hanass-Hancock, 2014). Due to the nature of their needs, deaf children need an extra budget, increased requirements, and accommodation to cater for their unique needs (*ibid*). Parenting styles, as regards attachment, may enable the child to develop an identity and a sense of security, love, and affection (Hanass-Hancock, 2014). Children with disabilities may, however, lack adequate love, care, emotional and social support due to other people's negative attitudes towards disability or model of disability to which parents and society subscribe, negligence, or lack of understanding of the needs of children with disabilities (*ibid*). Children with disabilities may be affected by myths, stigma, and beliefs attached to disability (Hanass-Hancock, 2014; Sibanda, 2018). Invalidity may affect one's emotional, physical, and intellectual development, and these are instrumental in the development of self-image and self-identity (Hanass-Hancock, 2014). These issues often result in anxiety and social restrictions in opportunities that could lead to the independent lives of children with disabilities (*ibid*). They also cause social isolation, stress, low self-esteem, and exclusion as well as low participation in teaching and learning encounters (Hanass-Hancock, 2014). Hanass-Hancock, (2014) noted that children with disabilities have limited chances for environmental exploration because of their disability and the limitations in the environment (UNICEF, 2005). Children with disabilities often have limited social contacts and are involved in fewer extracurricular activities as compared to their peers without disabilities (Montie & Aberly, 2011, in Hanass-Hancock, 2014). The study is bent on investigating the psychosocial support availed to deaf children in regular classrooms in Zimbabwe.

On one hand, studies reveal that deaf children should be supported emotionally. Deaf children should be accorded social inclusion to enable language and emotional development. Studies reveal

that the thrust of social integration is to enable deaf children to mix and share ideas with their hearing counterparts. On the other hand, literature reveals that deaf children want to socialise on their own. The study sought to investigate social inclusion of deaf children. Literature did not adequately show reasons for deaf children to social on their own. The study therefore, investigated on the reason why deaf children wanted to socialise on their own.

2.5.3 Financial support

Deaf children need financial support to pay for their school fees, stationery, uniforms, or assistive devices. The SREOPD, (1993) asserts that it is the State's responsibility to avail funds that ensure the availability of support services and assistive devices in line with the individual needs of children, which facilitates their independence (Constitution of Zimbabwe [Amendment Act No. 20], 2013). UNESCO, (1994) stresses that developing inclusive schools that manage the diverse needs of children require adequate financial allocation. According to the SREOPD, (1993), states should include disability issues in their budgetary allocations and may even establish disability development funds to support the welfare of children with disabilities. Mbibeh, (2013) conducted a study on the implementation of inclusive education in Cameroon. Evidence from the Cameroon Baptist Convention Health Board revealed that low budgetary allocations from the State did not allow the procurement of resources that adequately meet the needs of each child (Mbibeh, 2013). Similarly, Chimhenga's (2016) study found that schools lack funds to procure material resources like Sign Language dictionaries, computers, and other teaching and learning aids. Another study conducted by Tshifura, (2012) found that schools lacked financial resources; hence, they were not able to procure resources to implement inclusive education effectively. Gubbels, Coppens and de Wolf, (2017) carried out a study and found that the cost of inclusive education increased in the Netherlands and other countries, especially considering that the numbers of students enrolling for inclusive education are tremendously increased. This possibly affects the countries' budgetary allocations for inclusive education. This partly explains why most countries are failing to meet the budgetary requirements for inclusive education (*ibid*). Similarly, the Constitution of Zimbabwe affords every citizen of Zimbabwe and every permanent resident of Zimbabwe the right to State-funded basic education and children with disabilities also have a right to State-funded education and training, within the limits of the resources available (Constitution of Zimbabwe [Amendment Act No. 20], 2013). Chimhenga, (2016) also revealed that financial limitations impeded the

successful implementation of inclusive education. In concurrence, Mandina's (2013) study revealed that budgetary limitations on the part of MoPSE and schools' responsible authorities hampered the implantation of inclusive education in Zimbabwe. Chireshe, (2013) also revealed that budgetary allocations for both regular and inclusive education do not adequately support the procurement of the resources required to meet learning needs. Although inclusive education is supported financially, the budgetary allocations earmarked for it, mostly in developing countries, is limited, calling on policy to play a role in shaping the financing of inclusive education (Charema, 2010). The CIET, (1999) concurs, noting the existence of a per capita grant for all children in schools as well as a government education grant managed by the Social Welfare Department, for every child with disabilities in schools. Nonetheless, parents lamented that the money was not enough for boarding schools, which offered better academic services. Contrary, the DZT, (2013), claims that parents do not pay school fees for deaf children and for those who are enrolled at special schools; parents are neglecting the children as evidenced by their lack of visits, lack of payment of school fees and low expectations as evidenced by not even asking for their children's results and school reports. These parental attitudes are attributed to sociocultural issues. A study by Mwangi and Orodho, (2014) found that the attitudes exhibited by parents towards their children were influenced by the cultural beliefs and values that explain the perceived causes of disability, which include ancestral and family sins. In Zimbabwe, the causes of disability are attributed to the anger of family spirits, witchcraft as well as family sins which may have led to the shunning, blaming, and discrimination of children with disabilities (Sibanda, 2018). Such scenarios cause children with disabilities to be kept at home, made to attend schools late, or sent to special schools (*ibid*). Non-Governmental Organisations also assist with school fees for children with disabilities (*ibid*). Apart from funding in the form of school fees, the CIET, (1999) notes that children with disabilities rely on the Social Welfare Department for the procurement of assistive devices, a service that is mostly delayed. Theoretically, deaf children's academic welfare in Zimbabwe is well funded. The study seeks to find out if deaf children's education is funded in Zimbabwe.

Literature reveals that it is the responsibility of the state to fund the education of deaf children. However, studies have shown that states have budgetary constraints to meet the rising cost of deaf children due to increasing numbers of deaf children. The study aimed at finding if the education of deaf children in primary schools was funded by the state. The study further investigated on who funded the education of deaf children schools since the government had financial limitations.

2.6 Availability and adequacy of resources for deaf children in primary schools

The availability and suitability of support given to deaf children are essential in inclusive education. The available literature has demonstrated that the relevance of Teaching and Learning Resources (TLR) for deaf children is vital as it helps them to enhance the efficiency of the academic system and conceptualisation (Okongo, Ngao, Rop & Nyongesa, 2015). The adequacy of resources encompasses both the required quality and quantity of the needed human, material, or financial resources (Okongo, Ngao, Rop & Nyongesa, 2015). The adequacy of TLR propagates a cost-effective and efficient academic system (*ibid*). This study emphasises the need to avail various resources, including material, human, infrastructural, and curricular resources.

2.6.1 Material resources

Apparently, the successful implementation of the inclusion of deaf children in the mainstream education system requires adequate material resources. Alasim, (2018) indicates that some deaf children use common hearing aids, the Behind the Ear (BTE), In-the-Ear (ITE) or body worn hearing aids, while others use cochlear implants, the Frequency Modulation (FM) system, and the loop. Hadjidakou et al., (2008) conducted an investigation and found that the use of the loop and FM system efficiently reduced the effects of ambient noise, which gives them an edge over other types of hearing aids such as the behind-the-ear or body-worn hearing aids. It was important to assist them in the early identification of the disability and early intervention as well as in amplifying the sound (Hadjidakou et al., 2008). Besides, Musengi and Chireshe's (2012) study indicated that deaf children in inclusive set-ups used hearing aids. Apart from being of poor quality, the hearing aids were reportedly stigmatising since they were body-worn and conspicuous from a distance, resulting in some deaf children sometimes removing them during school time (Musengi & Chireshe, 2012). Xie et al., (2014) observed that the use of hearing aids improved communication and social and academic participation. A study conducted by Xie et al., (2014) found that deaf children who were using hearing aids such as cochlear implants registered significant improvements in communication, interpersonal relationships with both hearing and deaf peers, and daily living skills. However, it was much easier for them to communicate on a one-on-one basis than in large groups. Mpofo and Chimhenga, (2013), however, noted that since hearing aids had a hearing range, teachers should take note of that by reserving seats within the hearing range for deaf children. Other hearing aids, like the behind-the-ear, the body-worn or the

in-the-ear had a disadvantage of picking all the sounds including unnecessary ones, some of which may be irritating to the user, unlike the FM system and the induction loop which transmitted and received sounds at set frequencies (*ibid*). Gudyanga et al., (2014) found that there were noise levels that were tolerated above which deaf students using hearing aids were affected, especially in classrooms that were not acoustically treated. These augmentations are important in aural-oral environments. A study conducted in Zimbabwe by Sibanda, (2018), however, revealed that there is a lack of technological augmentative devices. Apart from hearing aids, deaf children may also need computers for writing notes as well as for improving their self-expression in writing (Hadjikakou et al., 2008). Sibanda, (2018) also noted the lack of Information and Communication Technology (ICT) hardware and software for the implementation of inclusive education in Zimbabwe. The use of ICT in the teaching and learning of deaf children stimulates effective learning (*ibid*). Observations by Chimhenga, (2016) in Botswana reveal that computer laboratories for children with disabilities were equipped with outdated and non-functional hardware and software because they were found out of the country with technicians for these computers also based outside the country. The lack of these technological devices is attributed to a lack of funding or a low budget for inclusive education (Chimhenga, 2016; Kaputa & Charema, 2017; Sibanda, 2018). Furthermore, studies conducted by Musengi et al., (2012), Musengi and Chireshe, (2012), Chireshe, (2013), Chimhenga, (2016), and Sibanda, (2018) indicated that successful implementation of inclusive education is affected by lack of skilled human resources. This, therefore, suggests that even if technological devices were available, their use was going to be affected by the lack of skilled human resources. For instance, Musengi and Chireshe, (2012), found that teachers indicated that once deaf children were provided with hearing aids, they proceeded to teach them like any other pupil in their classrooms though they were not sure as to whether or not they were benefiting from the hearing aids. The idea of simply providing hearing aids to deaf children suggests that teachers merely gave the hearing aids to deaf children without bothering to assist them in fitting or adjusting the gadgets to individual levels that maximised augmentation, a sign of lack of know-how on the part of the teachers. Again, the idea of teaching them like any other pupil without knowing how they benefited indicates teachers' lack of knowledge on hearing aids. Sibanda, (2018) sums the actions of these teachers by saying that they had not undergone Deaf Studies; hence, they lacked in-depth knowledge of and insight into the philosophy of teaching deaf children. The UNESCO, (1994) asserts that during pre-service training, trainee teachers

should be oriented to Deaf Studies and the gadgets that are used for teaching deaf children. In a study by Musengi and Chireshe, (2012), teachers indicated that they simply provided deaf children with hearing aids as they were uncertain as to how deaf children benefited from them, a finding which shows that mainstream teachers were not oriented to Deaf Studies and the gadgets used in the teaching and learning of deaf children. Notwithstanding the lack of technological devices in schools, the UN-CRPD, (2006) recommended that countries should promote and encourage the use of technological devices in addressing all aspects of the lives of children with disabilities, be it in the school or in the community. Implementing the UN-CRPD's (2006) views could be hampered by negative attitudes from policymakers and implementers (Kaputa & Charema, 2017; Sibanda, 2018).

The successful education of deaf children in inclusive schools needs the availability of mirrors and textbooks. Mirrors are useful in teaching deaf children speech in primary schools (Musengi & Chireshe, 2012). Musengi et al., (2012) aver that the use of mirrors for speech training reveals that teachers were using aural-oral communication, which is a sign of conservatism. However, Musengi and Chireshe, (2012) indicated that mirrors for speech training were in short supply. Apart from mirrors, Chimhenga, (2016) noted that there was a shortage of resource materials like textbooks for inclusive education and Sign Language dictionaries. Aro and Ahonen, (2011) also stated that there was a shortage of books and other instructional materials for children with disabilities. Tshifura, (2012) highlighted the need for material resources needed to meet the individual needs of children, which, however, were not available in schools due to 'shoestring budgets' (Kaputa & Charema, 2017). Chimhenga, (2016) revealed that resource allocation in inclusive schools was critically low. Aro and Ahonen, (2011) found that a shortage of material resources like Sign Language dictionaries, assistive devices and instructional materials impeded the successful implementation of inclusive education in schools. Johnstone and Chapman, (2009) found that a lack of material resources hampers the successful implementation of inclusive education. Musengi and Chireshe, (2012) observed that schools lack material resources like mirrors for speech training, hearing aids, which are either inadequate or malfunctioning, infrastructure compatible with deaf education, and Sign Language dictionaries. Lack of infrastructure like classrooms often leads to congestion in classrooms as the school may not have alternative rooms to accommodate children. This is often compounded by the scarcity of specialist teachers (Musengi & Chireshe, 2012; Chimhenga, 2016) as deaf children need to be allotted to classrooms with specialist teachers.

Research carried out in Zimbabwe indicates that lack of material resources hampers the smooth implementation of inclusive education (Chireshe, 2011; Mavundukure & Nyamande, 2012; Musengi & Chireshe, 2012).

Studies have shown that the education of deaf children in primary schools needs adequate material resources. These material resources include hearing aids, mirrors, Sign language dictionaries and textbooks. The study, therefore, sought to find if material resources for the education of deaf children in primary schools were adequate. Furthermore, the study investigated on the types and quality of the available resources.

2.6.2 Human resources

Inclusive schools enrolling deaf children should be equipped with qualified specialist human resources such as audiologists, specialist teachers, itinerant teachers, Sign Language interpreters, mainstream teachers, speech therapists, and support staff. Musengi and Chireshe, (2012) posit that audiologists are responsible for the assessment of deaf children's hearing loss. There is a lack of trained audiologists in Zimbabwe (*ibid*). A study carried out in New Zealand by Esera, (2008) indicates that support staff is a key sect of workers in the education of deaf children. The findings from Esera's (2008) study reveal that support staff was important to deaf children as they were providing in-class assistance which made them understand their daily work when they had challenges. Although the findings from CIET, (1999), Musengi and Chireshe, (2012), Musengi et al., (2012), and Thwala, (2015), indicate that teachers, including specialist teachers, were not able to sign, support staff could sign well, could communicate well with deaf children in inclusive settings and could interpret learning content in Sign Language (Esera, 2008). However, the Italian scenario depicts challenges in collaboration where the general education teachers heaped the entire teaching load onto the support teacher (Anastasiou et al., 2015). Studies conducted in Zimbabwe by Musengi et al., (2012) and Musengi and Chireshe, (2012) found a lack of collaboration among school staff members in terms of the implementation of inclusive education. The UNESCO, (1994), however, suggests that the successful management of schools depends on effective collaboration in meeting the needs of deaf children. Thus, collaboration is instrumental in the education of deaf children in regular schools. A study conducted out in Kenya by Adoyo, (2007) indicates serious shortage of human resources and challenges in getting regular supplies of these human resources. The UNESCO, (1994) maintains that local administrators and school heads play

key roles in making schools the least restrictive spaces for deaf children, which contradicts Adoyo's (2007) findings that headteachers view deaf children in their schools as failing them in terms of getting high ranks when schools are ranked according to their pass rates. They should be recognised for the development of management procedures that are responsive to the needs of deaf children (*ibid*). They should be adequately trained to enable them to create welcoming environments for deaf children in mainstream schools (UNESCO, 1994; UN-CRPD, 2006). Their roles include; procuring and redeploying instructional resources to ensure effective instruction that benefits deaf children, ensuring that there are diversified learning options that suit individual deaf children, providing psychosocial support and soliciting for parental and community involvement in the education of deaf children (*ibid*). UNESCO, (1994) advises that parents and volunteers play a role in the creation of inclusive schools. The CIET, (1999) found that parents paid for their deaf children's school fees while NGOs supplement the insufficient school fees from parents. In contrast, the DZT, (2013) noted that parents do not pay school fees for their deaf children; neither do they pay visits for them nor ask for their results or school reports. A study conducted in Kenya by Mwangi and Orodho, (2014) and another conducted by Sibanda, (2018) revealed that these parental attitudes are influenced by cultural beliefs that perceive disability as caused by ancestral sin, sins committed by parents as well as witchcraft. This study seeks to establish if inclusive schools in Zimbabwe involve parents and volunteers in the inclusion of deaf children in mainstream schools. The UNESCO, (1994) recognises the importance of collaboration between mainstream teachers and their administrators for the successful education of deaf children in mainstream set-ups. Mainstream teachers support inclusion through the provision and use of resources in the teaching and learning of deaf children in inclusive schools (*ibid*). Studies conducted by Chimhenga, (2016) and Musengi and Chireshe, (2012), however, established the lack of collaboration among school staff members who are involved in the inclusion of deaf children; they even revealed that mainstream teachers lack expertise in the inclusion of deaf children. The CIET, (1999) and the UNESCO, (1994) acknowledge the role of teachers in conducting researches for the improvement of inclusive education, although Sibanda, (2018) claims that there is paucity of research in developing countries like Zimbabwe. Research is important for the development of new trends in inclusive education for deaf children and for calling on inclusive schools to be integrated into research centres and curriculum development units (the UNESCO, 1994; Sibanda, 2018). Therefore, this study is consistent with these findings as it seeks

to find out if inclusive schools in Zimbabwe are integrated into research centres and the Curriculum Development Unit (CDU). The study also seeks to establish the role of headteachers in inclusive schools. School administrators have to promote positive attitudes among school staff, hearing peers, and the community at large towards deaf children as well as promoting collaboration among teachers, support staff, and the collegiate teams (UNESCO, 1994). Thus, school administrators are a major part of human resources spearheading the successful inclusion of deaf children.

Mainstream schools also had specialist teachers. A study conducted by Musengi and Chireshe, (2012) found that inclusive schools had at least a specialist teacher specialised in Deaf Studies each, although they were not quite competent in Sign Language. In a survey carried out in Ethiopia by Gezahegne and Yinebeb, (2010), teachers' inability to sign led to a lack of participation by deaf children during teaching and learning. However, a study carried out by Musengi and Chireshe, (2012) found that specialist teachers conduct capacitation programmes with all mainstream teachers in attendance, as well as visit classes for deaf children. The CIET, (1999) found out that specialist teachers learn Sign Language from their deaf learners, yet they are said to be participating in capacitation programmes meant for mainstream teachers. According to a study by Musengi et al. (2012), all specialist teachers without deaf assistants were using oral language, possibly because they were not competent in Sing Language (Gezahegne & Yinebeb, 2010; Musengi & Chireshe, 2012; Thwala, 2015). Related to incompetency in Sign Language is the issue of teachers lamenting the lack of Sign Language dictionaries, which were requested from the MoPSE but to no avail (Musengi & Chireshe, 2012). These sentiments were also echoed by the headteachers of inclusive schools enrolling deaf children (*ibid*). In line with this observation, the CIET, (1999) and the UNESCO, (1994) indicated that trainee teachers should be oriented towards inclusive education for deaf children during their pre-service training programmes, thereby being exposed to the needs of deaf children and the material resources needed in their teaching and learning. These studies indicate that the available human resources in the form of teachers are not competent in handling deaf children in inclusion; neither are they collaborating. According to the UNESCO, (1994), the fundamental knowledge and skills required for the integration of deaf children are teaching inclusive classes, assessing deaf children, fitting and using assistive devices, curriculum adaptation as well as the implementing the Individualised Educational Plan (IEP).

Observations show that mainstream teachers just gave evaluative exercises to deaf children without attending to their individual needs (Musengi & Chireshe, 2012; Thwala, 2015; Chireshe, 2013; Sibanda, 2018; Majoko, 2019) and left all the teaching of deaf children to specialist teachers in the resource rooms (Musengi & Chireshe, 2012). The UNESCO, (1994) viewed in-service training and staff capacitation at school level as the solution to a lack of skills in handling deaf children. Though this was a noble idea, studies show that the specialist teachers are half-baked since they were said to be incompetent in the teaching of deaf children (CIET, 1999; Musengi & Chireshe, 2012; Thwala, 2015; Sibanda, 2018). Thwala, (2015) conducted a study and found that most Swazi teachers had not received training in inclusive education. Nonetheless, a significant number had attended capacity building workshops on inclusive education. The major drawback hindering the enrolment of mainstream teachers for courses in Deaf Studies lies in the conditions of service for specialist teachers in deaf education as they are treated just like mainstream teachers (Desalegn and Worku 2016), despite having an extra qualification (CIET, 1999; UNESCO, 1994). Thwala's (2015) findings identified in-service training as the gateway to the successful implementation of inclusive education for mainstream teachers who had not been educated in Deaf Studies. The teacher education curriculum had no content on inclusive education, making the teachers to feel insecure and ineffective when teaching deaf children (UNESCO, 1994; Thwala, 2015). The UNESCO, (1994) indicated that appropriate training of human resources is a crucial factor in promoting the successful education of children with disabilities in schools. Studies also recommended the recruitment of deaf teachers who are better positioned to serve as role models for deaf children and the community at large (UNESCO, 1994; UN-CRPD, 2006). The UNESCO, (1994) noted that it was, however, challenging to have all teachers undergo in-service training due to the severe conditions under which teachers work, due to challenging conditions for accessing human resources development leave. Musengi, et al., (2012) conducted a study and found that there is lack of collaboration between teachers from the mainstream education and deaf assistants and Sign Language interpreters as the mainstream teacher feared that the development of Sign Language could interfere with the learning of oral communication and that Deaf assistants/Sign Language interpreters would interfere in children's teaching and learning process.

Chimhenga's (2016) study found that mainstream teachers lamented lack of time to consult each other and collaborate on issues to do with inclusive education and develop services that specifically suit deaf children. The literature has revealed that in Finland, there were cases when the lack of

specialist teachers led to the utilisation of peripatetic teachers (Takala et al., 2009). Musengi and Chireshe, (2012) noted that inclusive schools lacked human resources to successfully implement inclusive education, with most of them indicating that they were not qualified to handle deaf children (Chireshe, 2011; Musengi & Chireshe 2012; Chireshe, 2013; Thwala, 2015). However, each inclusive school had a specialist teacher (Musengi & Chireshe, 2012) regardless of the number of deaf children. A study conducted in Kenya by Adoyo, (2007) revealed that there was a shortage of Sign Language interpreters in regular classrooms and that it was difficult for the State to supply adequate Sign Language interpreters. With these shortages in specialist teachers, this study seeks to determine whether or not the Ministry of Primary and Secondary Education in Zimbabwe employed deaf teachers as advocated by the UNESCO, (1994). Regarding another set of human resources, the CIET, (1999) noted that the National Audiological Centre in Zimbabwe operated with a skeletal staff establishment. This implies that the assessment of children to establish their statuses in terms of deafness may take some time before it is concluded; hence, teachers could teach children they were not sure of in terms of hearing aptitude. A study by Musengi and Chireshe, (2012) indicated that mainstream teachers faced difficulties handling deaf children as well as signing. The scanty specialist teachers made class visits and capacitated mainstream teachers on Sign Language and teaching skills on the education of deaf children. Inclusive schools could also exploit the services of itinerant teachers and specialist teachers in Deaf Studies who moved from one school to the next offering specialist services. The services of itinerant teachers were crucial in facilitating the successful implementation of inclusive education. A study carried out by Antia, Jones, Reed, and Kreimeyer, (2009) in inclusive schools in Australia indicated that itinerant teachers offered specialist services to regular classroom teachers to enhance the implementation of inclusive education. There is evidence attesting to the fact that of where there were services offered by itinerant teacher, deaf children spent much of their learning time in mainstream education (Luckner & Ayantoye, 2013). Mainstream teachers consulted itinerant teachers, who acted as specialist teachers in deaf schools or they only served as consultants bent on improving the services offered to deaf children (Loppopo, 2016).

In some cases, itinerant teachers directly taught deaf children in inclusive set-ups, where they employed either the pull-out or push-in model (Loppopo, 2016). In the pull-out model, the itinerant teacher removed the deaf children from the mainstream class and placed them in a resource room to give them individual instruction for a certain period of time (*ibid*). Most deaf children in the

USA received education from itinerant teachers (Luckner & Ayantoye, 2013). Regarding the push-in model, instruction was given to deaf children while in the mainstream classroom. Although the push-in model could provide full inclusion conditions for deaf children, ambient noise, and other attractive events at the school could interfere with instruction (*ibid*). The choice of a model depends on the individual itinerant teacher, and both models required collaboration and support from teachers from the mainstream education system (Rabinsky, 2013).

The teaching of deaf children required Sign Language interpreters. Sign Language interpreters helped in the learning of deaf children in inclusive settings. A study carried out in Kenya showed that there were severe shortages of Sign Language interpreters, and it was difficult to supply enough Sign Language interpreters in mainstream schools (Adoyo, 2007). A study by Musengi et al., (2012) revealed that mainstream teachers use Sign Language interpreters. However, they were not sure how to use them as headteachers just handed the interpreters to them without explanations. Apart from Sign Language interpreters, deaf children also needed support services from external human resources such as speech and occupational therapists or doctors (UNESCO, 1994). The human resources were supposed to coordinate during the execution of their duties (UNESCO, 1994; Musengi & Chireshe, 2012; Thwala, 2015). The CIET, (1999), however, noted that the Schools Psychological Services Department, which comprises educational psychologists, was not linked with MoPSE's organogram, and participants indicated that the Department of Special Needs Education had been put under clinical psychologists when it was not clinical.

Studies reveal that the several specialists are necessary for the education of deaf children in primary schools. These include specialist teachers, itinerant teachers, audiologists, Sign language interpreters or speech therapists. The study sought to investigate on the availability of specialist personnel required for the education of deaf children. Moreover, the study investigated the roles of these specialist personnel in the education of deaf children.

2.6.3 Infrastructure

Inclusive schools should have classrooms explicitly treated into conducive learning environments and resource centres for deaf children; the houses should have assistive devices and human resources. Desalegn and Worku, (2016) carried out a study and the results revealed that the provision of a resource centre as a house of certain materials, assistive devices, and human

resources were relevant in supporting deaf children and other learning centres in inclusive education. Teachers are not motivated to upgrade themselves to be able to operate resource rooms because specialist teachers were not remunerated better than mainstream teachers, yet they had an extra task (*ibid*). Gudyanga et al., (2014) endorse the view that classrooms for the inclusion of deaf children should be acoustically treated to reduce ambient noise just like resource rooms for speech training and audiometric assessments. The resource rooms should be soundproof so that only the required sound is audible during speech training, auditory training and audiometric assessments (Gudyanga et al., 2014). Gudyanga et al's (2014) study indicated that a few classrooms were carpeted and all the noise made in the mainstream classrooms were picked up and amplified by the hearing aids, thereby affecting deaf children using hearing aids. The current study aims at investigating the nature of classrooms and resource rooms and their suitability for the teaching and learning of deaf children (Gudyanga et al., 2014). The study also seeks to find out how equipped the resource rooms are in terms of skilled human resources in the form of specialist teachers for the deaf, audiologists, speech therapists, audiometers, assessment booths, mirrors, and hearing aids in inclusive schools in Zimbabwe.

Studies have shown that infrastructure for inclusive schools should be accommodative. Resource rooms should be acoustically treated. The study, therefore, investigated to find out if infrastructure was accommodative. The study also investigated on the importance of accommodations that were made to facilitate the education of deaf children in the primary school.

2.6.4 Curriculum resources

All Zimbabwean schools have a curriculum that guides them on what to teach. The curriculum can be a barrier or an aid to the successful implementation of inclusive education. Adoyo, (2007) found that the curriculum was one of the greatest barriers to the implementation of inclusive education if it was not designed to the extent of being adaptable to meet the needs of deaf children. Similarly, Ntinda, Thwala, and Tfusi, (2019) conducted a study and found that schools in Eswatini used unmodified mainstream curriculum which was not suitable or favourable to the teaching and learning of deaf children. Mapepa and Magano, (2018) conducted a study and found that curriculum modification was necessary to assist learners to access curricular material and instruction. Similar findings were published by Takala, Pirttimaa, and Tormanen, (2009). The curriculum should be flexible, allowing necessary instructional planning with a focus on deaf

children's needs and offering alternatives to increased participation by deaf children (Takala et al., 2009). Curricula should be adapted to meet the needs of children with disabilities and not the other way round (UNESCO, 1994). A good curriculum should offer additional instruction to deaf children using the same mainstream curriculum guided by the principle of Education for All; it should also provide extra instruction and additional support for deaf children with particular focus on their experiences and full participation in the educational process (UNESCO, 1994; Dakar Conference, 2000). These sentiments reveal that an effective curriculum should be adaptive enough to accommodate the needs of deaf children in schools. However, studies reveal that inclusive schools use curricula for regular schools, which are not adaptable, had little flexibility, extensive and quite demanding (Adoyo, 2007; Ntinda et al., 2019). The literature has shown that the implementation of the mainstream curriculum was impractical owing to the large class sizes. Thwala, (2015) revealed that the inclusion of deaf children was a challenge and a frustrating experience due to the nature of the curriculum, which allowed high teacher-pupil ratios of sixty to seventy pupils with school administrators not concerned about it. Similarly, Tefara, Admas and Mulatie, (2016) in their study found that the reality on the ground is that the Ethiopian government has made huge strides in improving educational access in the last couple of decades. Hankebo's (2018) study found that large class sizes and unbearable workloads did not allow 'one-on-one' interaction with deaf children, thereby denting the successful implementation of the mainstream curriculum in the teaching and learning of deaf children in schools. Such a curriculum made it impossible to give individual attention and additional assistance to deaf children who needed it in inclusive classes (Hankebo, 2018). Adoyo, (2007) summarised that deaf children in inclusive settings could not receive individual attention from regular classroom teachers due to the high teacher-pupil ratio instigated by free primary education offered by the State. Similarly, Musengi and Chireshe (2012), Chireshe (2013), and Majoko, (2019) found that mainstream teachers were unable to give individual attention to deaf children in their attempt to implement the mainstream curricular classes with large teacher-pupil ratios of over forty pupils in just thirty minutes per lesson. Thwala's (2015) study findings were that there is no learning progress in classrooms due to limited time spared for explaining concepts to large numbers of individual learners who needed individual attention. In line with this, Mapolisa and Tshabalala, (2013) conducted a study and found that when an unmodified mainstream curriculum is used to teach deaf children in mainstream schools, there is no meaningful learning taking place. Syllabi were not designed to

cater for individual differences, especially within the thirty minutes period allocated for each lesson (Thwala, 2015). Further findings from Thwala's (2015) study revealed that it was difficult to complete the syllabus if the curriculum was not adapted to meet the individual needs of deaf children. This suggests that teachers in the regular classrooms were worried about syllabus completion and pass rates (Adoyo, 2007). Musengi and Chireshe, (2012) also found that the operational syllabi did not fully meet the needs of deaf children and the teachers wanted deaf children to be taught by specialist teachers for the deaf in resource rooms. The syllabi were not adaptive because teachers lacked the requisite skills to modify them. Studies support that teachers lack skills to modify the mainstream curriculum and because of the complications the curriculum offered; as such, mainstream teachers wanted deaf children to be taught in the resource units by specialist teachers (Storbeck, 2011; Mapolisa & Tshabalala, 2013; Thwala, 2015; Sibanda, 2018; Mapepa & Magano, 2018). Similarly, Adoyo, (2007) found that because of the complexities posed by the mainstream curriculum, teachers and school administrators were uncomfortable with enrolling deaf children in their schools for fear of lowering their percentage pass rates as schools in Kenya were ranked according to the outcome of summative examinations. Thus, although UNESCO, (1994) had the vision of giving deaf children individual attention and additional assistance, it was impossible because teachers were failing to offer this service due to lack of skills both to adapt the curriculum and teach deaf children in inclusive set-ups compounded by abnormally high teacher-pupil ratios and limited time per lesson period (Takala et al., 2009; Mapolisa & Tshabalala, 2013; Mapepa & Magano, 2018; Ntinda et al., 2019). Musengi and Chireshe, (2012) found that due to large class sizes, deaf children were made to sit in front of all hearing children so that they had a full view of the teacher's speech organs, signs, gestures, and the chalkboard.

The curriculum also had to be adaptive in terms of the assessment of deaf children in schools. The literature has shown that like curriculum content, examinations were also not adjusted to meet the needs of deaf children. Mapepa and Magano, (2018) found that academic examinations were unfriendly to deaf children, particularly those with additional disabilities, and teachers did not modify them because they lacked the skills to do so. Gascon-Ramos, (2008) conducted a study and found that unmodified examinations affected deaf children particularly those with comorbidity, for instance, deafness and low vision. Gascon-Ramos, (2008) further revealed that one in every three deaf children in the USA had comorbidity. Hankebo, 2018 found that teachers faced

challenges communicating with children with comorbidity. UNESCO, (1994) indicated that assessment should be reviewed to make it formative to keep teachers and pupils informed of the educational progress from time to time, thereby taking note of the challenges and harness them at every step.

Literature shown that all schools have a curriculum they follow to educate deaf children. However, studies have indicated that schools use unmodified curriculum which is not flexible or unadjustable and, therefore, unfavourable to educate deaf children. Studies have also indicated that due to the unmodified curriculum, teachers and administrators are uncomfortable with enrolling deaf children. The study, therefore sought to find out if the curriculum of the school was modified to accommodate deaf children. The study further investigated to find if teachers and administrators welcomed the enrolment of deaf children in the school.

2.7 Overcoming or minimising challenges of deaf children in schools

Stakeholders in inclusive education should target overcoming or reducing the problems they and their deaf children face. Countries promised to apply all human rights evenly irrespective of disability, thereby removing discrimination and ensuring that human rights are honoured as law, changing outdated laws to new or relevant laws that stop or reduce discrimination (UN-CRPD, 2006). Thus, all human rights should be unconditionally applied. In this regard, deaf children had a right to education in mainstream schools (UNESCO, 1994; UN-CRPD, 2006; Constitution of Zimbabwe, Amendment Act No. 20, 2013). The Constitution of Zimbabwe [Amendment Act No. 20], (2013) gives deaf children the right to State-funded primary education while the Education [Zimbabwe] Act, (1987) gave all children the right to education as well as providing for the enrolment of all children at their nearest schools. Although the Constitution of Zimbabwe, (2013) and the Education Act, (1987) gave children with disabilities the right to education, the findings show that Zimbabwe had no policy specific to inclusive education (CIET, 1999; Chireshe, 2013), despite the UN-CRPD's (2006) indication that all countries agreed to the application of the rights of all people without discrimination based on disability. If all human rights in Zimbabwe were implemented in line with the UN-CRPD's recommendations, then deaf children in Zimbabwe would strike a fair deal in terms of inclusion. The Education Act, (1987), however, is watered down by its lack of adoption of the UN-CRPD's recommendations on the laws, rules, and elimination of unnecessary regulations to suit the current needs of deaf children in inclusive

settings. This suggests that the implementation of clear and specific legislation and policy could address the challenges deaf children encounter during integration.

The SREOPD, (1993) and UNESCO, (1994) indicated that deaf children should use Sign Language for their scholarly communication. Similarly, sign Language should be given preference for the connection of deaf children with their families, communities, and schools, an initiative underpinned by the provision of Sign Language interpreters, where necessary (SREOPD, 1993). The UN-CRPD, (2006) advocate for the teaching of Sign Language in schools bearing in mind that Sign Language is their native language. The use of Sign Language as a language of instruction could minimise the challenges deaf children encounter in inclusive schools. However, researches have shown that teachers in schools cannot sign, resulting in poor communication during teaching and learning and social interactions (Adoyo, 2007; Musengi & Chireshe, 2012; Thwala, 2015).

According to the IDEA, deaf children should be educated in LRE (IDEA, 2004). The IDEA, (2004) ensured that deaf children received educational programmes that catered for their individual needs so that they developed socially, intellectually, and morally to their fullest potential through IEP while they learned in environments adapted to suit their particular needs. In concurrence, the UN-CRPD, (2006) recommends reasonable adaptations, in terms of infrastructure, social environment as well as the curriculum, to be made for deaf children to benefit the most out of inclusive education. The UNESCO, (1994) maintains that adaptations should be part of the broader reform agenda schools should adopt to cater for stakeholders in inclusive schools rather than for inclusive education only.

Literature has revealed that stakeholders should target minimising barriers to the education of deaf children through observing all international conventions and local pieces of legislation. The study investigated to find out if stakeholders observed international conventions and local pieces of legislation to promote the education of deaf children.

2.8 Summary

The previous chapter covered the background to the study, statement of the problem, research questions, and the aim and objectives of the study, assumptions, overview of the study methodology, the definition of critical terms, and summary of the chapters constituting the thesis. This chapter reviewed the literature related to the academic experiences of deaf children in schools.

It also covered the challenges teachers and deaf children encountered in the schools. This included research on resources, legislation, and policy frameworks. The legislative and policy frameworks covered both international and national issues. The reviewed literature shows that the challenges impeding the teaching and learning of deaf children in inclusive schools rested on the unmodified and stiff curriculum and lack of skilled human resources. The next chapter focuses on the theoretical framework of the study.

CHAPTER 3

THEORETICAL FRAMEWORK

3.1 Introduction

The previous chapter reviewed the literature related to the experiences deaf learners. This chapter presents the theoretical that underpins this study. It focuses on the Asset-Based Community Development (ABCD) Theory and the two approaches to community development. The chapter also discusses assets which propel community development. The chapter further focuses on the assumptions of the Asset-Based Community Development Theory and its relevance to the study.

3.2 The Asset-Based Community Development Theory (Kretzmann & McKnight, 1993)

3.2.1 Background to the theory

This study was influenced by the Asset-Based Community Development Theory propounded by John P. Kretzmann and John L. McKnight (1993). The theory perceives the community as an inclusive school (Kretzmann & McKnight 1993). The theory dwells on community-driven development whose thrust hinges upon the linkage between micro-assets, who in this study are deaf children, and macro-ones, who in this study are regular classrooms. The success of such linkage depends on the premise that communities can come up with in fostering development processes themselves often by identifying and mobilising unrecognised assets, thereby responding to and creating local economic opportunities for these often unrecognised assets without focusing on their deficiencies (Kretzmann & McKnight, 1993). Therefore, regular schools can recognise, mobilise and include deaf children in the mainstream schools and beyond as useful and productive members of the community. The ABCD Theory was developed after a study by Kretzmann and McKnight (1993) on community development. Their study found that communities can best be developed from inside to outside through mobilising the assets within them

The Asset-Based Community Development (ABCD) Theory is the brainchild of John McKnight and Jody Kretzmann. In the late 1980s, over four years, Professors McKnight and Kretzmann, along with eighteen associates, travelled across North America, visiting over three hundred places around twenty cities to research on building communities through their citizens. Most of these places were referred to as ‘backwaters of pathology.’ They published a book titled: ‘Building Communities from the Inside Out: A Path towards Finding and Mobilizing a Community’s

Assets.’ Henceforth, Kretzmann and McKnight (1993) developed the Asset-Based Community Development Theory with devastated communities in mind, and their objective was to rebuild these devastated communities. They developed two paths tailor-made to reconstruct the devastated communities. The first path focused on community deficiencies and challenges, an approach which precisely addresses the needs of the community. Thus, for this study, regular classrooms would be developed to address the weaknesses of deaf learners and the problems they encounter as a result of being deaf. Therefore, this addresses their needs as it provides them with relevant services through the establishment of special schools. Currently, regular schools perceive deaf children as needy rather than as useful members who can contribute to the success of the school. Resultantly, headteachers and teachers manning the mainstream curriculum view deaf children as contributing to the low pass rates in the schools (Adoyo, 2007; Musengi & Chireshe, 2012). Contrary to this path, Kretzmann and McKnight (1993) developed another path that focuses on assessing the capacities of the community members and utilising these capacities for the development of the community. The two paths are detailed below.

3.2.1.1 Traditional path: A needs-driven dead-end

Kretzmann and McKnight (1993) noted that in devastated communities, there is an adopted mental map of community members’ deficiencies, problems, and needs. This mental map, according to them, determines how issues in this community are solved through deficiency-oriented solutions and programmes. Similarly, this study posits that deaf children are deficient, and such issues would be solved through deficiency-oriented solutions and programmes like teaching them to communicate orally so that they can successfully be included in the community (Musengi & Chireshe, 2012; Gudyanga, Wadesango, Hove & Gudyanga, 2014). On the needs map, suppliers of services such as non-governmental organisations (NGOs), donors, and churches are mobilised to educate people on the nature and magnitude of their problems and the available services meant to address these problems. According to Kretzmann and McKnight (1993), this influences needy people to believe that they have special needs, and that their wellbeing entirely depends on being clients of the community leaders and service providers from outside of their community. This conditions community members to perceive themselves as valueless members of the community incapable of providing services but rather, as mere service receivers. Therefore, community members gradually accept their situation and become dependent on service providers. Community

members view themselves as fundamentally deficient and natural victims incapable of controlling their life situations, communities and their future. The path also conditions community members to see their community as a world riddled with endless problems. Kretzmann and McKnight (1993) assert that this path deprives the community members of wisdom and knowledge to realise that their community has issues which they can solve without the hand of outsiders. In the case of this study, deaf children may not view themselves as valuable members of the community who can provide solutions to problems affecting the community. They often perceive themselves as service receivers with endless problems they can hardly solve on their own. The resource-based solution to community problems channels funds towards service providers rather than community members. This path rates community leaders on the basis of their ability to attract services; thus, they may even create challenges and influence community members to believe that they are too incapacitated to solve the problems for which they need to rope in service providers from outside, thereby deepening the cycle of poverty (Kretzmann & McKnight, 1993). According to Kretzmann and McKnight (1993), community members, therefore, hope that problems successively worsen year by year, pushing them towards getting external services. Getting external assistance breaks the bond between community members who concentrate on relationships with service providers who matter most to them.

Kretzmann and McKnight (1993) noted that the needs map path only guaranteed survival without meaningful community development, hence, it is the cause of the sense of hopelessness among community members who are entirely dependent on external assistance. As such, Kretzmann and McKnight (1993) developed an alternative path that seeks to reconstruct the devastated communities.

3.2.1.2 Alternative path: Capacity-focused development

Kretzmann and McKnight (1993) claim that significant community development takes place when community members are committed to taking part and investing their resources in the development of the community. For instance, when mainstream schools include deaf children and consider each other as having assets that are important for the development of the community, they take part and invest their energies together for the success of their school, resulting in significant improvements and the achievement of the educational goals such as social and academic inclusion, participation and academic performance. Thus, community development takes place when community members

commit themselves to participation in the development activities of their community through their talents and skills. The Asset-Based Community Development, according to Kretzmann and McKnight (1993), views community development dependent on outside assistance as not readily forthcoming. It is for this reason that community development successfully occurs when it is from inside to outside. Kretzmann and McKnight (1993) claim that communities are not built from outside, neither are they built from top to bottom. Assistance may be given to a community that is already developing itself (*ibid*). Unlike the needs-driven community development path, the capacity-focused community development path does not wait for assistance to initiate development, but support may come when development is already underway. Using the capacity-focused path leads to the crafting of relevant policies and the recognition of individual activities based on their capacities, assets, and skills (Kretzmann & McKnight, 1993). Regarding the inclusion of deaf children, plans may be crafted basing on the strengths of deaf children, which may be Sign Language (SREOPD, 1993; UNESCO, 1994; UN-CRPD, 2006; Musengi et al., 2012; Musengi & Chireshe, 2012; Thwala, 2015).

3.2.2 Community assets

The Asset-Based Community Development Theory outlines four categories of holdings, namely; individuals, associations, and physical assets and connections.

Asset mapping for a community may be represented diagrammatically as shown in Figure 3.1 below.

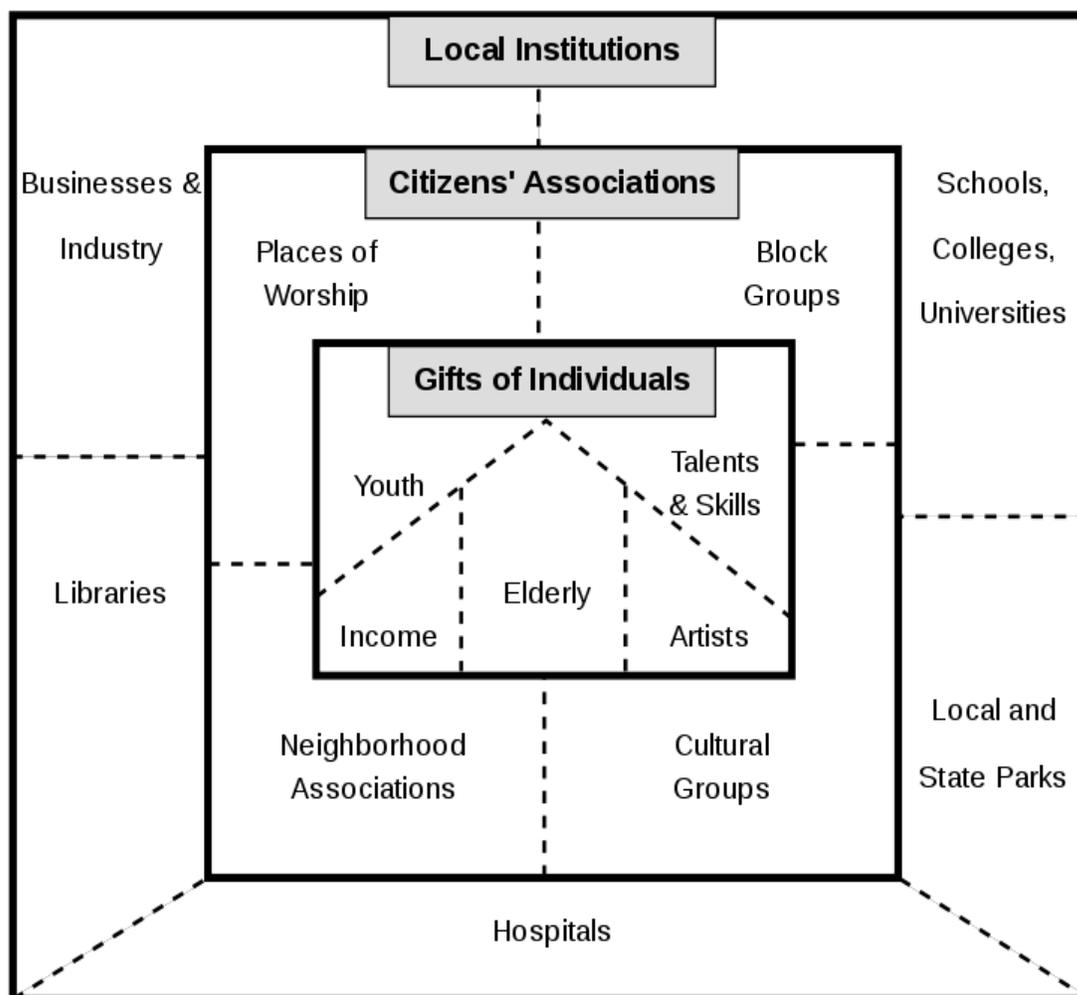


Figure 3.1: Example of Asset mapping

Source: Wikipedia

3.2.2.1 Individuals

According to the Asset-Based Community Development Toolkit, communities are no longer viewed as places of problems and needs, but as areas with assets and gifts, which may be the reason why some schools have shifted from exclusion to inclusion. Possibly, such schools have realised the indispensability of every member of the school community as an asset of development. Kretzmann and McKnight (1993) posit that during mapping, capacity mapmakers may discover that the community is endowed with various untapped individual talents and skills which are essential for community development which starts at individual, family, and household levels. In

inclusive schools, these assets may include headteachers, mainstream teachers, deaf children, non-deaf children, specialist or itinerant teachers, support staff, and a multidisciplinary team of doctors, nurses, occupational therapists, and speech therapists. According to Kretzmann and McKnight (1993), the mapping of assets and ascertaining gifts are especially crucial as they apply to the members who are often excluded by the community, deaf children, in the case of this study. According to the Asset-Based Community Development Theory, members who are marginalised, deaf children in this case, are part of community development, not as onlookers or passive recipients of services, but as full participants in community development.

3.2.2.2 Associations

These are semi-formal groupings or associational lives with common interests that are not entirely dependent on paid members like in institutions (Kretzmann & McKnight, 1993; ABCD Toolkit). These groupings often include soccer clubs, associations of the deaf or deaf clubs, specialist teachers' associations, teachers' associations, and headteachers' associations who volunteer to come together for a common goal or interest, for instance, teaching and learning Sign Language (ABCD Toolkit). These associations, which come together to share common interests or to solve problems, are viewed as instrumental in community mobilisation (Kretzmann & McKnight, 1993; ABCD Toolkit). However, the roles of these associations in community mobilisation are often underestimated, especially in the case of devalued groups of people like the deaf, considering that such associations usually crumple (Kretzmann & McKnight, 1993). During asset mapping, however, mapmakers may realise that associations are critical in community mobilisation, with some even going beyond the purposes and intentions they were formed for. Such associations as Sign Language clubs may teach community members Sign Language in order to improve communication and participation in the development of inclusive schools. Figure 3.2 below illustrates associations that may be found in a community.

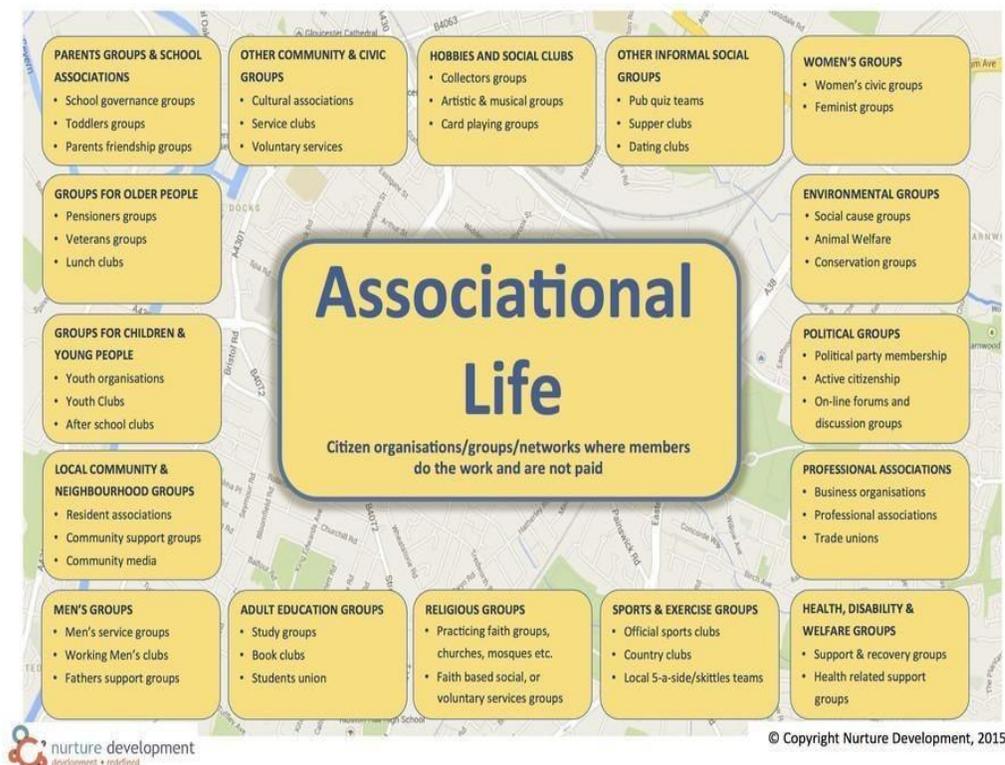


Fig. 3.2: Associational life

3.2.2.3 Institutions

Next on asset mapping may be institutions that are formal organizations, institutions whose Members may be salaried professionals (Kretzmann & McKnight, 1993; ABCD Toolkit). These associations may include inclusive schools, banks, libraries, police stations, fire stations, social service organisations, and hospitals. According to Kretzmann and McKnight (1993), mapping of institutions is easier than any other mapping. Still, the mapping of members for specific responsibilities may pose critical challenges, for instance, the mapping of one responsible for community health. These institutions play varied roles in community development; for instance, social service organisations may be responsible for the payment of school fees for deaf children in inclusive schools.

3.2.2.3 Physical assets

These physical structures include classrooms and playgrounds in inclusive schools; funds and transport that a community uses for its development (ABCD Toolkit). These physical assets are valuable in the development of the community; for instance, acoustically treated classrooms are ideal for deaf children during learning while playgrounds are necessary for mixing and socialising during break time and sporting activities.

3.2.2.4 Connections

In the Asset-Based Community Development, connections such as relationships for the exchange of goods and services among community members exist (ABCD Toolkit). For instance, six families may be using one tractor for farming, or one mechanic may be servicing more than one structure. In the context of this study, one specialist may be collaborating with all the mainstream teachers, one itinerant teacher may be serving the whole school with differential classes or one head teacher may capacitate all the teachers in the school. These connections play a significant role in ensuring that all the structures have all the necessary assets needed for community mobilisation.

3.3 Assumptions of the Asset-Based Community Development Theory

The Asset-Based Community Development Theory assumes that community leaders understand that community development becomes successful when it is based on the mapping of the community's assets, capacities, and abilities (Kretzmann & McKnight, 1993). The Asset-Based Community Development Theory assumes that communities have abundant resources, which are the assets that are responsible for community development (McKnight & Russell, 2018). These assets are universally available, and when they are prudently utilised, they can never be exhausted. According to the Asset-Based Community Development Toolkit, everyone is gifted with rare exceptions, and people are eager to contribute through participation. Thus, once they are mobilised, they eagerly do so. The Asset-Based Community Development also assumes that relationships are essential in building communities (Kretzmann & McKnight, 1993; ABCD Toolkit). Once assets are mapped, grouping them into relationships leads to community development. The Asset-Based Community Development Theory also assumes that community leaders involve community members as active members of the community, and not as recipients of services (Kretzmann &

McKnight, 1993; ABCD Toolkit). This means that in the mainstream classes, headteachers, teachers, all other school staff members, and non-deaf children involve deaf children in all school activities and accept deaf children as members who contribute meaningfully to the development of the school; however, this contradicts the needs-driven path which depict headteachers and teachers perceiving the enrolment of deaf children as lowering their school's academic rankings (Adoyo, 2007; Musengi & Chireshe, 2012; Thwala, 2015). Since it is assumed that communities have sufficient assets, the community member-centred and inside-out community developments are believed to be the ideal model of community development (Kretzmann & McKnight, 1993; ABCD Toolkit). It is assumed that a citizen-oriented community development, where community members control the development project to come up with the developing agent, is essential. For the inclusion of deaf children to be successful, it is necessary for all stakeholders, including deaf children, to initiate improvements in the integration of deaf children, for instance, through dispelling negative attitudes, creating least restrictive environments in schools as well as accepting every member in the school as valuable and equally capable of creating and providing services as opposed to the reverse. The Asset-Based Community Development Theory further assumes that institutions such as governments, Non-Governmental Organisations (NGOs), and banks have reached their limits in terms of solving community problems; hence, communities should manipulate their assets to develop themselves (Kretzmann & McKnight, 1993; ABCD Toolkit). Institutions are economically pressured to focus on communities (*ibid*). Inclusive schools should, therefore, use their assets prudently to avoid relying on outside funding and this dovetails with the findings in South Africa and Namibia in a study conducted by Tshifura (2012), which found that with limited funding, schools use their scarce resources prudently in the implementation of inclusive education. Kretzmann and McKnight (1993) noted that community regeneration hinges on the ability to locate and assess all the assets of the community, joining the assets so that they increase their power, effort, and effectiveness and therefore bring in resources that may help regenerate the community. The whole process of restoring communities using the capacity-focused development starts with the mapping of the assets and assess the capabilities of these assets to replace the needs and deficiency path. The next step involves the assembling of the assets' strengths to form new combinations, new structures of opportunities, new sources of income and control, and finally new possibilities for productions.

3.3.1 Relevance of the Asset-Based Community Development to the study

The Asset-Based Community Development avers that asset mapping provides mapmakers with information on the strengths and capacities of the assets, while the assets may also realise some of the advantages and abilities they were not sure of (Syarifuddin & Amir, 2017). In this study, administrators and teachers were capacitated to teach deaf children using their strength, for instance, teachers could utilise deaf children's strength in signing. In the process, deaf children may realise their potentialities as they engage in various schools activities working together with hearing peers, teachers and administrators. Deaf children encounter several experiences as they engage in various school activities. The theory assumes that all community members are indispensable assets that together contribute towards community development. The Asset-Based Community Development focuses on the strengths of the assets, not on their weaknesses; for instance, in the inclusion of deaf children, focus is on what they are capable of doing, and not the other way round. In this instance, their strength lies in their ability to sign not on their inability to hear or speak. They can then use their skills for the development of their school and the community in general. In this case, the ability by deaf children to sign may be used in teaching Sign Language to the school members who are not able to sign, thereby improving communication and social interaction in the school community. Deaf children, therefore, need support services so that they realise their potential and contribute to the development of the school. According to Kretzmann and McKnight (1993), the Asset-Based Community Development model is inclusion-focused as it links micro-assets, who in this case, are deaf children in inclusive schools, with communities of macro-assets, inclusive regular schools, thereby allowing deaf children to learn socially and academically from non-deaf children while non-deaf children also learn from their deaf peers (Musengi & Chireshe, 2012), thus giving deaf children what Wolfensberger, (1983), in his Social Role Valorisation (SRV) Theory, terms socially valued roles. It is through interaction that deaf children learn several skills. In his Social Role Valorisation, Wolfensberger, (1983) posits that devalued people are likely to experience the good things in life if they hold socially valued roles. This suggests that when deaf children are included on the basis of the Capacity-Based Community Development model, they are likely to enjoy good things in life which they would miss when they are excluded. The Capacity-Based Community Development model affords deaf children the chance to showcase their assets and gifts and to participate in both school and community life with all the members accepting each other on an equal basis. According to the ABCD Theory,

community development is citizen-driven; thus, the strengths of community development lies with its citizens. According to the ABCD Toolkit, the ABCD model is premised on the understanding that communities come up with their development processes through identifying and mobilising existing, but often unrecognised community assets (deaf children), an approach which is responds to and creates local economic opportunities. The ABCD approach is concerned with the identification and mapping of assets by citizens for utilisation in community development (Klee, Mordey, Phulare, & Russell, 2014). Thus, community development depends on the citizen's commitment to map their assets, especially those that are usually neglected (deaf children), to mobilise the community towards self-development. Moreover, the ABCD Toolkit notes that the ABCD model starts with the mapping of assets that are already available in the community and these assets manifest in the form of individuals, associations, and institutions. These are therefore channelled towards community mobilisation without focusing on their weaknesses and needs, but on their strengths, assets, and gifts. Furthermore, the ABCD approach is relationship-oriented as it considers all members as equally important actors in the development of the community; it also maps assets into combinations or relationships which may increase production (Kretzmann & McKnight, 1993). Thus, asset mapping considers the psychosocial experiences of the life of deaf children in the school, that is, what psychosocial issues affect deaf children's academic experiences? Kretzmann and McKnight, (1993) posit that when the asset mapping process is complete, the community begins to assemble its strengths into new combinations, for instance, new structures of opportunity, new sources of income, control, and new possibilities for productions. The assembling process often follows patterns of relationships, which are related to other links for community mobilisation.

An ideal community, an inclusive school in this case, may accord all its members all the elements as shown in Figure 3.3 below. These include the psychosocial and academic welfare of deaf children in the school. After asset mapping has been completed and when every member has been accepted as an equal partner fully participating in community development, the situation resembles the one illustrated below:



Figure 3.3: Ideal community

Representation of the ideal community mobilisation

Figure 3.4 below summarises the justifications given by McKnight and Russell (2018) for the adoption of the ABCD model as the most distinctive and excellent model of community development, whose thrust in this study is the inclusion of deaf children in school and community development. According to McKnight and Russell (2018), when community members engage in community development, they have to be cognisant of the resources they are going to use to achieve their goal, the methods they are going to use, the functions of community members and finally an evaluation of their ABCD process. This process makes the ABCD model the most distinctive and ideal approach to community development. Other models of community development, like the problems and needs-based community development, do not have all the four elements, although they may have more than one (McKnight & Russell, 2018).

3.3.2 Resources

The resources to be used are community assets which are readily and universally available; these are individuals, associations or institutions, which are so abundant that if they are prudently shared, they do not run out and these community assets are willing to perform (Kretzmann & McKnight, 1993; ABCD Toolkit; McKnight & Russell, 2018). In an inclusive school, these assets may include headteachers, regular classroom teachers, specialist or itinerant teachers, support staff, deaf and

non-deaf children, doctors, nurses, occupational and speech therapists with their assets and gifts being maximised for community development.

3.3.3 Methods

When communities have the assets, they next issue borders on making the assets productive in a collective sense. Communities use methods that include identifying and productively connecting available but unconnected assets (deaf children in this case) basing on what they are capable of doing with little external help and finally what they want agents from outside to do for them so that they become more productive in community development (Kretzmann & McKnight, 1993; McKnight & Russell, 2018).

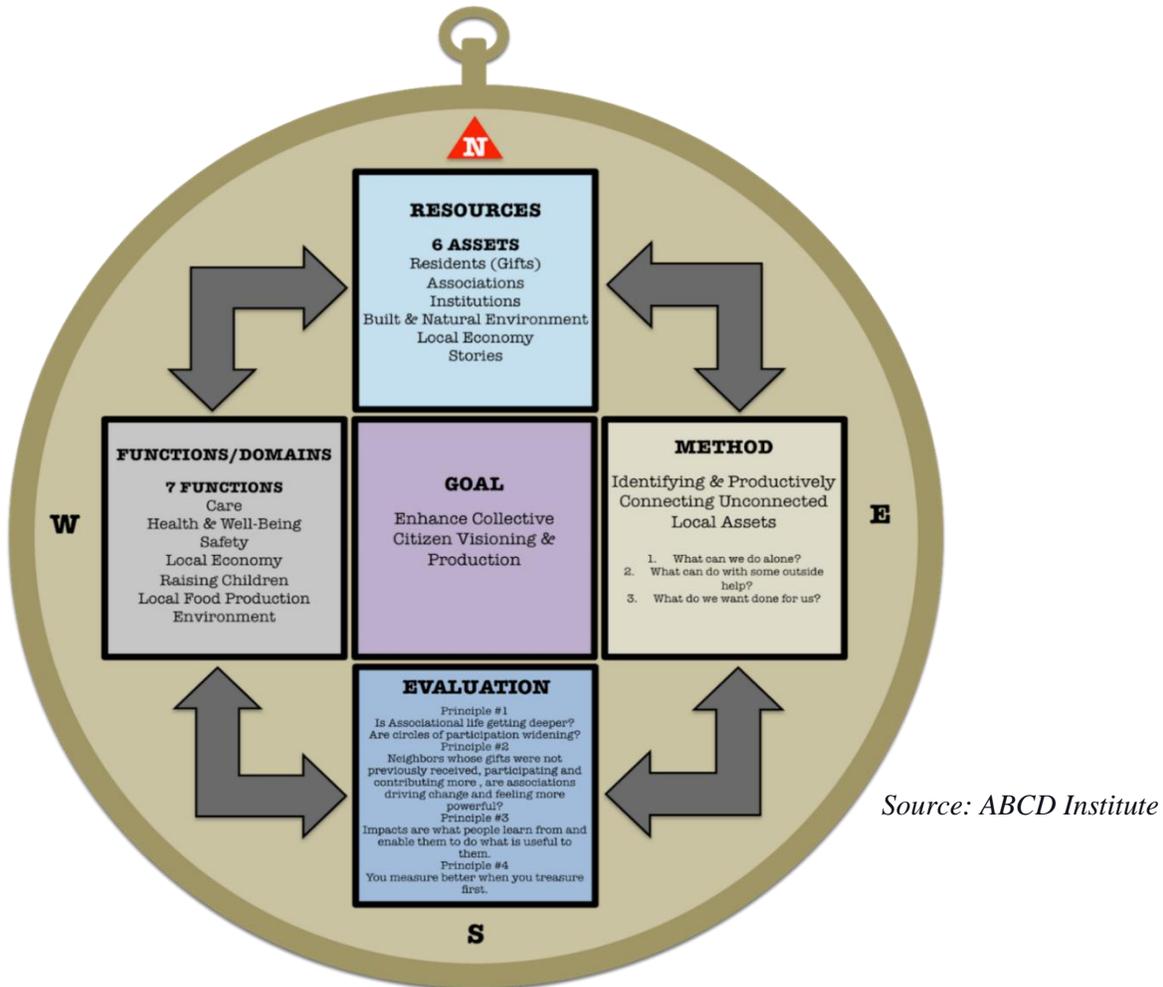
3.3.4 Functions

After the community has connected and discovered the strengths of the assets, and after identifying the kind of assistance the assets need from outside, it now needs to establish specific functions assets can perform for in community development. These functions include enabling health, assuring security, stewarding ecology, shaping local economies, contributing to local food production, raising children and co-creating care (McKnight & Russell, 2018). As these functions are hypo-local and citizen-led, they are critical in driving community development. In a school that include deaf children, these functions include those of the multidisciplinary teams for the successful inclusion of deaf children in the school.

3.3.5 Evaluation

According to McKnight and Russell, (2018), evaluation in the ABCD Theory involves assessing asset mapping, methods, and functions; thus, learning about the development process and making midway corrections for the team to remain focused. Evaluation enables the maximisation of exchange of assets and gifts, maximisation and deepening of associational life, maximisation of participatory numbers and co-producing assets and increasing assets' power and most importantly, the inclusion of formerly marginalised assets. Thus, all assets are communally made to contribute towards the wellbeing of their community (McKnight & Russell, 2018). In a primary school that include deaf children, evaluation may include evaluating the curriculum for deaf children, the methods or the academic assessments to align them with the needs of deaf children.

Figure 3.4 below summarises the four essential elements of the ABCD model (McKnight & Russell, 2018).



This is not a map, but a compass. Start with any element, but go to every element.

Figure 3.4: The four essential elements of the ABCD Theory

3.4 Limitations

The study was limited by financial challenges particularly inadequate money for airfares from Zimbabwe to South Africa where the researcher had to meet the supervisor. To circumvent such financial constraints, the researcher resorted to travelling by road, an option that needed three days before meeting the supervisor. Fatigue crept in at the end of these journeys leading to poor concentration during consultation. Social media calls, through Wi-Fi and emails, were used for communication, thereby reducing the number of visits and fatigue. The inadequacy of money for

accommodation during the consultations also posed challenges. Due to terrible power cuts in Zimbabwe during the research process, the use of Wi-Fi was hindered, resulting in the researcher sending emails at night when electricity had been restored. Access to information obtained through Wi-Fi was also limited to periods when power was available.

Moreover, travelling to the school for data collection as well as for meals during days of data collection posed financial constraints. The researcher had to prepare packed lunch to reduce costs.

Lack of electricity compromised working durations. Power was available for short periods, usually late in the night. Working on the research was, therefore, limited to these short periods, which were extended by laptop battery life. This deprived the researcher of enough time to work on the thesis.

The emergence of COVID-19 posed a severe threat to the compilation of data for this study. The emergency of COVID 19 led to National lockdown and restricted movements. Workers were not going to work, hence, Wi-Fi was not and electricity were not attended to. Wi-Fi was weak while electricity supply was erratic. Lack of electricity and network for communication with the supervisor hampered progress during the study. Visits to the supervisor could not continue owing to the closure of borders and restricted movements. The notification was restricted to mails, audio, and video calls when network permitted.

3.5 Summary

This chapter has deliberated on the theoretical framework that underpinned the study. The Asset-Based Community Development Theory showed how the community could mobilise its members, including the devalued ones, to become essential members of its development. The chapter presented the background to the ABCD theory which had two paths, namely; the traditional path, which is a needs-driven approach and the alternative path, which is a capacity-focused development. The chapter also looked at community assets, include individuals, associations, physical assets and connections. The chapter also deliberated on the assumptions of the ABCD model and discussed its relevance to the study. The relevance of the ABCD Theory to the study was based on its focus on the community's internal resources, methods, functions and evaluation. The next chapter focuses on research methodology.

CHAPTER 4

METHODOLOGY

4.1 Introduction

This chapter discusses the various aspects of the methodology. These include the research approach, research paradigm, research design, and research setting. The procedure for the selection of participants focuses on population, sample, and sampling procedure. It also presents the data collection methods, instruments used for data collection and a description of the process of data collection. The chapter also presents data collection, analysis, and interpretation procedures. The chapter further presents quality assurance through trustworthiness. Reflection on researcher bias and data analysis procedures and interpretation and ethical considerations concluded this chapter.

4.2 Research approach

This study adopted a qualitative approach. It is important to mention that the qualitative approach originated from sociology, humanities, and anthropology during the 1990s through into the 21st century (Creswell, 2014; Leedy & Ormrod, 2015). The concept “qualitative research” means any kind of study, in which the findings do not arrive through statistical means which can be proven or other means of quantification (Strauss & Corbin, 1990; Rahman, 2017). This approach entails an in-depth understanding of human behaviours, lived experiences, emotions, feelings, and organisational functioning such as social movements, cultural phenomena, and interactions between nations and the reasons behind these behaviours (Queirós, Faria & Almeida, 2017; Rahman, 2017). For example, it involves ideas on 'why' and 'how' specific human behaviour is exhibited, unlike the quantitative research approach, which focuses on the 'what', 'where' or 'when' of the shown behaviour (Rakotsoane, 2012). Qualitative research entails qualitative phenomenon aiming at discovering the actions and reasons for these actions through in-depth interviews, particularly in behavioural sciences (Tracy, 2013; Bist, 2014). Its focus involves multiple methods related to the interpretive, naturalistic approach, and its subject matter (Denzin & Lincoln, 1994).

The qualitative approach was relevant in this study, because it helps to make sense out of or interpret phenomena in terms of meanings brought to them by participants with the assumption that social realities are constructed by the participants (*ibid*). In qualitative research, data is generated within contexts, from participants who come from these contexts, and the subjectivity

of information is recognised and incorporated in analysis rather than being viewed as a bias (Young & Hren, 2017). The qualitative approach is concerned with the quality of data collected and the quality of responses to this data. Therefore, qualitative research is an in-depth study approach that seeks to understand behaviour and the reasons why humans exhibit the behaviour.

Qualitative researchers conduct their studies in natural settings, make sense out of, or interpret phenomena in terms of meanings brought to them by participants with the assumption that social realities are constructed by the participants (Rakotsoane, 2012). In concurrence, Creswell, (2014) indicated that in qualitative research studies, researchers personally collect data in the field or the context where participants are experiencing the phenomenon under review so that they have first-hand information from the participants. They neither bring the participants into the laboratory nor send the instrument to the participants for completion, giving them the chance to talk to participants on a face-to-face basis and see them behave in the natural setting (*ibid*). This may be an advantage why researchers may prefer a qualitative approach over other approaches when conducting research.

Rakotsoane, (2012) claims that the principal reason for adopting the qualitative research approach is the ability of humans, unlike animals, to talk and stand for what they believe in, thereby helping researchers to understand them (participants) in their social and cultural contexts within which they live and communicate. It is for this reason that many researchers argue that the point of view of the participants, as well as the particular social and cultural context, is lost when the participants' expressions are quantified like what is done in quantitative research, an approach that is concerned with quantitative measurements of characteristics of the phenomenon under study.

In this study, which was dealing with humans who could talk and stand for what they believed in and stand for, the researcher used in-depth interviews and focus group discussions. This kind of triangulation gave the researcher an opportunity to communicate to participants so that they could stand for what they believed in. The focus of the study was on what participants felt or thought about the academic experiences of deaf children in a selected primary school. According to Neuman, (2014), the qualitative approach relies on interactive processes, constructs social realities and cultural meanings during data collection and data interpretation. For this study, the researcher generated the interview schedule and focus group discussion guide and collected the data using

these instruments. One-on-one interaction gave the researcher the chance to observe and interpret non-verbal cues. This helped the researcher to formulate probes that were useful to generating rich and thick data required to answer the study's key research questions.

4.2.1 Key characteristics of the qualitative approach

This study discusses eight significant attributes of the qualitative research approach related to Creswell's (2014) point of view.

4.2.1.1 Natural setting

Researchers collect data when participants are at the site where they are experiencing the issue under study; that is, they collect data in natural environments. They neither take the participants to the laboratory, like what happens in the hard sciences, collect data nor send data collection instruments to participants to answer questions or to complete them for data collection (Tracy, 2013; Creswell, 2014). Instead, qualitative researchers collect data by directly talking to participants on a face-to-face basis during interviews or focus groups and note their behaviour in their natural settings or their contexts over time. This happens in a dialogic process to allow participants to stand for what they believe in (Rakotsoane, 2012). The researcher collected data on the academic experiences of deaf children at a selected primary school, with participants not being taken away from the environment in which they deal with deaf children's educational experiences.

4.2.1.2 Researcher as the key instrument

In qualitative research, researchers do not send data collection instruments to participants, but they collect the data themselves and, in the process, observe the behaviour of the participants (Creswell, 2014). The qualitative approach does not rely on instruments made by others, nor do they rely on questionnaires that may not require their presence during data collection (*ibid*). According to Tracy, (2013), qualitative research methods view a researcher as a bricolage, a researcher who uses various data sources in a flexible and creative manner, to make the most out of the available data, which may be obtained through interviews, focus group discussions or observations, among others. In this study, the researcher used interviews and focus group discussions. The presentation of data in narrative form helped the researcher to maintain the meanings of the stories from the participants.

4.2.1.3 Multiple sources of data

The qualitative approach may rely on data triangulation. Researchers collect data from various sources. In this study, data were collected from deaf children, administrators, teachers, and psychologists. The researcher reviewed the data, presented it into categories that cut across all the data sources, and analysed it (Creswell, 2014).

4.2.1.4 Inductive and deductive data analysis

Qualitative researchers organise their data into patterns or categories of abstract units for analysis. On the one hand, the inductive process of data analysis illustrates working back and forth between the themes and the database until the researcher has a comprehensive set of themes (Creswell, 2014). On the other hand, the deductive component includes the researcher reflecting on the data from the themes to check if more evidence to support each theme is needed or if there is a need to gather more data. Tracy (2013) opines that qualitative researchers speak of emic understandings of the scene, which may be the inductive reasoning, meaning that behaviour of the participants is interpreted in terms of their meanings in the context of the study. Tracy (2013) also says that there are the etic understandings of the research where researchers describe participant behaviour basing on external terms or theories which may not be specific or relevant to a particular culture.

4.2.1.5 Participants' meanings

Throughout the research process, researchers using the qualitative approach take note of the meanings that participants have on the subject under study, not the implications that the researchers hold or what literature expresses on the topic under study (Tracy, 2013). Thus, researchers are interested in the senses the participants bring out while telling their lived stories during interviews rather than their own or writers' views on the subject. In other words, the meanings that come out during data collection are solely the meanings of the participants. In this study, the researcher was interested in the meanings of stories told by deaf children, teachers, administrators, and educational psychologists.

4.2.1.6 Emergent design

According to Creswell, (2014), the research process may be changed when the researcher gets into the field to collect data and realise that there is a need for change or adjustments in line with what

is in the field. For instance, there may be changes in research questions or shifting of the sites for data collection. The primary idea behind qualitative research is to learn about the issues on the topic from the participants and address them according to their views (Lapan et al., 2012; Creswell, 2014; Yin, 2017).

In this study, the researcher adjusted the research questions to suit the system of education of the deaf children in a selected primary school. However, the gist of the research questions was not changed. This was done after the researcher entered the field and realised that deaf children had experiences in the primary school in general rather than only in inclusion. For example, lack of resources had to do with the primary school and not inclusion. The word 'inclusion' was, therefore, replaced by the phrase 'primary schools'. This was also done after realising that deaf children did not always learn in inclusions but mainly in the resource units where they also had experiences. The phrase 'primary schools' aligned with the research topic. Moreover, for this study, the researcher learned about the experiences of deaf children in the primary school in Zimbabwe from administrators, teachers, psychologists, and deaf children and analysed the data in line with their views.

4.2.1.7 Reflexivity

Researchers in the qualitative approach reflect on how their role in the study, their culture, and their experiences influence the interpretations of the data they analyse, including the themes they generate and the meanings they give to the data (Creswell, 2014). Tracy, (2013) mentions that reflexivity refers to careful consideration of the point of view, experiences, and role of the researcher that may influence the way the researcher interacts with the participants and how s/he interprets the participants' responses as well as their contexts, say, one researcher may view a viewpoint as 'useless' while another may consider the same view as 'brilliant'. Qualitative researchers, therefore, celebrate divergence and subjectivity (*ibid*).

In this study, all views were deemed as valuable and meaningful. This has not only to do with biases the researchers may hold but also the background and culture of the researcher that may influence the interpretations they may come up with (Creswell, 2014). Researchers should, therefore, reflect on their biases, their experience, values, gender, culture, and socioeconomic status, race, or ethnicity. In other words, the interpretations the researcher may come up with may

be determined by his/her background, gender, ethnicity, or culture rather than bias. For this study it was, therefore, important that the researcher reflected on his experience and culture about deaf children; that is, he was once a teacher for deaf children, is currently a lecturer in Inclusive Education or that he is hearing, to relate them to the interpretations he was going to give to the data collected. The researcher chose to be neutral and presented the data in narrative form so that readers could interpret the excerpts the way they understood them.

4.2.1.8 Holistic account

Researchers using the qualitative approach develop complex pictures of the issues under their study and tackle them in a holistic manner, for instance, 'reporting multiple perspectives' or identifying various factors that are involved in the study (Maxwell, 2012; Creswell, 2014). For this study, the researcher collected and presented data using individual interviews and focus group discussions. These were audio recorded using a digital audio recorder. Audio recordings assisted the researcher to generate accurate data transcriptions. Qualitative researchers view cultures using the lenses of the gestalt school of thought, that is, holistically (Tracy, 2013; Prasad, 2017; Tracy, 2019). An aspect of a culture is best understood when it is related to others, unlike when it is treated as isolation, in bits and pieces.

4.2.2 Advantages and disadvantages of qualitative approach

This study presents the advantages and disadvantages related to its applicability in research.

4.2.2.1 Advantages of a qualitative approach

It is important to note that the application of the qualitative research approach brings many advantages in the field of educational psychology. Atieno, (2009) revealed that it is suitable for simplification and easier management of data without destroying the complexity and context of the research. A qualitative research approach entails a detailed description of the study at hand, which is often based on the field where data is being collected (Tracy, 2013; Billig, 2013). This is so because it produces quality findings that may have a meaningful impact on the experiences of deaf children in a selected primary school.

Furthermore, qualitative approach is useful due to its reliance on the emic understandings of the scene. This means that the participants' responses are described basically on their beliefs, and

views in the context in which the study is being conducted (Tracy, 2013; Creswell, 2014). In this study, responses from participants were described in terms of their point of views in the context of the participants in relation to the education of deaf children in a selected primary school. According to Rakotsoane, (2012), qualitative data is generated within contexts, from participants who come from these contexts. Thus, it is the participants who are influenced by the context in which they are and understand it better than anyone else. For instance, it was deaf children, administrators, teachers, and psychologists, respectively, who were being influenced by the context of deaf children in a selected primary school. Descriptions and interpretations were, therefore, based on participants' experiences, understanding, and meaning of their background. The qualitative research approach was an advantage in that was down in the participants' natural settings. The use of this approach allows the researcher to understand social and cultural phenomena in the natural context within which the participants live and behave (Rakotsoane, 2012; Creswell & Creswell, 2017). Its purpose consists of a more lucid understanding of the aspect under study (Atieno, 2009).

The main reason for adopting the qualitative approach is the understanding that humans can talk and stand their ground for what they believe in (Rakotsoane, 2012; Creswell & Poth, 2016). The qualitative approach may help qualitative researchers to understand study participants' viewpoints in institutional and social contexts of which meanings are lost when data is quantified like what happens with quantitative data (Rakotsoane, 2012). Therefore, it was necessary to talk to participants during interviews and focus group discussions so that they could argue and stand for their beliefs in Deaf education in selected primary school.

The qualitative research approach is essential because it uses *phronetic* approach (Tracy, 2013). This means that its data is systematically gathered, organised, interpreted, analysed and communicated to meaningfully address world issues and concerns. This study aimed at meaningfully addressing issues related to the academic experiences of deaf children in a primary school. Many qualitative researchers, especially young researchers, who do not have comfortable offices or laboratories, opt for a natural environment with self-reflexivity, cheaper fieldwork, and rich data descriptions in consideration (Tracy, 2013; Prasad, 2017).

The qualitative approach may lead to deep relationships between the researcher and the participants. These relationships may lead to trust and disclosure of critical information (Leedy &

Ormrod, 2015; Atieno, 2009). For example, the qualitative research approach is likely to gather insight about marginalised, minority, stereotyped, or discriminated populations (Leedy & Ormrod, 2015). In this study, the approach assists in acquiring information on marginalised deaf children in a primary school. According to Tracy (2013), the qualitative research approach is useful for eliciting tacit and generally ignored information to gain intuitive understandings of cultures through accessing information through observations and hearing information about the subject under study directly in the context rather than simply getting a part of the story of the participants. This scenario may lead to an understanding of participants' values and how these influence their lives on a day-to-day basis. An excellent qualitative research approach is different from a quantitative research approach in that it is not just a snapshot. Still, it enables researchers and readers to understand their societies, their institutions, and the world in general by providing rich information and quality explanations in context.

4.2.2.2 Disadvantages of a qualitative approach

Although the qualitative research approach has many advantages, there are some inherent limitations or disadvantages. Data collection in qualitative research requires a lot of time to complete. Further, the process may involve several techniques (Rakotsoane, 2012). These may need the use of audio and video recordings, field notes, sketches, photographs, memos, or a combination of these techniques (*ibid*). Qualitative research requires the presence of the researcher during the data collection process, which can be a tiring experience on the part of the researcher (Creswell, 2014; Creswell & Creswell, 2017). Further, resources for implementing qualitative techniques may require money for their procurement. The qualitative approach is a disadvantage in that it limits the identification of cause and effect relationships, that is, questions that may require the use of experimental studies to answer questions related to cause and effect relationships (Leeny, & Ormrod, 2010; Leedy & Ormrod, 2015).

4.3 Research paradigm

Tracy (2013) defines a paradigm as the pair of glasses that one wears to view the world; hence, one should choose the best glasses to wear to see the world positively. A paradigm is a way of viewing and understanding reality, constructing knowledge, and gathering knowledge about the world, which may depend on ontology, axiology, epistemology, or methodology (Tracy, 2013;

Merriam & Tisdell, 2015; Tracy, 2019). This study adopted the interpretive paradigm basing on the way humans understand reality. For this study, an interpretive model was adopted to view participants' narrations.

4.3.1 Interpretive paradigm

Interpretivism refers to the essential nature of people's character and participation in both social and cultural lives (Berger & Luckmann, 1967; Lincoln & Guba, 1985; Elster, 2007; Mertens, 2010; Creswell, 2014). Its central attempt may be to understand the subjective meanings of individual experiences about the world, where they live, and work in (Guba & Lincoln, 1994; Tracy, 2013; Creswell, 2014). The choice of this paradigm was of significance to this study for many reasons. Firstly, the diversity of views acknowledged that interpretive researchers could not only describe objects, humans or events; thus, they may also deeply understand them in a social context. Tuli, (2010) indicated that Interpretivism is beneficial to researchers that conduct diverse research in natural settings. For example, they may use several methodologies that may yield authentic information related to the object of research.

Secondly, Interpretivism allow the researcher to investigate and prompt things that we cannot observe. Further, researchers can probe an interviewee's thoughts, values, prejudices, perceptions, views, feelings, and perspectives (Wellington & Szczerbinski, 2007). In this study, the interpretive paradigm helped the researcher to probe the participants' thoughts, values, views, feelings, perspectives and perceptions during interviews. Since the researcher personally conducted the interviews, he had the chance to probe for more information from the interviewees. The interpretive paradigm may help with valuable data, which may provide researchers with better insights for further action at a later stage (Pham, 2018). Interpretivism is a good paradigm because of its basis in naturalism and its focus on subjectivity or diversity, honouring participants' construction of meanings in their social and wider context as well as the mutual construction of meanings by the participants and the researcher (Flick, 2014). In line with this, Kothari and Garg, (2014) argue that only through the subjective interpretation of social reality and intervention in reality can that reality be fully understood. In this study, views of the participants were presented in narrative form allowing interpretation of these views to be subjective. Readers could also interpret these views to come up with their subjective meanings. The researcher conducted the research in the participants' natural settings, hence, the Interpretivism was the ideal paradigm.

The study of phenomena in their natural setting, which may encourage many interpretations of reality, is key (Kothari and Garg, (2014). The interpretive paradigm is also known as the constructionist paradigm or constructivism (Tracy, 2013). According to the interpretive paradigm, reality may not be created, explained, described, or translated to findings by the researcher but it may be something that can be socially created and reproduced through interactions (Tracy, 2013; Creswell, 2014; Kumar, 2019; Tracy, 2019). In concurrence, the proponents of the interpretive paradigm say that reality is socially constructed (Berger & Luckmann, 1967). Interpretivists believe that humans strive to understand the world they live and work in through subjective meanings of their experiences (Kumar, 2011; Creswell, 2014; Creswell & Creswell, 2017). Participants' views are more meaningful when they are socially constructed. This made Interpretivism a relevant paradigm for this study.

In this research study, subjective experiences of deaf children, administrators, teachers in the primary school as well as those of psychologists in their social context were the focus. These meanings are varied and subjective; hence, the researcher considers the complexity of the ideas rather than narrowing them to restricted categories (*ibid*). When operating within the contours of an interpretive paradigm, the goal is to mainly depend on the participants' views on the subject under study in a particular context with broad, open-ended, and general questions so that participants create meanings of the context in discussions or interactions (Creswell, 2014).

In this study, in-depth interviews and focus group discussions were used to allow participants the flexibility to freely express the meanings of their stories in the discussions in their context. Tracy, (2013) defines an interpretive paradigm by giving an example of a tree falling in the bush with no one there to listen and hear it and then ask an interpretive researcher if the falling tree made a sound. A typical response from an interpretive point of view or a constructionist would be “there may have been no sound considering that sound needs a listener to exist, or there was a different sound depending on who or what was there listening when the tree fell and when the sound was produced” (Tracy, 2013:40), say, a dog, a boy or an old woman would come up with different sounds.

In light of the above, interpretivists would argue that sound may differ from person to person or even from environment to environment (Tracy, 2013; Tracy, 2019). Thus, for Interpretivism, when

the researcher collects data, there must be a speaker and a listener who have different sound interpretations; that is, the discussions are interpreted in divergent and subjective ways. For this study, the researcher used in-depth interviews for deaf children, administrators, and psychologists to fully allow these participants to express their views. Similarly, focus group discussions were conducted with teachers to collect data with the freedom to express themselves divergently in a shared effort. Participants in FGDs share ideas in presenting an idea, debate it and produce divergent views (Berg, 2001; Lapan, et al., 2012). The interviews and FGDs required interactions between the researcher and the participants. The researcher spoke while participants listened and vice-versa. The meanings that were generated in this context were socially constructed. Subjective meanings from these discussions or interactions were not forced on participants. Instead, these were socially constructed through discussions and interactions among participants through historical and cultural norms that define the context of the participants (Creswell, 2014; Creswell & Creswell, 2017).

According to Creswell, (2014), when using Interpretivism, questions are tackled through discussions and interactions between the researcher and the participants and the meanings negotiated both socially and contextually. The more the questions become open-ended, the more they become better since they give the researcher adequate room to carefully listen and observe non-verbal cues and body language of the participants in their natural settings (Creswell & Creswell, 2014; Creswell, 2017). Interpretive researchers place themselves in positions to understand the specific contexts in which their participants live and work to understand these historical and cultural contexts. At the same time, they understand that their backgrounds determine their interpretations of participants' responses in their context so that they [researchers] position themselves in the study at hand and appreciate how their interpretations based on personal, interpersonal, cultural and historical background influence the findings of the study (Creswell, 2014). The key advantage of using Interpretivism is that researchers can make interpret the meanings that participants have about the world, rather than having theory first as what post-positivists do, and then generate a theory or patterns of meanings out of this.

Interpretivist researchers claim that it is necessary to analyse social actions for the view of the participant, a phenomenon they commonly refer to, using a German word, as *verstehen*, whose literal translation is "to understand" (Tracy, 2013:41). This concept was the brainchild of a German

philosopher, Wilhelm Dilthey who viewed the idea as a way of gaining an insight into the participants' viewpoints, cultural beliefs, or attitudes. As a result of these views, Interpretivism views the adoption of qualitative methodology as a moral and value obligation embedded in ethical issues (Tracy, 2013; Tracy, 2019). Interpretive researchers consider knowledge as being socially constructed using language and dialogue. Further, they view reality as being intertwined in society's cultural and ideological issues (Tracy, 2013). In this study, the researcher collected data from participants situated in their natural settings and understood the data from the viewpoints of the participants, accommodating both subjectivity and diversity.

4.3.2 Assumptions of the interpretivist paradigm

Interpretivism holds the assumptions based on Crotty's (1998) proposition that meanings are socially and inductively constructed as humans share stories. Interpretivism uses open-ended questions so that participants fully share their lived experiences through narration (Connelly & Clandinin, 1990; Clandinin & Connelly, 2000; Caine, Estefan, & Clandinin, 2013; Clandinin, Caine, Lessard, & Huber, 2016). For this study, all items in both interviews and focus group discussions were open-ended to allow participants to fully express themselves as they shared their lived stories with the researcher and eventually with other researchers and readers.

Humans have meanings of the world they live in as bestowed on them by their culture; hence, they engage in this world and make sense of it basing on their historical, cultural, and social (Sandelowski, 1991; Heinen & Sommer, 2009; Andrews, Squire, & Tamboukou, 2013). This assumption indicates that the cultural, social, and historical backgrounds of both the researcher and the participants are significant in constructing meanings from their interactions. Interpretivism, therefore, seeks to understand the context in which the participants are and the researcher visits them to collect data personally (Chodhury, 2014). Interpretivist researchers also interpret the data in line with the cultural, historical, and social context of the participants basing these interpretations on their (researchers) background and experiences (Creswell, 2014). In this study, the researcher visited the participants in their usual environments to collect data. The interpretations were based on participants' cultural, historical and social contexts.

Interpretivism holds the assumption that meanings are socially and inductively constructed, basing them on interactions with participants in their context. Meanings are generally subjective

(Creswell, 2014; Creswell, 2017; Tracy, 2019). For this study, meanings were socially and inductively constructed through discussions and interactions during both focus group discussions and interviews.

The researcher is an instrument or research tool in data collection, not an inert or inanimate figure (Creswell, 2014). In line with this, qualitative researchers collect data themselves; they do not send other people to collect data for them (Lapan, Quartaroli, & Riemer, 2012; Tracy, 2013). Further, they do not use instruments designed by other people. In this sense, qualitative researchers are critical figures in developing data collection instruments, collecting data themselves in the context of the participants and observe their reactions as well as socially constructing meanings of the data they collect in the context of the participants (Lapan, et al., 2012; Tracy, 2013). In this study, the researcher developed the interview schedules and FGDs guides and personally applied them for data collection.

4.4 Research design

Researchers define a research design in multiple ways. Yin, (2014:28) gave a colloquial definition of research design as “a logical plan for getting from here to there, where here may be defined as the initial set of questions to be answered, and there is some set of conclusions [answers] about these questions. Between here and there may be found several steps, including the collection and analysis of relevant data.” According to Kothari and Garg, (2014), a research design is a conceptual structure along which the study is conducted, focusing on how data is collected and analysed. Rakotsoane, (2012) refers to research design as a basic plan of the study and the logic that will make it possible and valid to conclude it. Kumar, (2011) defines research design as a blueprint or detailed plan of how the researcher is going to conduct a research study that includes operationalising variables so that they can be measured, selection of a sample data collection and data analysis to answer research question objectively, validly, accurately and economically.

Research design may be defined using an analogy of a house plan where on drawing the plan, the number of bricks, number of window frames, doors, bags of cement, the quality of roofing material, or so, is known. In the context of research, a research design, is a plan of how the researcher is going to conduct his/her research that may include sampling procedures, data collection, presentation, and analysis basing on the research questions to be answered. A research

design should show how sampling will be done, should show if there is need for control groups, should explain what variables are to be measured together with their relationships to external events and most importantly, it should allow the researcher to infer from the data collected to make generalisations, associations, and causality (Kumar, 2011; Rakotsoane, 2012; Yin, 2017). In this study, the target was to explore the academic experiences of deaf children at a selected primary school in Zimbabwe.

A research design shows the researcher's choice of data collection techniques; that is, how data is going to be generated and collected (Rakotsoane, 2012; Creswell, 2014; Creswell & Creswell, 2017). A good research design allows the researcher to collect data systematically, in the participants' context, so that it becomes easy to answer research questions conclusively (Rakotsoane, 2012; Yin, 2017). More so, a good research design allows the researcher to be able to distinguish between primary and secondary data sources (Rakotsoane, 2012). Rakotsoane, (2012) defines primary sources of data as surveys, meetings, interviews, focus group discussions, experiments, unpublished data sources or other techniques that involve direct contact with participants while secondary data sources are those sources that have been published or documented by other people, other than the researcher him/herself. These may include journals, books, archival records or biographies. For this study, the researcher collected data from primary sources using primary data collection techniques. Data collection techniques used were interviews for psychologists, deaf children, and administrators, while focus group discussions were used for collecting data from teachers.

4.4.1 Case study

This study adopted a narrative case study design. Case study is referred to as a particular example, instance, individual life cycles, small group or institutions from a class of events or issues that show how participants interact with components of these individuals concerning the subject under study (Lapan et al., 2012; Yin, 2014). This design involves an in-depth exploration from an institution in real life (Starman, 2013; Ponelis, 2015). According to Yin, (2014:16), "a case study is an empirical inquiry that investigates a contemporary phenomenon (the "case") in depth and within its real-world context, especially when the boundaries between phenomenon and context may not be evident."

A case study is a research design that is used for a thorough description of a complex phenomenon like important events to unearth a new and, more in-depth understanding of a phenomenon. In concurrence, Rakotsoane, (2012); Ponelis, (2015) say that a case study is a comprehensive study of a single institution, event, group or so which serves as a 'case' to be investigated, which is meant to establish a clear understanding of the phenomenon being studied and is commonly used when there is a new phenomenon which is not entirely known. It is an in-depth study, not a “sweeping statistical survey” (Rakotsoane, 2012:31), of a single situation that is used to narrow down a broad area of study to a manageable topic. A case study, therefore, is an in-depth exploration of a single institution or group, in its context, to come up with a clear understanding of this institution or group. In this case, the study focused on deaf children's academic experiences at a selected school primary school in Zimbabwe to come up with a clear understanding of their academic experiences.

Researchers may want to adopt a case study because they may want to understand a real-world case assuming that such an understanding may involve contextual issues about the participants, which are critical to the case being studied (Yin, 2014; Creswell & Creswell, 2017). In this case, the researcher conducted an in-depth study of a narrow field of study and produced rich information on the subject under investigation. Focusing on a case saved the researcher's money and time, while allowing him more time with participants to fully express themselves as they tell their lived stories (Creswell, 2014, Yin, 2014, Yin, 2017). A case study is an in-depth study a single case that suits new phenomenon or phenomena whose boundaries are not clearly defined (Rakotsoane, 2012; Yin, 2014). This makes a case study research design a better design for this study to deal with a contemporary case of academic experiences of deaf children in a primary school. Thus a case study is a better choice of research design for this study than any other design because of its main emphasis on the context of the participants and the study (Rakotsoane, 2012). A case study focuses on the participants in their natural setting, thereby allowing researchers to collect data personally from the field without taking participants from the world in which they live and work.

A case study should not be viewed as a whole research design but a design that incorporates several methods (Starman, 2013). It should be blended with other designs. According to Laurel, (2014), a good case study should be in narrative form, allowing participants to tell their lived stories. According to Rakotsoane, (2012), a case study research design is a flexible approach which may

make it either a descriptive or exploratory case study research design. The flexibility of a case study allows it to incorporate a narrative research design into a case study research design to come up with a narrative case study design which is exploratory. As such, this study employed a narrative case study design.

4.4.2 Narrative design

Interpretivists adopt a narrative research design because they want to address differences in narrations, which may be contradictory to represent in a dialogical way and accept the differences mutually (Flick, 2014). Interpretive researchers use the narrative research design to address such social issues as social inequalities, gender imbalances or health issues as they criticise researchers who treat participants as only sources of data rather than also treating them as figures who socially construct meanings in the subject being studied and express these meanings in their social context (Lapan et al., 2012; Flick, 2014; Creswell, 2014, Creswell & Creswell, 2017). In this research study, the narrative research design was used to address social issues about deaf children's academic experiences through interactions. Tracy, (2013) says that Interpretivism views stories as fundamental issues to humans. Stories serve to construct a guide to human experiences even though humans tend to exaggerate or forget some facts, thus narratives provide a platform of how other humans interpret some situations and construct reality (Lapan et al., 2012; Tracy, 2013; Tracy, 2019). For this research study, rich field notes accompanied with observations of participants' reactions and audio recordings were gathered and presented in narrative form, mostly as direct quotes.

Observations of participants' reactions to the questions and audio recordings were meant to triangulate data collection to ensure accuracy in data collection, presentation and analysis to accurately represent the meanings of the participants. Proponents of the narrative research design, (Connelly & Clandinin, 1990) argue that the narrative case study research design is used by researchers to describe the lives of participants, collect stories, as told by participants about their lives and write stories of these participants' experiences in detail (Sandelowski, 1991; Clandinin & Connelly, 2000; Lapan, et al., 2012). The narrative case study research design captures and investigates experiences as human beings live them in time, in space, in-person and relationship (Clandinin & Connelly, 2000). The narrative design is preoccupied with understanding and inquiring into lived experiences through collaborations between the researcher and participants

over time, in a place and social interaction (Clandinin & Connelly, 2000). The voices of participants should be heard by stakeholders to improve services (Oppong & Fobi, 2018). It was important to hear the voices of the deaf children, the teacher who taught them, the administrators and the psychologists on the academic experiences of deaf children.

Narrative research design values the sharing of stories between the participants and the researcher. The narrative research design makes participants feel that sharing their stories is important and believe that their stories are heard as they share them (Connelly & Clandinin, 1990). Lapan, et al., (2012) aver that a narrative research design empowers those who are socially, politically, culturally and economically marginalised. In this case, the researcher applied narrative research design to the study of deaf children's academic experiences, given that they may be marginalised both in the community and in the school. The study sought to explore their academic experiences, so that they are empowered through self-expression as they tell their stories during narrative data collection. It also focused on teachers, psychologists, and administrators as they shared their stories on the education of deaf children at the primary school. Thus, the narrative research design may be considered as an emancipatory approach to marginalised groups, deaf children in primary schools (Heinen & Sommer, 2009; Lapan et al., 2012). It may be argued that the narrative research design may be used to listen to the voices of the historically silenced groups to provide a rich knowledge base on their stories taking cognisance of race, ethnicity, language, disability, gender, or sexual orientation (Tamboukou, & Squire, 2008; Lapan et al., 2012; Andrews, Squire, & Tamboukou, 2013).

In this study, the narrative research design was used to hear the voices of deaf children in a primary school in Zimbabwe as well as those of teachers, school administrators, and psychologists on the same subject. Lapan et al., (2012) also note that narratives of dominant groups are also important in a research study so that their views and attitudes about the weaker or marginalised groups are heard. In this study, narratives of the dominant groups in the education of deaf children in primary schools in the form of teachers, administrators and psychologists were considered during data collection through focus group discussions and interviews. Interpretive researchers who use the narrative research paradigm seek to understand and represent the experiences of their participants through lived stories that these participants narrate (Clandinin & Connelly, 2000).

Stories told by participants give a platform for researchers to understand new knowledge and enhance existing knowledge about the subject being studied as well as striving to represent the told stories as accurately and completely as possible (Andrews, Squire, & Tamboukou, 2013; Lapan et al., 2012). This study sought to give mainly teachers, administrators, psychologists and the researcher new knowledge about the education of deaf children in primary schools as well as giving the chance to enhance their existing knowledge on deaf children in a primary school in Zimbabwe. This accurate and complete representation of data collected from participants ensured accurate representation of the stories and their interpretations to come up with world meanings on deaf children's academic experiences as well as those of the rest of participants in their context.

According to Lapan et al., (2012), narrative researchers collect data using various data collection methods such as interviews, focus group discussions, observations, journals or photographs to fully represent participants' lived stories which they present and analyse through 'restorying' participants' stories accurately (Heinen & Sommer, 2009; Lapan et al., 2012). This study used interviews and focus group discussions as its data collection methods and presented and analysed the data through 'restorying' in a way that accurately and precisely represented participants' meanings; that is, in a narrative form, making narrative research design a relevant design for the study. Using direct quotes is a key feature when conducting research within the ambit of narrative research design so that readers, apart from the interpretations of the researcher, can make their interpretations from the direct stories as told by the participants (Spector-Mersel, 2010; Andrews, Squire, & Tamboukou, 2013). According to Lapan et al., (2012:219), researchers should “strive for ways to preserve the integrity of research participants' narratives, and to have their lived stories become stories told in the complete way possible”. Thus, researchers should strive to precisely, explicitly, and accurately present participants' told stories, mostly using direct quotes to avoid distortions and exaggerations of participants' meanings in their context.

Researcher should ensure that they reflect the views of the participants so that these views do not lose meanings. According to Lapan, et al., (2012); Compton-Lilly et al., 2015 narrative researchers should use, interviewee's words as reflected in the interview or focus group discussions so that distinctive issues and some details that may be overlooked or undervalued may be captured by readers and may make sense out of them (Compton-Lilly et al., 2015). In this study the researcher used the participants' words in verbatim, hence, the readers could have full information of the

phenomenon under discussion as directly from the participants. There was, therefore no distortion of information from the participants and the readers could make their own interpretations, although it may be different from those of the researcher. Interpretations are often based on the reader's historical and sociocultural context.

4.4.3 Narrative case study research design

This study employed a narrative case study design. A narrative case study or storytelling is a research design that critically analyses social and cultural contexts of human experiences (Tamboukou, Squire, 2008; Andrews, Squire, & Tamboukou, 2013; Compton-Lilly, 2015). Narrative case study design is a research design through which researchers systematically gather, analyse, and represent participants' stories as they are told by the participants themselves (Clandinin & Connelly, 2000; Tamboukou, & Squire, 2008). The narrative case study research design captures and investigates experiences as human beings live them in time, in space, in-person, and relationship (Clandinin & Connelly, 2000; Heinen & Sommer, 2009; Spector-Mersel, 2010). Its purpose is to describe the lives of participants, collect stories as they are told by participants about their lives, and write the stories of these participants' experiences in detail (Connelly & Clandinin, 1990). For this study, participants in the form of deaf children told stories of their academic experiences in a primary school in Zimbabwe during interview sessions, in their context. In contrast, psychologists told their stories of the academic and psycho-social experiences of deaf children in a primary school in Zimbabwe during their individual interview sessions. Teachers also told their stories about the academic experiences of deaf children during focus group discussions.

The narrative case study design concerns understanding and inquiring into lived experiences through collaborations between the researcher and participants over time, in a place and social interaction as participants tell their lived stories, which the researcher interprets and give meanings in the historical and socio-cultural context of the participants (Clandinin & Connelly 2000; Tamboukou & Squire, 2008; Lapan et al., 2012; Tracy, 2013; Tracy, 2019). Thus, narrative knowing, through telling stories, is a way of gaining knowledge as created and constructed through stories of lived experiences of participants, as well as the meanings they create which help in making sense of human nature and the ambiguity and complexity of human lives (Bruner, 1986; Bruner, 2009). Stories may be viewed as a window through to knowing reality (Etherington, 2007).

Narrative inquiry allows researchers to listen to participants and hear how they construct meanings from within their values, beliefs, and attitudes that determine how they come up with their meanings (Clandinin & Connelly, 2000; Etherington, 2009). Thus, narrative case study research design entails participants sharing their lived stories with researchers. However, the researchers have their backgrounds and cultural perspectives, should strive to interpret and give meanings in line with participants' meanings and contexts as influenced by their values, beliefs, and attitudes. This is based on the idea that participants feel that sharing their lived stories is crucial, that their lived stories are heard as they tell them, and that telling stories leads to gaining knowledge (Bruner, 1986; Connelly & Clandinin, 1990; Etherington, 2009). The researcher chose the narrative case study design to allow participants to share their stories in narratives for readers to understand them as they interpret them in their context. Readers get the meanings of the stories from the researcher's interpretations as well as right from the story-teller. Narrative case study design focuses on participants' experiences, their qualities of life, and their academic experience (Connelly & Clandinin, 1990; Bruner, 2009). Thus, allowing participants to tell their stories in this study could improve the experiences, quality of life, and education of deaf children at the primary school in Zimbabwe as people may understand the stories better right from the original sources.

4.5 Research setting

The study was conducted at a selected council primary school in Harare Metropolitan Province, Zimbabwe. Council schools are public schools. The school was chosen because it had a larger number of deaf children compared to other schools that were seen by the researcher. At the time of data collection, the school had sixteen deaf children, excluding the other nine who had just completed their grade seven examinations. This means that at the beginning of the year, the school had enrolled twenty-five deaf children. The researcher expected to get quality data from a school that had many deaf children. The location of the school was in the High/Glen District, twenty-three kilometres south-west of Harare Central Business District. The school is located in one of the density suburbs in the district, with an enrolment of over two thousand pupils. It is situated in close proximity to the District Education offices where the District Remedial Tutor (DRT) is housed. Therefore, it was easy for the DRT to monitor the implementation of the recommendations of the Schools Psychological Services (SPS). The school had an Early Childhood Development

(ECD) block to the south-eastern side of the administration block. There were no deaf children attending classes in the ECD section.

The deaf children at ECD level attended classes in the resource units like other deaf children. To the north of the administration block were the classroom blocks for grades one to seven. The classroom block that housed the resource units was second from the administration block northwards. These classroom blocks stretched from the east to the west and the resource units were first from the east. There were two resource units which were simply a classroom divided by cupboards. The deaf children used the same door to enter into the resource units and the infant grade levels proceeded to the other side of the cupboards, which was their resource unit. The resource units were not acoustically treated. Apparently, they were not different from the learning spaces for the hearing children. The only difference was that here there were deaf children, hence, they were referred to as resource units. Deaf children mainly learned in these resource units.

The resources rooms were manned by two female specialist teachers. The education of the deaf children was mainly the responsibility of these specialist teachers. Of the two specialist teachers in the school, one of the specialist teachers was deaf and she purely subscribed to the Deaf culture. She taught deaf children who were at infant level, that is, ECD A to grade two or three depending on the composition of deaf pupils who were enrolled. The school's enrolment comprised both hearing and deaf children. There were sixteen deaf children (eight boys and eight girls) enrolled at the school during the period of data collection, excluding those who had just completed their grade seven examinations. This school was located in a high density suburb. There were other high density suburbs surrounding the school, which were both within walkable distance. The deaf children lived in this and the surrounding suburbs. They all walked to school.

4.6 Study participants

Selection of participants was based on population, sampling, and sample.

4.6.1 Population

A study draws its data from participants, and the findings should be generalised to the entire group with similar characteristics (Best & Khan, 2006). According to Gay, Mills, and Aurasian, (2012), population refers to social members, which may be any size covering any geographical space, with

characteristics that are of interest to the researcher A population is a group of members or elements, which is of importance to the research to which findings of the study may be generalised (Magwa & Magwa, 2015). Population means the entire group of persons, elements, or objects the researcher intends to study (*ibid*). Rakotsoane, (2012) defines a population as a group of members or components, to which findings are intended to be generalised, that conform to the researcher's criterion or criteria. Best and Kahn, (2006) define a population as any group of individuals that has one or more characteristics in common and which is/are of interest to the researcher. Population, thus, is a group of elements that have the characteristics that are desirable to a researcher because they make the researcher's study possible.

Population should be accessible to the researcher. An accessible population is a group of participants that is accessible to the researcher and to which the researcher can legitimately generalise his/her findings (Magwa & Magwa, 2015). However, Atieno, (2009) indicate that findings of a qualitative research cannot be generalised to larger populations since they are not tested to discover if they are statistically significant or due to chance. The accessible population allows the researcher to realistically select participants for a research study. These sets are useful for easier access and saving of time and resources. In an accessible population, the sample size can be drawn, and results can realistically and legitimately be generalised. The accessible population delimitations reflected all primary schools that included deaf children in Harare Metropolitan Province. Dealing with the accessible population may reduce travelling costs, time to conduct the study, and the study may be manageable (Magwa & Magwa, 2015). For this research study, the accessible population comprised four school administrators at the selected school, sixteen deaf children at the selected school, thirty-two teachers at the selected school, and ten educational psychologists in the province in which the selected school was located.

4.6.2 Sample

The ideal situation in conducting a study is to study all elements of the group being considered, that is, the accessible population (Rakotsoane, 2012). However, Rakotsoane, (2012) posits that the scenario of studying every member of the accessible population is 'prohibitively time consuming and expensive'. To avoid this challenge, the researcher has to use a smaller group from the accessible population known as a sample. A sample is a smaller size of the selected members for data gathering purposes and generalisation of findings (Kothari & Garg, 2016). According to

Rakotsoane, (2012), a sample is a smaller part of the population that is chosen and studied to determine the parameters or characteristics of the entire population.

4.6.2.1 Sampling

There was need to select participants who could provide relevant and quality information using purposive sampling. According to Rakotsoane, (2012), purposive sampling entails selecting particular participants from the study population that will provide rich information so that findings may be generalised to the population. Basing on his/her knowledge, the researcher selects participants who are abundant in the information that s/he can use to address the topic. Thus, purposive sampling entails choosing participants who have relevant knowledge on the topic under study. According to Leedy and Ormrod, (2015), in purposive sampling, participants are selected for a specific purpose, making them relevant for the study. This ensures getting relevant and quality data from the participants.

In a qualitative research, sampling is theoretically based. The participants and their number may not be predetermined but be determined by theoretical saturation. According to Edwards and Holland, (2013), a key characteristic of qualitative research is that it is theoretically driven, hence, the selection of a sample is based on this characteristic. This brings in the concept of theoretical sampling. The phrase ‘theoretical sampling’ was coined by Glaser and Strauss, (1967), with its roots in grounded theory. Barney Glaser and Anselm Strauss suggest that a qualitative researcher should not necessarily start with a *sample set in stone*, but should modify it and involve further cases as data analysis unfolds (Glaser & Strauss, 1967; Corbin & Strauss, 2008; Edwards & Holland, 2013; Fusch & Ness, 2015; Saunders et al., 2017). It is from this background that Edwards and Holland (2013) argue that data generation in qualitative research is on the process rather than an end point of numbers, thus, the concept ‘sample’ in qualitative research is not appropriate. This could mean that a qualitative researcher should start with a tentative sample that s/he adjusts depending on the data that s/he wants.

This study had a tentative sample of administrators, teachers, deaf children and psychologists. The tentative sample comprised two (2) school administrators (n=2) from the selected primary school. The administrators were sampled because of their relevance in managing inclusive education issues, procuring resources for inclusive education, and implementing educational policies at the

school level, thereby being rich in deaf children's academic experiences. Eighteen teachers (n=18) from a selected school were chosen to make three (3) focus group discussions of six (6) teachers each. They were sampled because they participated in teaching deaf learners; hence they were well versed in deaf children's academic experiences. Because of the need to strike a gender balance in the representation of views of the participants, nine (9) male and nine (9) female teachers were sampled to participate in the study. Five deaf children (n=5) from the selected school were chosen to share their academic experiences in the primary school. Two male and three female deaf children were selected to get a fair share of expression of views on their academic. Four psychologists (n=4) who were working in the province in which the selected school was located were sampled to elicit information related to psycho-social experiences of deaf children. These psycho-social experiences influenced the academic experiences of deaf children in the primary school. All the participants were living at their respective urban homes in Zimbabwe with learners living with their individual parents. All participants had Shona as a common home language. The participants, therefore, had a similar background and could have similar understanding of the subject under study.

4.6.2.2 Theoretical data saturation

The sample size of qualitative research may be determined by theoretical saturation of data (Saunders et al., 2017). According to Walker, (2012), theoretical saturation is obtained when there is adequate information to reproduce the study. Fusch and Ness, (2015) say that theoretical data saturation is when there is no more new data, no more new themes, and no more new codes coming from the participants. Theoretical data saturation is when no additional data is being generated from the participants as the researcher notices that the data, themes, or codes are recurring to his/her satisfaction that no more new data, codes, or themes are coming out (Saunders et al., 2017). To this effect, the researcher may be satisfied that saturation has been reached or may look for other participants. They may bring in new data, themes, or codes. According to Given, (2016), theoretical data saturation occurs when there is no new data, codes, or themes that are emerging from the participants. Hence, a further collection of data is no longer necessary. Theoretical saturation of data, therefore, is when the data collected from the participants is recurring and is no longer producing new themes or codes. The same data, codes, or themes from the participants recur such that the researcher is satisfied that s/he has adequate data for the study or that s/he has to look for other participants to bring in new data, codes, or themes.

Glaser and Strauss, (1967) note that when no new data is emerging, the data becomes redundant, or when new data is not bringing new information, there is boredom on the part of the reader. The researcher, therefore, decided to drop out some participants to avoid redundant or boring information to the readers and brought in a new participant to try to bring in new information. Lapan et al., (2012) indicate that in theoretical saturation, researchers should ensure that there are no vague or unclear definitions in the study to help them maintain focus on their data collection and analysis. To this effect, the researcher adjusted the research questions to align them with the words in the study topic without necessarily changing the meaning. This was only done to make them focused on the research topic as well as to make them more transparent in terms of the research topic and what was in the field. The word inclusion was replaced by 'primary schools'. The researcher realised that that the experiences of deaf children were not strictly in inclusion but generally in the school, for instance, in learning or sports in exclusive set-ups in the school, and they could experience a lack of resources or communication challenges.

According to Fusch and Ness (2015), there is no universal method of determining theoretical data saturation. For this study, there was no new information emerging, and there was redundancy in the emerging data (Glaser & Strauss, 1967) in (Taylor, 2016); hence there was a need to drop out one FGDs and one psychologist and add one Deaf teacher to fill in the gap where there was no information saturation. Dibley, (2011) advises that the researcher should consider the richness and thickness of the data collected to realise theoretical data saturation. The researcher has to find whether the data he has collected is of the necessary quality for the research, or the data is enough for a complete study. Thus, the data should have merit and should be enough to do meaningful research. For this study, saturation was mostly about the quality of the data that was generated from the participants. Theoretical data saturation in this study led to adjustments in the sample, specifically on the numbers on the psychologists who were initially four (4) and were reduced to three (3) and the focus group discussions which were initially three (3) and were reduced to two (2) as well as the emergent of another participant in the form of the Deaf teacher. These changes are fully shown under their respective data collection methods.

4.7 Data collection methods

The study employed two research methods to collect qualitative data from the participants (deaf children, teachers, administrators, and psychologists). These were focus group discussions and

interviews. The researcher designed interview schedules for administrators, deaf children, Deaf teacher, and psychologists and focus group discussion guide for teachers and personally used them to collect data.

4.7.1 Focus group discussions (FGDs)

The study had two FGDs (*see appendices 11 & 12*). The researcher designed the FGD guide and used it to collect data from teachers. The history of focus discussions stems from their first use in the study of morale in military camps during the Second World War and eventually generalised to studies such as market research to obtain the views of the public in relation to radio programmes and eventually to general qualitative researches (Lapan et al., 2012; Leedy & Ormrod, 2015). According to Then and Rankin (2014), focus groups refer to grouping participants so that they respond to questions as a group to get in-depth knowledge of their attitudes, perceptions, beliefs, and opinions regarding the phenomenon under study. FGDs are used to collect data from a group or groups of participants (Ladimeji, 2013; Adhabi & Anozie, 2017). The essence of the FGDs is motivated on the individual interactions and reactions in the group, with the interviewer paying attention to verbal and non-verbal communication as the participants interact (Abawi, 2013; Then & Rankin, 2014; Adhabi & Anozie, 2017). FGDs as a single interview of a group counterpart requires that the researcher recruits and convenes a small group of individuals and then preside over the discussion to get the participants' views about the topic being studied (Yin, 2014). During the FGDs, a moderator leads a group of participants through some questions about the topic (Rakotsoane, 2012; Yin, 2017; Adhabi & Anozie, 2017). Thus, FGDs rely on interactions within the group, and not strictly on the question and answer format of the interview (Rakotsoane, 2012; Ladimeji, 2013; Abawi, 2013).

The use of FGDs was suited in this study because they are cost-effective, which involves the discussions of the whole group related to their experiences at the same time uncover participants' perceptions and values, although some participants may not open up fearing group members (Nyumba, Wilson, Derrick, & Mukherjee, 2017). The FGDs were also suitable for this study because they were compatible with the interpretive paradigm of collecting narrative data from participants as they narrate the lived stories (Adhabi & Anozie, 2013).

The recommended number of participants for FGDs ranges from a minimum of six to a maximum of twelve (Lapan et al., 2012). The number can be even smaller, like in the case of Michelle Fine and Pat Macpherson in 1992 when they convened an FGD when they invited four teenage girls for a dinner of pizza and soda to talk about 'being young women' in the 1990s (Lapan et al., 2012). Furthermore, according to Tracy, (2013), focus group discussions should have a minimum of three and a maximum of twelve participants to give each participant space to participate. It is important that the group be small so that every participant may have a chance to participate, and big enough for quality and diverse participants leading to quality data. However, FGDs may not be appropriate to collect sensitive information (Onwuegbuzie, Leech, & Collins, 2010; Lasch et al., 2010; Lasch et al., 2012; Fusch & Ness, 2015). Thus, focus group discussions should enable all participants to participate in collecting quality data. In this study, the data sought was purely academic, and not of a sensitive nature.

For this study, the FGDs comprised six members each to enable all of them space to participate at the same time, conscious of the need for quality data. Each FGDs had six teachers, three (3) males and three (females), respectively. A smaller group of participants would yield less qualitative data while a larger one would produce some inactive members through the FGDs processes. Six members per FGDs was the ideal number for this study. This was the new sample for FGDs that was practically used. In FGDs 1, there was a hearing specialist teacher for the deaf. The study had initially targeted three FGDs but when similar data were collected from two FGDs, the researcher dropped the third one. There was data recurrence from FGDs, hence, there was data saturation (Packer-Muti, 2010). In this study, therefore, theoretical saturation affected sampling for focus group discussions. Theoretical data saturation, therefore, leads to the change in some parts of the sample. Initially, the study had targeted three FGDs of six (6) teachers each. Due to theoretical saturation, the initial sample of three (3) FGDs with eighteen (18) teachers, nine (9) males and nine (9) females was changed to two FGDs. The new sample had twelve (12) teachers, six (6) males and six (6) females.

FGDs were important in this study. Firstly, considering the time required to interview one participant, FGDs save time since several participants are interviewed at the same time (Phillips & Stawarski, 2008). Secondly, in FGDs, the interviewer acts as a facilitator or moderator, thereby giving the participants the freedom to express themselves freely (Phillips & Stawarski, 2008;

Rakotsoane, 2012; Taylor et al., 2016). Thirdly, FGDs have a synergistic effect whereby participants react, brainstorm, or debate on the contribution of their fellow participants (Berg, 2001; Lapan et al., 2012). Finally, FGDs save money as a single journey can be made to interview several participants to obtain qualitative data that cannot be elicited by a one-on-one interview (Phillips & Stawarski, 2008; Lapan et al., 2012). Its disadvantages lies in the need for like-minded friends since some participants may not open up when they feel the information is sensitive (Berg, 2001; Phillips and Starwarski, 2008; Lapan et al., 2012; Tracy, 2013). However, in this study the researcher did not encounter challenges with different views participants since they were all teacher who had similar views on the education of deaf children at the school. There were no administrators or other professions in the FGDs. It was by design to have teachers alone in the FGDs.

4.7.2 In-depth interviews

An interview is defined as a way of consultation by the researcher when he/she is driven by a purpose to seek knowledge of a subject as viewed by the individual being consulted (Adhabi & Anozie, 2017). Sewell (n.d) defines an interview as an ‘attempt to understand the world from the participant’s point of view, to unfold the participant’s experiences, to uncover the lived world before scientific world’. Interviews are referred to as face-to-face conversations between two or more people aiming to collect rich information from the participants (Tracy, 2012; Rakotsoane, 2012; Edwards & Holland, 2013; Creswell, 2014). Thus, an interview is a face-to-face interaction between the researcher and the participant as the researcher tries to understand the lived story of the participant as he/she narrates it on the subject under discussion. This study used in-depth interviews to collect data from deaf children, deaf teacher, administrators, and psychologists. This data collection method allowed participants to narrate their experiences on the academic experiences of deaf children in the selected primary school. Qualitative method uses narrative design as well as open-ended or in-depth interviews (Creswell, 2014). Hence, interviews were the ideal type of qualitative data collection methods for this study.

Bernard, (2012) says that the number of interviews one conducts should not be the criterion to determine theoretical saturation. Still, the quality of the data to that suffices to answer the research questions of his/her study. Fusch and Ness, (2015) state that the same interview questions should target several participants to reach theoretical data saturation, which may be a target difficult to

achieve if there is continual shifting of goalposts if different questions are asked. For this study, there were common questions for administrators, deaf children, and psychologists (*see appendices 13-16*). There were also some questions across the participants. Variations in questions for respective participants occurred when follow-ups to the responses were made. Saturation was reached when data, themes, and codes from FGDs and psychologists recurred (Glaser & Strauss, 1967; Aldiabat, 2018). For this study, theoretical saturation led to the change in the number of participants for psychologists. The same themes, data, and codes appeared over and over again from the three psychologists who were interviewed. As a result of theoretical saturation, one (n=1) psychologist was dropped from the initial four (n=4) who were targeted, to leave the study with three (n=3) psychologists as interviewees to avoid redundancy in the data generated (Glaser & Strauss, 1967, in Taylor, 2016). The same data was generated from the three psychologists who were interviewed, hence, data from the fourth psychologist was going to be redundant. However, another participant, one (n=1) deaf teacher was added to fill in the gap of the information that was still needed in terms of the academic experiences of deaf children in the selected primary school. It was necessary to get the information from the deaf teachers. However, the school had one deaf teacher, hence, only one deaf teacher participated in the study

An interview is the *favoured digging tool* in the social sciences (Hughes, 1971; Taylor, Bogdan & DeVault, 2016). Qualitative researchers rely to a large extent, on verbal accounts to learn about social life (Taylor et al., 2016). Thus, researchers in social researches *dig* using interviews; that is, they collect their data using interviews. An interview, therefore, is a critical tool in data collection for social researchers. The study, therefore, used interviews to collect data from psychologist, deaf children, the Deaf teacher and the administrators

An interview is a conversation focusing on gathering information on the 'life-world' of the participant leading to the interpretation of the information in terms of the meanings that interviewees attach to it (Alshenqueeti, 2014). An interview is a face-to-face conversation between an interviewer and an interviewee where the researcher asks questions to the participant to obtain information about the topic (Rakotsoane, 2012; Taylor et al., 2016). Thus, an interview is a face-to-face conversation between a researcher and a participant on a topic to gain some insight into it. Phillips and Stawarski, (2008) view an interview as a tool that enables the researcher to collect data that is difficult to collect through written responses or observations. According to Adhabi and

Anozie, (2017), an interview conforms to the interpretive paradigm which allows participants to express their views in narrations, hence, interviews were suitable for this study which adopted the interpretive paradigm.

An interview is also important when collecting data in which participants have to list the life stories which may be cumbersome to write on questionnaires (Phillips & Stawarski, 2008; Adhabi & Anozie, 2017). Benefits of interviews are that they give the researcher the chance to collect data on a face-to-face basis, thereby allowing both the researcher and the participant to clarify the issues or questions under discussion to make them explicit (Rakotsoane, 2012; Tracy, 2013; Adhabi & Anozie, 2017). Further, interviews allow participants to share their lived stories in detail through narrating their stories without being limited (Seidman, 2013; Taylor et al., 2016). Furthermore, interviews facilitate direct interactions and clarifications for social actions, giving room for probing and seeking explanations from both parties (Rakotsoane 2012; Edwards & Holland, 2013; Yin, 2014).

Among the limitations of the interview method is the fact that participants may not be free to express sensitive issues in the presence of the researcher and they may be worried about the searcher's writing of notes and being audio recorded (Alshenqueeti, 2014). Moreover, an interview takes a long time to complete (Adhabi & Anozie, 2017). For this study, the interviews stretched to as far as two hours, which is surely a long time. Interviews may also require the researcher to meet the travel expenses for both him/herself to the interview site (Adhabi & Anozie, 2017). For this study, the researcher only met his travel expenses since the interviews were conducted on working days at the participants' workplaces of and learning site for the deaf children.

The interviews for this study consisted of open-ended questions that focused on participants' points of view on deaf children's academic experiences (*See Appendices 13-16*). The administrators were requested to respond to questions on the academic experiences of deaf children in a primary school concerning deaf children's academic experiences. Some questions were asked to deaf learners, which related to the kind of support they received at the school and how they would overcome the challenges they faced at this primary school. Psychologists responded to questions on the psychosocial experiences of deaf children that had to do with their academic experiences. The deaf

teacher responded to questions on both academic and psychosocial experiences of deaf children at the selected school.

4.8 Research bias

Research bias may sway the research findings in a direction that may distort them. According to Leedy and Ormrod, (2015), the bias in a study refers to any condition, set of conditions, or influence that changes the data collected or the findings thereof. The interpretation of the data collected may be distorted. For instance, the researcher's tone during interview sessions or focus group discussions may influence the participants to hide some information or the interpretation of the researcher's personality may influence the respondents' willingness to open up even to reveal embarrassing information (*ibid*). This study discusses three sources of study bias, including instrumentation bias, response bias, and researcher bias.

4.8.1 Instrumentation bias

The way some instruments are structured may cause bias in the findings of the research. Instrumentation bias refers to how the instruments designed for a particular research study distort the findings of that study in one direction or another (Leedy & Ormrod, 2015). The questions in the instruments may determine that participant's responses to questions leaving out some critical issues to the subject, which may not have been included in the instrument. Thus, some variables are considered to be included in the instruments, while others may be overlooked and left out. For instance, in this study, some information on the academic experiences of deaf children might have been left out, which participants may have felt could have been included (Leedy & Ormrod, 2015). Leaving out some information may mean that the topic is not wholly tackled.

A few case studies end as initially planned, but researchers must make changes ranging from minor to major ones, including pursuing some unexpected issues or even identifying a new case study (Yin, 2014; Creswell, 2014; Creswell & Creswell, 2017; Yin, 2017). This could reduce the chances of bias as the researcher may pursue the line of the responses of the participants. For this study, in-depth interviews and focus group discussions, with open-ended questions, allowed the participants to be divergent in their responses, thereby covering a wide range of issues in connection with the academic experiences of deaf children in the selected primary school. The dialogic process during data collection also enabled all the participants to be divergent in their

responses and free to express themselves the way they wanted. This ensured that the information both the researcher and the participants wanted to include was not left.

4.8.2 Response bias

Bias may be caused by the responses that participants give to the researcher. According to Leedy and Ormrod (2015), conducting a research study using interviews or focus group discussions relies on ‘self-report’ data on what the participants think is true or what they think researchers want to hear to the extent that participants express their thoughts, experiences, and beliefs inaccurately, basing on their beliefs or in trying to please the researcher by giving him/her what they think is of interest to him/her. Participants intentionally or unintentionally provide biased information to the researcher to give him/her a favourable impression, a situation that is commonly referred to as ‘social desirability effect’ (Leedy & Ormrod, 2015).

Leedy and Ormrod, (2015) also note that some participants’ descriptions of their experiences are constructed on the spot when they have not been exposed to situations related to the question or have not thought about such cases until the researcher brings the issues to their attention through questions. These may be influenced by recent events, existing contexts, or flawed self-perception. For this study, the researcher established rapport with participants and requested them to be as faithful as possible in responding to the questions so that the study findings were going to be a true reflection of what was happening in the school, which could lead to accurate recommendations. This gave the participants the chance to open up in a relaxed and free environment.

4.8.3 Researcher bias

The researcher’s cultural background, values, beliefs, and expectations may influence the results of a study, (Tracy, 2012; Leedy & Ormrod, 2015; Tracy, 2019). Leedy and Ormrod, (2015) opine that no human being is entirely objective; the researcher may be inclined to one side or another in terms of views. This study had no exception. The researcher had his cultural background, beliefs, and values, which could have influenced the study findings. The researcher’s background, which included growing up in the hearing community, undergoing deaf studies, and eventually teaching deaf children, could have some influence on the findings of the study. However, the researcher chose to employ the narrative and dialogic way of collecting data and presented the data in

narrative form, as quotes so that readers could come up with their interpretation apart from those of the researcher (Riessman, 2002). This reduced bias.

4.9 Data collection procedures

Data was collected through two methods, namely the interviews and FGDs. Interviews were used to collect data from deaf children, the Deaf teacher, administrators and psychologists while FGDs were used to collect data from teachers. Data collection took place from the 25th of November 2019 to the 13th of January 2020.

4.9.1 Focus group discussions

Two focus group discussions were conducted. These were formed in the study, including FGD 1 and FGD 2).

(i) Focus group discussion 1 (FGD 1)

The FGDs took place on 25th of November 2019 with six teachers, three males, and three females at the selected school in Harare Metropolitan Province, High/Glen District, which is twenty-three kilometres south-west of the Central Business District (CBD). The FGDs commenced by the researcher introducing himself and the topic. The researcher also summarised the key ethical issues and gave a consent form to each participant. The participants signed and returned the consent forms. The participants responded to questions related to the academic experiences of deaf learners. The researcher met the participants in one of the resource units, which was allocated by the administrators as the discussion room. The FGDs were face-to-face discussions in which the researcher acted as the moderator at the same time clarifying questions or issues that were being discussed.

In this study, data from teachers were collected to explore deaf children's academic experiences and the means to overcome/minimise challenges in accessing academic services and determine the kind of psychological support that deaf children received from the school. Data were also related to information about the experiences that teachers were encountering in offering academic and psycho-social support services. The FGD took an average of one hour and thirty-five minutes, and discussions were audio recorded. The researcher sought the permission to audio record from the participants. The researcher allowed the participants to relax and be composed, through discussing

issues that were not related to the study. This allowed them to accustom themselves to the data collection environment. Data were, therefore, collected in a free and relaxed environment; hence, the participants were free to open-up, and express themselves fully. Data collection was in a dialogic way, with data presented in narrative form, mostly as direct quotes to avoid bias. Finally, the researcher thanked the participants for their participation in the FGD.

(ii) Focus group discussion 2 (FGD 2)

Scheduling of the FGDs 2 sessions was done four days before the interview date. The FGDs 2 took place on 25th of November 2019 with six teachers (three males and three females), at selected school in High/Glen District, Harare Metropolitan Province, twenty-three kilometres south-west of the Central Business District (CBD). The researcher met the participants in one of the resources units as allocated by the administrators at the selected primary school. The FGDs 2 commenced by the researcher introducing himself and the topic while handing the consent forms to the teachers. They signed the consent forms and returned them to the researcher. The researcher also summarised the key ethical issues and gave each participant a consent form. The participants responded to questions related to the academic experiences of deaf learners. This was a face-to-face discussion with the researcher acting as a facilitator or moderator. Face-to-face discussions enabled clarification of the questions that were discussed.

In this study, data from teachers were collected to explore deaf children's academic experiences and the strategies used to overcome/minimise challenges in accessing academic support services and determine the kind of psychosocial support that deaf learners received from the school. It was related to information about the teachers' experiences in offering academic and psycho-social support services. The FGDs took an average of one hour and thirty-five minutes, and the discussions were recorded using a digital audio recorder. The researcher sought permission from the participants to record the focus group. The researcher allowed the participants to relax and acclimatise with the data collection environment through discussions on issues that were not related to the study. Thus, data were collected in a free and relaxed environment, hence, the participants were free to open up and express themselves. Data collection was in a dialogic way, with data presented in the narrative form mostly in quotes to avoid bias. The researcher finally thanked the participants for their time they devoted to the FGDs process

4.9.2 In-depth interviews

In-depth interviews were conducted with deaf children (n=5), the deaf teacher, school administrators (n=2), and the psychologists (n=3), respectively.

(i) *Interviewing deaf children*

The researcher had face-to-face contact with deaf children during the interview process. The researcher was able to communicate in Sign Language since he had taught deaf children for over eight years. Deaf children were, therefore, interviewed in sign language. Five deaf children were interviewed on the same date on the 27th of November 2019. Scheduling of the interview sessions was done a day prior to the interview sessions. One of the administrators helped in this regard. The administrator informed the deaf children about the interviews. This was the only convenient way of communicating to the deaf children.

The interviews started with the researcher introducing himself and the topic as well as summarising key ethical issues. The researcher also gave the deaf children assent forms, which they signed and returned to the researcher. The researcher clarified the questions where and when it was necessary. No audio recordings were made for deaf children since they could not produce speech. Data were collected through the recording of notes, and the deaf children answered questions on their academic and psychosocial experiences in the school. Observations of the resource units and the body language of the participants were also used for data collection. Each interview took an average of forty-five minutes to complete. The interview ended with the researcher thanking each participant for taking part in the interview process.

(ii) *Interviewing administrators*

Both the two administrators were interviewed on the same day in-depth interviews. The administrators were interviewed in their respective offices at the selected school. Scheduling was made three days before the interview date and confirmed in the morning of each interview date before the researcher travelled to the interview venue. The interview kicked off with the researcher introducing himself. The researcher also introduced the topic as he handed the consent forms to the administrators and then summarised the key ethical issues. The administrators signed and returned the consent forms. The use of face-to-face interviews allowed the researcher to clarify

questions where and when it was necessary. Each administrator permitted the researcher to record the interview proceedings, hence, both audio recordings and field notes were utilised for data collection.

The interviews were conducted in a free and relaxed environment in a dialogic manner. The administrators were, therefore, free to express themselves and open up in all issues that were on the table. They answered questions related to the procurement of resources for the education of the deaf children and for implementing educational policies at the school level as well as reflecting on deaf children's academic experiences. Each interview took an average of one hour thirty minutes. The interview ended by the researcher thanking the administrators for their participation in the interview process

(iii) Interviewing psychologists

Psychologist participants met with the researcher on separate days and locations. The Principal Educational Psychologist (PEP) was interviewed in her office in Mount Pleasant. The Educational Psychologist (EP) was interviewed in her assessment room after she was through with her psychological assessments in one of her area Districts and the last psychologist, District Remedial Tutor (DRT), was interviewed in her office at the District Education Offices under, which the selected school fell. Each interview session for the psychologists was scheduled three days prior to the interview date and then confirmed early in the morning of the interview date, through phone calls, before the researcher travelled to the interview venue.

The interview commenced by the researcher introducing himself to the participants. The researcher further introduced the research title and handed the consent forms to the participants. The participants would sign and return the consent forms to the researcher. Moreover, the researcher summarised the key ethical issues to the administrators. Each participant granted the researcher permission to make audio recordings of the interview proceedings, hence, both field notes and audio recordings were used for data collection from each of them. The interview sessions were conducted in a free and relaxed environment; therefore, the participants were free to open up and express their views. The participants responded to questions that required information related to the psycho-social experiences of deaf children in Harare Metropolitan Province. Each interview

lasted for a duration of about one and a half hours. The researcher thanked the participants for their invaluable contributions in the interview process.

(iv) Interviewing the deaf teacher

The interview with the deaf teacher took place in one of the resource units at the selected school. Scheduling of this interview was done three days before the interview date and was confirmed in the early morning of the interview date before the researcher travelled to the interview venue. Confirmation of this interview was done through social media, since the teacher was deaf. The researcher welcomed the participant to the interview session. The researcher further introduced himself and the topic of the study to the participant and gave her a consent form. She signed the consent form and returned it to the researcher. The researcher then summarised the key ethical issues. The researcher had one-on-one contact with the participant and could manoeuvre through the instrument with her. The researcher had the chance to clarify questions where and when it was necessary.

There were no audio recordings for the deaf teacher because she had no speech. Data were, therefore collected through recording of the notes from the discussion. The participant responded to questions related to the deaf children's academic and psychosocial experiences in the school. She preferred writing on the chalkboard when she felt she wanted to stress a point, she would sign and write her response on the chalkboard if she felt the point was important and should not be missed. Observations of the paralinguistic were made. The interview ended with the researcher thanking the participant for her participation in the interview process.

4.10 Data analysis and interpretation

Qualitative data were collected through interviews with deaf children, school administrators and psychologists. Interview data were complemented with focus group data collected from teachers. Data were presented in narrative form and were analysed using the narrative analysis. Narrative analysis refers to a set of approaches to diverse kinds of texts that have a common base in storytelling and it is an entire life story, narrated from interviews, observation or FGDs (Riessman, 2005; Riessman, 2008; Wong & Breheny, 2018). This approach involves capturing and investigating experiences as humans live them in time, in space, in person, and relationship (Clandinin & Connelly, 2000). According to Taylor et al., (2016), the researcher relies on

capturing salient experiences of participants' life stories and their definitions of those experiences. Further, narrations portray an individual's inner life, moral struggles, successes and failures as he forges with life.

According to Flick (2014), narrative analysis entails co-construction of the lived story between participant and researcher, considering the wider social construction of that story within interpersonal, social and cultural relationships. Narrative analysis, therefore, refers to presenting data in the form of stories as they are told by participants in their own words, with the researcher analysing and interpreting them in context. According to Lapan et al. (2012) the use direct quotes in presenting lived stories is a key feature in narrative analysis so that readers, apart from the interpretations of the researcher, can make their interpretations from the direct stories as directly told by the participants. Thus, using direct quotes ensures that the life stories of the participants are not distorted during presentation and interpretations. In concurrence with this sentiment, people are storytelling organisms who live storied lives, which is the way they experience the world (Connelly & Clandinin, 1990). This made the narrative analysis approach a relevant choice for this study. The study adopted the interactional model of narrative analysis. Narrations were adopted, in this study, to portray the inner life, moral struggles, successes and failures of deaf children in the selected primary school as they forged ahead with their lives (Flick, 2014; Taylor, 2016).

4.10.1 Riessman's interactional model of analysis

Humans are story-telling organisms and they construct meanings out of these stories. They are storytelling organisms that experience the world through storytelling (Connelly & Clandinin, 1990). They co-construct knowledge in interpersonal and social relationships (Flick, 2014). This can only happen in a dialogic or interactive process. The interactional model of analysis focuses on the dialogic process between the participant and the researcher who participate in it jointly, thereby co-constructing the meaning of the narration (Riessman, 2005). Clandinin and Connelly (2000) aver that individuals construct their co-constructed stories. Social interactions become central for individual, collective and cultural stories.

Interaction analysis focuses on storytelling as a way of co-constructing stories and their meanings, where the researcher and the participant construct meaning in a collaborative manner (Riessman, 2005). In this process, Lapan et al., (2012) note the importance of direct quotes to avoid distortions

of meanings as well as to allow readers to make their interpretations from the actual words spoken by the participants. In concurrence with this view, Riessman, (2005) says that interactional analysis requires transcripts of all participants in the interaction and becomes vivid when paralinguistic features of the conversation are involved. In this study, conversations, in the form of transcripts, between the researcher and deaf children, teachers, administrators at a selected primary school and psychologists in the district were presented and analysed using the interactional model of analysis. Interactive narrative analysis was relevant for this study since the researcher interacted with participants as they narrated their lived experiences, to co-construct meanings out of these interactions with the researcher in the context of the study (Riessman, 2005). Interactional analysis offers storytellers or participants the opportunity to re-imagine their lives and relive them.

Four steps were followed in analysing data. Squire, (2008) notes that they are four steps that can be followed when analysing data, which are; transcription, interpretation, the place of the researcher and finally the social world. At the transcription stage, the researcher typed the notes he had taken and audio recordings from the interviews and FGDs. Paralinguistic and nonverbal actions were also transcribed through indicating the actions. According to Riessman, (2002), the interpretation stage depends on how the researcher conceptualises narrative analysis. Squire, (2008) says that simplest way of interpreting data is through describing the narrated stories in themes. In this study, the researcher grouped the narratives into themes and interpreted them. The narratives were recorded verbatim. This was based on the assumption that narratives may have many interpretations and meanings (Freeman, 2004).

According to Squire, (2008), the place of the researcher in narrative analysis is concerned with reflexivity. Researchers using narrative analysis in the qualitative approach reflect on how their role in the study, their culture, and experiences influence the interpretations of the data they analyse, including the themes they come up with and the meanings they give to the data (Creswell, 2014). Tracy, (2013) indicates that reflexivity concerns careful consideration of the point of view, experiences, and role of the researcher that may influence the way the researcher interacts with the participants and how he/she interprets the participants' responses and their contexts. For example, one researcher may view a viewpoint as 'useless' while another may consider the same view as 'brilliant'.

For this study, the researcher recorded the narrations verbatim and then came up with the themes and interpretations, hence, the readers may still get the correct information even if the interpretations were influenced by reflexivity. In the context of the social world, Squire, (2008) states that narratives use social medium of language and are produced by social being, hence, their meaning are subjective. For this study, meanings of the narratives were negotiated during the interviews and FGDs. The researcher sought to understand the meanings of the stories from the owners of the stories, the participants.

4.11 Trustworthiness

Trustworthiness was proposed by Lincoln and Guba, (1985) when they said that research study should be considered familiar and legitimate by researchers and readers (Nowell et al., 2017). According to Connelly, (2016), trustworthiness refers to the degree or level of confidence in the data collected, data interpretation, and all the methods used to ensure the quality of a study. Thus, research findings may be important when researchers and readers give value to the research study. According to Amankwaa, (2016), researchers should come up with procedures and protocols that define a worth trusting research study.

Although researchers agree that there should be protocols and procedures that define the trustworthiness of a research study, they differ on the criteria (Leung, 2015). Connelly, (2016) notes that Lincoln and Guba, (1985) came up with the widely accepted criteria of research trustworthiness in qualitative studies. The criteria comprise credibility, transferability, dependability, confirmability (Shenton, 2004). These are described below, to demonstrate how trustworthiness was achieved.

4.11.1 Credibility

Credibility is the qualitative research term that is equivalent to internal validity in a quantitative research study (Shenton, 2004). Credibility entails the confidence in the truth of the study and eventually the confidence in the findings (Polit & Beck, 2014; Anney, 2015). It is concerned with whether the study was conducted using standard qualitative research procedures or alternative procedures (Polit & Beck, 2014). If alternative procedures were adopted, was there enough justification for adopting these. For this study, data were collected using focus group discussions and interviews, which are commonly used in qualitative data collection and these conformed to

the interpretive paradigm which was adopted in this study. The findings were presented as rich and descriptive qualitative data.

Both interviews and focus group discussions allowed the researcher to collect data in a dialogical way. The researcher and the participants interacted, allowing the participants to share their lived stories. These are key issues in qualitative research; hence qualitative research procedures were adhered to. In this study, no alternative procedures were used. The use of interviews and FGDs to collect data constituted data triangulation. According to Connelly, (2016), techniques for establishing credibility are time, long time with participants, persistent observation, peer debriefing, member checking, and reflective journal as well as iterative questioning during data collection.

For this study, some interviews took up to one hour fifty-five minutes, which complied with prolonged participant engagement as suggested by Connelly, (2016). According to Anney, (2015), prolonged time with participants in the context of the study enables the researcher to gain deeper insight into the context of the research study, thereby reducing the chances of distorting the data collected. The researcher's prolonged time in the field where the study was being conducted helped the two parties to develop rapport. It promoted a deeper understanding of the participants' culture and the context within which they operated (Onwuegbuzie & Leech, 2007).

To enhance credibility, the researcher engaged in debriefing sessions. Debriefing means seeking guidance from professionals such as postgraduate dissertation committee or academic staff willing to give a hand in the research study thereby improving the quality of the study and its findings (Anney, 2015). By implication, the researcher should subject the study and its findings to peer review so that he/she gets comments from them. Understanding of participants' culture and the context in which they are operating may imply that the researcher gives the collected data the same understanding as that of the participants.

One of the strategies to enhance the credibility of findings is to conduct member checks. According to Anney (2015), member checking constitutes the heart of credibility. Thus, the credibility of a research study cannot exist without member checking. Guba, (1981) defines member checking as continuously testing collected data and its interpretations, considering that the data comes from various participants. Harper and Cole, (2012) define member checking as

participant verification, informant feedback, or respondent validation. Member checking reduces bias through sending the analysed and interpreted data back to members who participated in the research so that they evaluate the interpretations as made by the researcher, suggest changes or disown the interpretations because they have been misreported or misinterpreted. Harper and Cole (2012) concur with these sentiments by saying that the researcher summarises the research interpretations and asks the participants to check and comment on the accuracy of the analysis and interpretations. The participants disagree or agree to own the views and experiences because of social desirability issues (Anney, 2015). When the interpretations are accurate and complete, the research is said to be credible (Harper & Cole, 2012). Thus, the application of member checking reduced bias of the research findings and made the research credible. In this study, debriefing and member checking were applied. At the same time, a long time was taken engaging the participants during data collection, and rapport was established to the extent that they opened up even in confidential information (Leedy & Ormrod, 2015).

In this study, member checking was also done during data collection as a summary of the data collected was finally cemented by discussing with the participants about the interpretations made by the researcher. Observations of non-verbal cues were made. Observations were made on the non-verbal cues of participants in reaction to the questions or dialogue between themselves and the researcher. Data were collected using interviews with deaf children, psychologists, and administrators, while focus group discussions were used to collect data from teachers. Thus, data triangulation was used. When using data triangulation, data is elicited from different sources. In this study, the same information was sought from deaf children, teachers and administrators. No researcher triangulation was implemented since qualitative researchers should design and personally use their instruments as they collect data, through dialogue (Creswell, 2014). The data that were collected were presented and analysed in narrative form. Data were presented verbatim such that readers also could make their interpretations, thereby making the findings credible.

4.11.2 Transferability

According to Nowell et al., (2017), transferability, which is equivalent to external validity in a quantitative research study refers to the generalisability of research study findings to other settings. Transferability refers to the extent to which research findings are useful to other people in other settings (Connelly, 2016). Readers determine whether and how the research findings are

transferable or applicable to their context (Polit & Beck, 2014). Thus, researchers should give a detailed description of the study so that readers may easily understand it and transfer the information to their contexts. Purposive sampling, a form of non-probability sampling, is the ideal sampling technique to maximize specific data concerning the situation and context from which it was collected (Lincoln & Guba, 1985).

For this study, purposive sampling was adopted to ensure that the sample matched the characteristics of those specified in the research topic and questions. The study findings were, therefore, likely to be transferable to the academic experiences of other deaf children in other primary schools. A detailed description of research findings was given to allow readers to comprehend them without difficulty and they can be easily transferred to their situations. For example, other primary schools that included deaf children could transfer the findings of this study to their situations. However, findings of qualitative research may not be generalizable to wider populations because they are not tested to verify if they are statistically significant or the findings were by chance (Rahman, 2017; Atieno, (2009).

4.11.3 Dependability

Dependability is called reliability in quantitative research (Lapan et al., 2012). It is achieved when the research process is logical, traceable, and documented (Nowell et al., 2017). According to Polit and Beck (2014), dependability refers to the extent to which research data and the findings are stable over time and over the context in which the study was conducted. Dependability entails the reproduction of similar data and findings from the same sample over time in similar contexts and situations (Connelly, 2016). Lincoln and Guba (1985) view dependability as consistency and repeatability of research findings. Thus, dependability in a research study refers to the consistency of research findings such that they can be repeated over time for similar samples in similar situations and contexts.

According to Connelly, (2016), procedures for establishing dependability include maintenance on an audit trail of process logs and peer debriefing. By audit trail of process logs, it is meant the examination of the process and validation of data when the researcher accounts for all the research processes to show how they collected, recorded, and analysed data (Anney, 2015). According to Lincoln and Guba, (1985), an audit trail of process logs is achievable when the data collected and

the research findings are rich and thick so that it is easy for the readers to determine if the findings apply to their situation and context. The target should be to generalise the research findings to the sample and not beyond it.

For this study, the purposive sampling technique was used so that research findings could be consistent and repeatable for similar samples in similar circumstances over time; that is, samples of deaf children and their academic experiences in primary schools over time. The research used the narrative approach to data collection, presentation and analysis to enable the data to be dependable. The researcher also collected data from various sources, thereby making the research findings rich and thick to enable readers to qualify them as dependable (Lincoln & Guba, 1985; Guba & Lincoln, 2005; Anney, 2015). The researcher also accounted for decisions on how data were collected, presented and analysed, that is, maintaining an audit trail (Connelly, 2016; Anney, 2015). Peer debriefing was also adopted through presentations of research reports during postgraduate workshops organised by the University of the Free State. This ensured getting quality comments and perceptions from peers (Anney, 2015).

4.11.4 Confirmability

Confirmability, which is objectivity in quantitative research (Lapan et al., 2012), refers to the extent to which findings of the study can be confirmed or corroborated by readers and other researchers (Anney, 2015). According to Anney (2015), confirmability is concerned with confirming or corroborating that research data interpretations have not been ‘cooked’ by the researcher but have been derived from the data collected from the participants as scheduled. Thus, there should be evidence that the researcher collected data and came up with interpretations from the data they collected for the particular research. In this study, the researcher got ethical clearance from the University of the Free State (protocol number UFS-HSD2019/1103) and MoPSE before engaging in data collection. MoPSE processed ethical clearance for this study (Protocol number C/426/3HRE), basing on the ethical clearance from the University of the Free State. The issue of member checking was also crucial to enhancing confirmability. The researcher was able to send back the research analysis and interpretations to the participants because they had provided the data and their acceptance of the interpretations was a sign of accepting that they had provided the data, and the data were not ‘cooked’ (Harper & Cole, 2012; Anney, 2015). The researcher also gave consent forms to the participants, with contacts to which to address their concerns during the

research process. After that, the researcher collected and interpreted data on his own to ensure confirmability (Leedy & Ormrod, 2015).

Confirmability may also be achieved through an audit trail, reflexive journal as well as triangulation (Anney, 2015). According to Bowen (2009), confirmability confirms that the researcher did not just find the research results from nowhere but conducted a research study and came up with them. An audit trail involves the researcher accounting for all the research process decisions and activities of the research process that indicate that they collected and interpreted the data, a process that may require the keeping of raw data collected through interviews, observations, or focus group discussions. In this study, interviews and focus group discussions, together with audio recordings, were used and kept for constant reference throughout the research process to show that findings truly originated from the participants.

4.12 Ethical considerations

These principles ensured that participants and other stakeholders were fairly treated (*see appendices 1-10*).

4.12.1 Background to ethical considerations

Qualitative researchers interact with individuals, groups of individuals, and communities when collecting data, a scenario that may expose them to ethical dilemmas (Lapan et al., 2012). Ethical issues bind researchers to standards of ethical practice as stipulated in government regulations and professional associations' codes of ethics (*ibid*). For this study, professional ethics were guided by the Research Ethics Committee at University of Free State as well as the ethical guidelines and principles of the international Declaration of Helsinki, South African Guidelines for Good Clinical Practice and the Medical Research Council (MRC) and Ethical Guidelines for Research.

The issue of research ethics came to be recognised after the atrocities that were done when people claimed to have been conducting researches in the medical field. Experiments were conducted in Germany in an attempt to cleanse the German society of persons who were considered to be a misfit to the Nazi race in terms of health when physicians, skilled geneticists, psychiatrists, and anthropologists were engaged in developing health policies (Lapan et al., 2012). The United States America (USA) had their share of scandals when they claimed they were researching the Tuskegee Study of Untreated Syphilis in the Negro Male that took place from 1932 to 1972. The activities

were done without the consent of the people involved (Lincoln & Guba, 1989; Lincoln & Guba, 1985).

As a result of the Tuskegee scandal, the US Congress came up with the National Research Act in 1974, which was further renamed the Belmont Report for the Protection of Human Subjects of Biomedical and Behavioural Research in 1979 (Belmont Report, 1979). As a result of this position, the USA Belmont Report for the protection of Human Subjects of Biomedical and Behavioural Research (1979) came up with three ethical principles to bind researchers. These are the principles of beneficence, respect, and justice.

4.12.2 Ethical principles

4.12.2.1 Principle of beneficence

In this study, the principle of beneficence was considered. The principle calls researchers to maximise the good outcomes of their studies and minimise harm to individuals in the research study (Lapan et al., 2012). It entails understanding what is beneficial to the participants and their community. However, researchers may face the challenge of what is maximising good and minimising harm and they may not be sure whether they are doing good or harm (Lapan et al., 2012). Thus, researchers may assume that they are maximising *good* when in fact, they are maximising risk or harm or thinking that they are minimising risk or harm when they are maximising harm or risk and minimising *good*. The choice of a research topic or the choice of research methods and strategies may affect the principle of beneficence. For instance, what are the ethical issues on choosing sensitive topics, or what are the implications of avoiding sensitive topics to society? According to Lincoln and Guba, (1985), participants are concerned about the benefits of the research, potential harm to them as well as their benefits; that is, can findings of the study take them out of poverty, change their social status or solve their social challenges.

In this research, the benefits of the study were the academic and psychosocial experiences of deaf children in the selected primary school. In understanding the academic experiences of deaf children in the selected primary school, the researcher was going to improve these experiences through imparting skills to his student teachers who, in turn, were going to teach deaf children in primary schools. Deaf children benefitted through the improvement of their academic experiences while administrators, teachers, and psychologists benefitted through findings of the study and

could improve their service delivery to the education of deaf children in primary schools. Participants are also concerned about the possibility of the study belittling or ruining their reputation or cultural issues. In this study, the reputation of all the participants was honoured through conducting the research in their natural settings; neither were their cultural issues belittled. Lapan et al., (2012) stressed that harm of participants should be considered in terms of chances of revealing their identity (Belmont Report, 1979; Lincoln & Guba 1989). This brings in the issue of confidentiality.

4.12.2.2 Confidentiality

Researchers should promise their participants confidentiality. According to Lapan et al., (2012), confidentiality means that collected data will be reported in a manner that is not associated with a particular participant. This implies that when the researcher reports the data, they should be no information that may lead to the identity of the participant. According to the World Medical Association Declaration of Helsinki (WMA), (1965), all participants must have privacy and confidentiality of their personal information protected. In this study, the researcher assured all the participants confidentiality, unless the members in the FGDs divulge the information, and all of them participated voluntarily and freely. The participants in FGDs agreed that they were professionals and they were required by the ethics of their profession to keep secrets, hence, they were not going to divulge information from the FGDs. Confidentiality is related to the issue of anonymity. Anonymity means that no one identifies the participants, even the researcher (Belmont Report, 1979; Lincoln & Guba, 1989). In this study, no information leads to the identity of the participants. Participants were identified by letters and numbers. There was no information relating the letters or numbers to the identity of the participants.

4.12.2.3 Principle of respect

The principle of respect is a product of the Belmont Report (Belmont Report, 1979; Lapan et al., 2012). According to the Belmont Report, (1979), the principle of respect is defined in terms of treating participants with respect and courtesy including the participants who are not autonomous like the minors, or deaf children. Kitchener and Kitchener (2019) interpreted this definition of the principle of respect, giving two directives to researchers. The first directive allows participants to voluntarily or not to participate in the research study or even to withdraw their consent without

victimisation. For this study, consent forms stipulated that participants should freely choose to or not to participate in the study and that they were free to withdraw their consent at any time without falling victims as a result thereof. Thus, the participants voluntarily participated in the study.

The second directive was calling researchers not to give false promises to the participants, for instance promising them material or financial benefits. In concurrence, the Belmont Report, (1979) says that researchers should give participants a description of reasonable benefits of participating in the study. Consent forms for this study clearly indicated that the benefits from the study were purely academic. The researcher also explained the benefits of participating in the study and the participants voluntarily participated. Lapan et al., (2012) posit that researchers should stick to the cultural norms and values of the community in which the study is being conducted; that is, they need to introduce themselves, where they come from, highlight aim of the study, who owns the data, who are the beneficiaries of the study findings and how they will get the information. This principle is connected to the issue of consent. The researcher introduced himself and explained the purpose of the study to the participants.

4.12.2.4 Informed consent

This ethical issue has two key terms that are informed and consent. According to the Belmont Report (1979), the participant must be notified of the study and they should agree to participate in the study without inducement and must know what a reasonable researcher may anticipate before voluntarily giving consent and explicitly consent to participate in the study. According to Lapan, et al., (2012), it is not clear what it means to voluntarily give consent without undue inducement. Lapan et al., (2012) claim that ethicists are worried that participants may give their consent because there is undue inducement when they are informed of certain benefits they value, e.g. money. Poverty may also compel participants to accept offers, even food (*ibid*). Lapan, et al., (2012) further explains that a researcher should give the participant a written document clearly explaining the research in detail using language at the level of the participant to which the potential participant willingly signs. Thus, it may be assumed that participants have voluntarily given consent when they are targeting certain benefits or are targeting benefits that have been promised by the researcher. It may be, therefore, difficult to establish whether it is genuinely voluntary consent or consent was indirectly induced by anticipated or promised benefits. In this study, the researcher

told the participants that their benefits were purely academic. The participants did not expect any other benefits except academic benefits (*see appendix 9*)

Researchers are aware that explaining their researches in detail using understandable language to the participant is a mammoth task that requires competence in participant's cultural issues (Lapan et al., 2012; Flick, 2014). Cultural competence ensures that the researcher will neither belittle the community nor bring the community's practices into disrepute (Lapan, 2012; Flick, 2014). For participants other than deaf children, there was no challenge in cultural issues since the researcher once worked for MoPSE, immersing himself in the culture of the ministry and its workers right from the lowest grade to the highest one. These participants were also old enough to give their consent, unlike deaf children who needed a different mode of consenting.

However, there are ethical dilemmas that are associated with informed consent, even for adult participants. For instance, Ntseane, (2009) conducted a study on women entrepreneurs in Botswana. After explaining to them in the Tswana language, she proceeded to ask the women to sign the consent form. The women were very cross, arguing that consenting verbally was enough, and asking them for their signature was an insult. Such a scenario was not pronounced by the participants of this research study, hence, the signing of consent forms was not a challenge. On another note, Wilson, (2005) conducted a study in Jamaica on funding agencies' perceptions of deaf children and how deaf children felt they were perceived by these funding agencies. Although one of the funding agencies had a paternalistic perception of deaf children and with deaf children resenting him, they did not want to sign consent forms because they benefitted from him in terms of educational provisions for fear of being identified. In this study, all the participants voluntarily participated in the study. Parents of deaf children were willing to let their children participate in the study (*see appendix 10*). There were no cases of withdrawals of consent from the participants.

4.12.2.5 Informed consent for children

Informed consent for children has a different procedure from that of adults. Legally, children cannot sign a consent agreement hence researchers are required to get consent from parents of potential child participants (Belmont Report, 1979; Lapan et al., 2012). However, according to the Belmont Report, (1979), after obtaining consent from the parents, children should provide assent to indicate their understanding and agreeing to participate. Challenges arise when the researcher

has children who do not want their parents to know that they are participating in a particular research study, for instance in situations where they are 'lesbians or gays' with their parents not knowing this condition, and they do not want them to know it (Lapan et al., 2012; Flick, 2014). According to the WMA, (1965), every participant must have their privacy and confidentiality of their personal information protected, and their physical, mental, and social integrity upheld. It is, therefore, the discretion of the child to consider the information about the study as personal privacy and decide not to involve the parents.

For this study, the researcher got consent from the parents while assent was obtained from the children themselves. The deaf children voluntarily signed the assent forms to show their willingness to participate in the study (*see appendix 9*). The study had nothing very personal to talk about, something that children wanted to hide from their parents since the research was concerned purely about educational matters; hence, all the deaf children had no privacy to keep away from their parents, and they willingly signed their assent forms. As such, no certificate of confidentiality was necessary.

4.12.2.6 Principle of justice

Researchers should exercise the principle of justice when conducting researches. The Belmont Report, (1979) defines the principle of justices as the act of ensuring that participants benefit from the research study. The principle means that participants should not be burdened by participating in research studies that do not concern or benefit them simply because they are easily accessible but should also not be excluded from participating in researches that potential benefit them because they are considered difficult to access (Belmont Report, 1979; Lapan et al., 2012). Deaf children are not found in all schools. The researcher used a school which is some kilometres away from his place of residence as well as from his workplace to have deaf children participating in the research study since the study findings benefitted them. The research study did not exclude them because they were not readily available but included them because they were bound to be beneficiaries of the findings. According to the WMA, (1965), research studies involving the disadvantaged population, such as deaf children, is only valid when it is responsive to their needs.

This study aimed at purely benefitting deaf children, making it valid and beneficial for deaf children. In concurrence, Lapan et al., (2012) claim that most researchers consider communities

of linguistic minority populations, people with disabilities or members of the discriminated and stigmatised population as inaccessible due to their lack of knowledge and experience about them and, therefore, may not include them to participate in research studies that should benefit them. This research study dealt with deaf children who may be considered inaccessible by researchers and may be taken advantage of to participate in research studies that do not benefit them. In this study, they were considered beneficiaries and the study was meant to purely benefit them. By so doing, the principle of beneficence to deaf children, maximising the good outcomes of the research study for science and humanity (deaf children) and minimise risk or harm to the research participants (Belmont Report, 1979; Lapan et al., 2012), was recognised. According to Lapan et al., (2012) researchers should achieve the principle of justice through employing reasonable measures, non-exploitative procedures, carefully considered and fairly administered measures in conducting their research studies. All ethical considerations were made throughout the research process.

4.13 Summary

The chapter deliberated on research methodology, which included the qualitative research approach together with its characteristics which are natural setting, the researcher as a key instrument for data collection, multiple sources of data collection, the employment of inductive and deductive data analysis, the use of participants' meanings during data analysis, application of emergent design, reflexivity and the issue of holistic account. The chapter further focused on the advantages and disadvantages of the qualitative approach. Moreover, the study looked at the interpretive research paradigm, and the narrative case study design. In this chapter, the researcher also focused on the population, which were the target and accessible population, and the sampling strategy. The sampling strategy that was adopted was purposive. Furthermore, the chapter looked at theoretical saturation, and data collection instruments, namely the FGDs and the interview. In this chapter the researcher also deliberated on research bias data collection procedure. The chapter also focused on data presentation and analysis procedures. Moreover, the chapter considered trustworthiness of the research. Finally, the chapter looked at ethical considerations as derived from the principles of Beneficence, Respect and Justice.

CHAPTER 5

DATA PRESENTATION AND ANALYSIS

5.1 Introduction

This chapter presents and analyses data collected from two focus group discussions among teachers and the interviews conducted with five deaf children, two school administrators, and four educational psychologists. The data generated in the narrative form were categorised into themes and sub-themes, informed by the following research questions:

1. What are the academic experiences of deaf children in primary schools concerning resources?
2. What academic support services are available for deaf children in primary schools?
3. What are the psycho-social experiences of deaf children in primary schools?
4. What challenges are experienced in offering psycho-social support services to deaf children in primary schools?

5.2 Biographic results of participants

This section presents the biographic results of participants from two Focus Group Discussions (FGDs), which were Focus Group Discussions A and B. These participants were identified by numbers and letters of their groups, respectively; for example, Participant Number 2 from Focus Group Discussions A was identified as "Participant 2A". The biographic information of administrators, psychologists, deaf children, teachers from FGDs and the deaf teacher are presented in this section.

5.2.1 Focus Group Discussions A

The Focus Group Discussions A involved six participants, two males and four females.

Table 5.1 Biographic results of participants focus group discussions A

Participants	Age	Gender	Qualifications	Teaching experiences	Using sign	Teaching grade
Participant 1A	30-35	Female	DipEd, BEd Computer Science	11 years	No	ECD A- grade 7
Participant 2A	35-40	Female	DipEd, BSc Counselling	16 years	No	3
Participant 3A	40-45	Male	DipEd, BSc Hons SNE	17 years	No	4
Participant 4A	40-45	Female	Dip Ed, BSc Hons SNE	18 years	Yes	R/U
Participant 5A	50-55	Male	DipEd, BSc Hons counselling	29 years	No	4
Participant 6A	50-55	Male	Dip Ed, BEd Curr Arts	24 years	No	5

Key: BEd-Bachelor of Education; BSc-Bachelor of Science; Curr-Curriculum; DipEd-Diploma in Education; Hons-Honours; R/U-Resource Unit; SNE-Special Needs Education

Participant 1A

Participant 1A was a female teacher aged between thirty and thirty-five years. She had a Diploma in Education and a Bachelor of Education Degree in Computer Science. She had eleven years teaching experience. She was a specialist teacher in Information Communication Technology (ICT) and she was teaching deaf children in this subject in an integrated approach to inclusive education. She was not able to sign.

Participant 2A

Participant 2A was a female teacher aged between thirty-five and forty years. She held a Diploma in Education and a Bachelor of Science Degree in Counselling. She was teaching a Grade 3 regular class. Her teaching experience was sixteen years. She was not able to sign.

Participant 3A

Participant 3A was a male teacher who was within the age range of forty to forty-five years. He had a Diploma in Education and a Bachelor of Science Honours Degree in Special Needs

Education. He was teaching a Grade 2 regular class. He was a non-practising specialist teacher. Her teaching experience was seventeen years. He was not able to sign.

Participant 4A

Participant 4A was a female specialist teacher for the Deaf and held a Diploma in Education plus a Bachelor of Science Honours Degree in Special Needs Education. She was within the age range of forty to forty-five years. She taught deaf children in a resource unit. Her teaching experience was eighteen years. She was able to sign although she was not a native user of Sign Language.

Participant 5A

Participant 5A was a male teacher who held a Certificate in Education and a Bachelor of Science Honours Degree in Counselling, a qualification relevant for the offering of psychosocial support. He was teaching a Grade 3 regular class and was within the age range of fifty to fifty-five years. His teaching experience was twenty-nine years. He was not able to sign.

Participant 6A

Participant 6A in Focus Group Discussion A was a male teacher who held a Diploma in Education and a Bachelor of Education Degree in Curriculum Arts specialising in History. He was in the age range of fifty to fifty-five years and was teaching a Grade 5 regular class. He was not able to sign.

5.2.2 Focus Group Discussions B

This Focus Group Discussion comprised six participants, including four males and two females.

Table 5.2 Biographic results of participants from focus group discussion B

Participants	Age	Gender	Qualifications	Experience	Sign Language	grade
Participant 1B	30-35	Female	DipEd	8 years	No	2
Participant 2B	35-40	Female	DipEd, BEd. Eng & Communication Skills	13 years	No	6
Participant 3B	40-45	Male	DipEd, Bed. Curriculum studies	18 years	No	5
Participant 4B	55-60	Male	CE	29 years	No	3
Participant 5B	50-55	Male	DipEd, BEd. English & Communication Skills	27 years	No	6
Participant 6B	45-50	Female	DipEd	23 years	No	2

Key: Eng-English, CE-Certificate in Education

Participant 1B

The participant was a female teacher and her age ranged between thirty and thirty-five years and she had eight years teaching experience. She held a Diploma in Education. She taught a Grade 2 class. She was not able to sign.

Participant 2B

Participant 2B was a female teacher aged between thirty-five and forty years. She held a Diploma in Education and a Bachelor of Education Degree in English and Communication Skills. She was teaching a Grade 6 class and had thirteen years of teaching experience. She was not able to sign.

Participant 3B

Participant 3B was a male teacher in the forty to forty-five years age range, and he had eighteen years teaching experience. He was a regular class teacher teaching Grade five. He held a Diploma in Education and a Bachelor of Education Degree in Curriculum Studies. He was not able to sign.

Participant 4B

Participant 4B was a male teacher in the fifty-five to sixty years age range. He had twenty-nine years teaching experience. He had a certificate in Education. He taught a Grade 3 class. He was not able to sign.

Participant 5B

Participant 5B was a male teacher in the age range of fifty to fifty-five years. His qualifications included a Diploma in Education and a Bachelor of Education Degree in English and Communication Skills. He was a regular school teacher who was teaching a Grade 6 class. He was not able to sign.

Participant 6B

Participant 6B was a female teacher whose age ranged from forty-five to fifty years. She had a teaching experience of twenty-four years. She held a Diploma in Education. She taught a Grade 2 class. She was not able to sign.

5.2.3 Administrators

Table 5.3 Biographic results of administrators

Participants	Age	Gender	Qualifications	Experience	Sign Language
Administrator 1	55-60	Male	CE, Bed. EAPP	15 years	No
Administrator 2	55-60	Female	CE, BA. English and Communication skills	7 years	No

Key: EAPP-Educational Administration, Policy Studies and Planning, BA-Bachelor of Arts

Administrator 1

Administrator 1 was a male participant in the fifty-five to sixty year age range. He was a school head. He had fifteen years of administrative experience. The administrator did not have a qualification in Special Needs Education but held a Certificate in Education and a Bachelor of Education Degree in Educational Administration, Policy Studies and Planning. The administrator had vast experience in administration and had the relevant qualifications for his post. He was not able to sign.

Administrator 2

Administrator 2 was a female participant aged between fifty-five and sixty years with seven years experience in administration. She held no qualifications in Inclusive Education but held a Certificate in Education and a Bachelor of Arts Degree in English and Communication Skills. The participant was doing a Master of Education Degree in Educational Management. She held no other relevant qualifications in Education. She was not able to sign.

5.2.4 Psychologists

Table 5.4 Biographic results of psychologists

Participants	Age	Gender	Level of education	Experience	Sign Language
Psychologist 1	55-60	Female	MEd. Psychology	6	No
Psychologist 2	40-45	Female	MEd. Psychology	6	No
Psychologist 3	35-40	Female	DipEd, Bed. SNE	7	No

Psychologist 1

Psychologist 1 was the Principal Educational Psychologist. She was in the age range of fifty to fifty-five years. She held a Master of Education in Psychology. She was in charge of the Schools

Psychological Services Department at provincial level. She was the Principal Educational Psychologist (PEP). She had six years experience as the Principal Educational Psychologist. She held no qualification in the education of deaf children. It was necessary to have her in the sample because she was heading the Department of SPS in the province in which the selected school was situated. She was not able to sign.

Psychologist 2

Psychologist 2 was a female educational psychologist who held a Master of Education Degree in Educational Psychology. She was in the age range forty to forty-five years and was the area Educational Psychologist in the District where the selected school was located. She had six years experience in the psychological assessment of learners. She was visiting the area every Wednesday to conduct psychological assessments. She would extend the service to Thursdays and Fridays when necessary. This means that the area was adequately serviced in terms of the psychological assessments. Therefore, her participation was necessary because she was the one who was conducting the psychological assessments for the deaf children at the selected school. She was also the one who developed educational interventions for deaf children who participated in this study. She was not able to sign.

Psychologist 3

The psychologist was a female professional whose age ranged between thirty-five and forty years. She held a Diploma in Education and a Bachelor's Degree in Special Needs Education. She had seven years experience as a District Remedial Tutor (DRT). She was responsible for monitoring the programmes of SPS in the district. Her office was about three minutes' walk from the selected school; hence, she had full knowledge of the experiences of deaf children who participated in this study. She frequently interacted with the administrator and the teachers of the selected school. Thus, she had full updates on the school system. It was, therefore, necessary to have her in the sample. She was not able to sign.

5.2.5 Deaf children

Table 5.5 Biographic results of deaf children

Participants	Age	Gender	Grade level	Hearing aids	Sign Language
Deaf Child 1	14	Male	5	No	Yes
Deaf Child 2	13	Female	4	No	Yes
Deaf Child 3	13	Female	5	No	Yes
Deaf Child 4	13	Male	4	No	Yes
Deaf Child 5	14	Female	5	No	Yes

Participant 1

The first participant was a boy aged fourteen years who was in grade five at the school. He relied totally on Sign language as a medium of communication. He lived in the family with his mother, father, and three siblings. He resided in the high-density suburb around the school. He declared that the school did not provide stationery items to them. The deaf children had access to electricity and water. The school was within a walkable distance from his home; hence, he went to school on foot.

Participant 2

The second participant was a grade four girl aged thirteen years. She had neither residual hearing nor speech. Throughout the interview process, she depended on Sign language. She stayed with her grandmother, aunt, and five siblings in the surrounding high-density suburb where she could walk to and from school. Her mother is hearing and currently based in South Africa. The school did not provide stationery items for learners. The deaf children had access to electricity and water.

Participant 3

The third participant was a thirteen years old girl who was doing a grade five level. She had no residual hearing. Throughout the interview process, she relied on Sign language. She did not have a speech. She stayed with her mother, father, and two siblings in the nearby high-density suburb where she could walk to and from school. Her father worked as a vendor. He mentioned that the school did not provide stationery items to pupils. Deaf children had access to electricity and water.

Participant 4

The fourth participant was a thirteen-year-old boy who was in grade four at the mainstream school. He had no speech, and he seemed to have no residual hearing. Throughout the interview process, he relied on Sign language. He lived with his parents and three siblings in Harare's high-density

area, where they had access to electricity and water. He walked to school every day. His father was unemployed. He mentioned that the school did not provide stationery items to him.

Participant 5

The fifth participant was a fourteen-year-old girl who was in grade five. She seemed to have no residual hearing, although she had some unintelligible speech that could only be made sense of by those who were used to deaf people's speeches. Throughout the interview process, she relied mainly on sign language complemented by speech reading and unintelligible speech. Looking at her age, she was going to be in grade seven when she was at least sixteen years, which is approximately form three or form four for hearing children. This means she was very much behind her age level in terms of schooling. She lived with her aunt and six siblings in the high density near the selected school from where she walked to and from school.

5.6 Deaf Teacher

Participant	Age	Gender	Qualification	Experience	Grade	Sign Language
Deaf Teacher	30-35	Female	DipEd, BEd. SNE	7 years	R/U	Yes

The deaf teacher was female participant aged between thirty and thirty-five years. She held a Diploma in Education and a Bachelor of Education Degree - Special Needs Education. She had seven years of teaching experience. She was a native Sign Language user. She taught deaf children in the resource unit.

5.3 Thematic results of the study

Table 5.6: Overview of the thematic results of the study

Themes	Sub-themes
Assessment experiences of deaf children	<ul style="list-style-type: none"> - Psychological assessment - Audiological assessment
Academic experiences of deaf children	<ul style="list-style-type: none"> - Placement and enrolment - Academic intervention - Inclusion experiences - Accommodated curriculum
Availability of resources	<ul style="list-style-type: none"> - Amplification devices - Visual learning aids - Infrastructure - Skilled humans resources - Books
Kinds of Support services	<ul style="list-style-type: none"> - Psychosocial support services - Academic support services - Financial support services
Psycho-social experiences	<ul style="list-style-type: none"> - Acceptance of deaf children at school - Relationship between deaf children and their hearing peers - Ineffective socialisation of deaf children at school - Extra-morality activities (Sports) - Social roles and responsibilities - Guidance and counselling
Benefits of having deaf children in the school	<ul style="list-style-type: none"> - Socialisation
Successes in the education of deaf children	<ul style="list-style-type: none"> - Social successes - Academic successes
Legislation and policy	<ul style="list-style-type: none"> - Holistic policy formulation - Policy for the education of deaf children
Early identification and intervention	<ul style="list-style-type: none"> - Early identification leads to early intervention - Age of enrolment - Deaf children are hidden - Multidisciplinary teams
Deaf children's challenges at school	<ul style="list-style-type: none"> - Lack of resources - Communication barriers - Negative attitudes from teachers and hearing children

5.3.1 Assessment experiences of deaf children

The results reveal that deaf children experienced two major assessments before they were enrolled in primary schools. These included psychological and audiological assessments, which were evaluated by psychologists and audiologists, respectively.

5.3.1.1 Psychological assessment

Psychological assessment entails the assessments that are conducted by psychologists in terms of children's intellectual capacity. Besides having other established disabilities, psychologists conduct assessments to establish children's intellectual level for placement purposes.

The analysis from participants' transcripts below showed that educational psychologists assessed deaf children, evaluating their intellectual capability for academic intervention and placement in the school system. These assessments were purely psychological and based on intellect and comorbidity. Regarding comorbidity, placement was based on the dominant disability. Psychologists mentioned that the placement of deaf children in the school was influenced by the degree of hearing loss and the existence of comorbidity or lack of it. They indicated that when the child was confirmed deaf, and having intellectual challenges that were more dominant than deafness, the deaf child was placed in the resource unit for children with intellectual challenges because the more dominant disability was more disabling than the less dominant one. Besides, they mentioned that teachers in the more dominant disability resource unit should cater for the needs of the less dominant disability. They further indicated that they evaluated the educational needs of deaf children and recommended appropriate intervention. The psychologists stated that they were represented by the District Remedial Tutors (DRT) at the district level. The psychologists also highlighted that they were concerned about making follow-ups on the placement of deaf children in the different schools to assess their progress and to determine how best deaf children could benefit from the schools in which they were placed. The following excerpts from two psychologists illustrate these issues.

"As psychologists, we have roles in the area of placement. We assess the learners for school placement and then we refer the learners for further psychological assessment, which results in school placement. Our department is represented by District Remedial Tutors at the district level. The remedial tutors now make follow-ups on the learners placed to schools to ascertain how best they are benefiting from the units or special school where we would have placed our learners." [Psychologist 1]

"It's a multi-sectoral [approach] because this is a psychologist who is concerned with the intellect of the child. So, after collecting the medical data from the audiologist, the psychologist now assesses, besides the child having a hearing impairment, whether or not

the child needs a resource unit in the hearing or he or she might have other disabilities as some learners might have multiple disabilities. Children might have a hearing impairment and intellectual disabilities at the same time. The psychologist now assesses which of the disabilities is more dominant than the other because a child cannot be placed in the resource unit for hearing impairment while he is intellectually impaired. This learner has to master the language, which is more difficult than oral language. Sign Language is needed for that learner to master the intellectual capability. It's different from Sign Language that we use when signalling someone to come as everyone might know what that means, but now it's more complex. So the child needs to be intellectually capable. It is the role of the psychologist to assess in order to determine whether the child is intellectually capable of mastering concepts. If the child has an intellectual impairment, the psychologist assesses the child to determine whether the intellectual impairment is more dominant than the hearing impairment and therefore develop the educational intervention the child might need. So it's not always that all learners with hearing impairment are placed in the resource unit for hearing impairment. Some will be hearing, but you end up putting them in the resource unit for intellectual impairment." [Psychologist 2]

From the services mentioned above, it is apparent that the Schools Psychological Services Department could be considered a monitoring mechanism that ensures that the placement of deaf children is useful for teaching and learning in primary schools.

Regarding how teachers would manage language issues when a deaf child with intellectual challenges is placed in their resource unit, one psychologist said:

"It's difficult at first, but they end up using functional Sign Language that we use at home for functioning. This where we say I think he is saying come here. I think she is saying I want to go to the toilet. So they make use of functional Sign language" (Psychologist 2).

This could still pose some Sign Language development challenges as the child would be missing on learning and acquiring formal Sign Language by being exposed to informal functional Sign Language. This also means that specialist teachers had specialisation of some sort; hence, their skills were confined to their area of specialisation. This is evidenced by the specialist teachers in the intellectual challenges resource units who were unable to use formal Sign Language and

resorted to functional Sign Language. The issue of comorbidity, therefore, requires versatile specialist teachers who can handle several, if not all, categories of exceptionalities.

The Department of Schools Psychological Services is represented by the District Remedial Tutor (DRT) who presides over the academic and psychosocial welfare of learners which the department refers to as learner welfare. The DRT plays a critical role in the education of vulnerable learners, including deaf children, in the district in which the selected school falls; hence, it was necessary to include her in the sample. The excerpt below reveals the role of the DRT in the education of deaf children.

"My role in the SPS Department is to look at the welfare of all learners in the district and to monitor the teachers who teach learners with disabilities. I deal with so many issues, like vulnerable learners and how they can be assisted. We also deal with cases of abuse, providing counselling services to learners. We also monitor the implementation of clinical remediation in schools and the guidance and counselling services being offered and implemented in the learning area, which all schools are supposed to be teaching. We also do career guidance. We monitor BEAM disbursement, ensuring that all schools in the district have got a BEAM allocation and that forms are collected from the district offices. So, I am the one responsible for that" (Psychologist 3).

The role of the DRT complemented the roles of the psychologist and the audiologist. After the assessments and the identification of the deaf children's educational interventions by the audiologist and the psychologist, respectively, the DRT makes follow-ups to ensure that these programmes are implemented in schools in the district. The DRT is mainly responsible for monitoring and implementing the programmes of the Department of Schools Psychological Services as well as to provide psychosocial support.

5.3.1.2 Audiological assessment

Audiological assessment refers to audiometric assessments that are conducted by audiologists to establish the hearing acuity of children. The assessment establishes the hearing loss or deaf gain of the children who are being assessed.

An analysis of the participants' transcripts indicated that after conducting some psychological assessments on deaf children and confirming that they were deaf, the psychologists referred them

to the audiologist for complementary assessments. The audiologist would then perform the audiological assessments to establish the child's hearing acuity. This is more or less related to a medical assessment. The participants indicated that there was no prescribed line of assessment. The deaf child could start by visiting the DRT, the psychologist, or the audiologist or any other related professional who was conveniently accessible to him or her. Psychologists recognised that the audiologist assessed the degree of deaf children's hearing impairment. The psychologists would then develop academic interventions and recommends that the child's special needs be addressed. Therefore, the (DRT) makes follow-ups. The excerpts from two psychologists illustrate how the SPS Department operates.

“There are no clear-cut pathways as to which professional to approach first. If the learner first approaches to the psychologist, they will be referred to the audiologist. If the learner approaches the remedial tutor first, they will be referred to the audiologist for an audiological assessment. We have remedial tutors who operate in districts where these learners live and learn. Normally, these learners are initially identified by the remedial tutors who make further referrals to the psychologist who in turn makes referrals to the audiologist. However, these learners sometimes just go straight to the psychologist who operates at the provincial level, and if they come to us, we don't turn them back to the District Remedial Tutor (DRT). We just attend to them. We conduct psychological assessments, and then we refer them to the audiologist for an audiological assessment. The audiological assessment complements the psychological assessment, and then we write letters of placement to the schools. The level of hearing acuity determines the special needs to be addressed, and the District Remedial Tutor makes follow-ups, monitoring these special needs to see how best these learners can benefit from these services. If they notice any challenges being faced by the learners or the teachers, they make recommendations to the psychologist. Our services are ongoing, in that manner” (Psychologist 1).

"Normally, when we identify learners in schools, we assess the severity of their impairment. We refer them to the audiologist. We normally expect the audiologist to come to schools to assess the children, but it's not done. She sometimes has a schedule whereby she comes to the district, but the number of days that she comes is not enough for all learners to be catered for. She is the only one in Zimbabwe. So, it is a challenge. At the moment, we are referring the learners to their parents and to private audiologists, which is very expensive.

So it means most of the learners will go unassessed. When a child comes to school, we want to know the severity of their hearing impairment. So there is a need for the audiologist to guide us on how the teacher is going to teach the learners. Some of the learners can benefit from using hearing aids, but others cannot. So, if we just look at a child, we can't tell whether he or she can benefit from using hearing aids or not. So there is a need for the audiologist to assess the learner” (Psychologist 3).

The transcripts show how the SPS Department conducted its assessments and provided its services to deaf children. Indeed, it seems there is no prescribed pathway on the professional to be approached first. The portfolios of these various professionals complement each other. Apparently, the SPS Department was overwhelmed by the number of deaf children who needed assessment.

5.3.2 Academic experiences of deaf children

This study found that the experiences of deaf children were characterised by academic issues such as placement and enrolment, academic interventions and issues related to inclusion. Academic experiences are issues that directly relate to the education of deaf children.

5.3.2.1 Placement and enrolment

Placement refers to the pronouncement by the psychologists that the deaf child should be educated at a particular school. After assessing the child, the psychologists pronounce that the child should attend classes at a school they think can meet the needs of the child. Enrolment entails registering deaf children at a school for them to learn there. Thus, placement and enrolment entail the placing of deaf children at a school by the psychologists followed by their registration into the school to attend classes.

The participants' responses during focus group discussions demonstrated that deaf children were placed in regular schools by the Schools Psychological Services (SPS). In contrast, other deaf children heard about the school's capacity to enrol deaf children through other means and approached the school on their own for enrolment. Two participants had this to say:

“Deaf children are placed by the SPS after they have been assessed” (Participant 4B).

“Some deaf children hear about this school and come on their own to enrol with us” (Participant 2B).

There were two ways through which deaf children were enrolled in the schools. They were either placed by the SPS or they came on their own after the hearing or 'normal' children have given them the information about the school's capacity to enrol and teach deaf children. On whether those deaf children who do not enrol through the SPS go to the SPS after enrolment for psychological and audiological assessments, the participants were not sure of what was going to happen to deaf children once they were enrolled into the school. They were not sure if the administrators sent them to the SPS for psychological and audiological assessment. However, one of the administrators said:

"Apart from free auditory examinations, the SPS also does the placement. We don't just recruit our learners from the street. They go through the verification of the degree of their hearing loss after which they are recommended for enrolled at this school" (Administrator 1).

The transcript shows that deaf children went through an audiological assessment before they were enrolled in primary schools. The enrolment of deaf children into primary school was approved by the SPS. This submission concurs with an earlier submission by the psychologists who indicated that after the assessment procedures, they would write letters of placement to the school in line with the child's placement at the school. On who precisely does the audiological assessment of deaf children, the participant said:

"The Schools Psychological Services, administers frequent examinations, at least once a year."

The expressions of this administrator agree with those of the participants from the focus group discussions on that the disabilities of deaf children were assessed by the SPS before they were enrolled into the school. However, the FGDs also indicated that some deaf children were coming for enrolment on their volition. Perhaps the teachers did not have full information on how deaf children were enrolled. One of the administrators even pointed out that the school had no powers over the placement of deaf children in the school. The administrator said that the decision of the SPS to place the deaf children in the school were conclusive. The administrator had this to say:

"We don't have those powers because when these children come, we are simply made to take them for, maybe two or three years and after such a time, they are needed for

assessment, so we don't have any powers. We just take them as they come" (Administrator 2).

The school, therefore, enrolled deaf children as per instruction from the Schools Psychological Services, especially as the school took instructions from the Ministry of Primary and Secondary Education to enrol and teach deaf children in their locality. This was revealed by one of the administrators who said that deaf children were being placed by the SPS at this school and not the other schools around their place because the school was the only one that was mandated to educate deaf children. One administrator said:

"When we were instructed to create a resource unit in the school, we took up the offer because we saw the need for the creation of such a resource unit to cater for these learners, and we are the only school here" (Administrator 1).

The school was the only one providing education to deaf children. Perhaps the school administrators and the teachers were inclusive-minded, hence, they saw the need to accept deaf children into the school.

Regarding where the offer was coming from, the participant said:

"The Ministry of Primary and Secondary Education" (Administrator 1).

This implies that even if the school had its own opinion on the placement of deaf children on its premises, it could not be possible since it was its mandate to educate deaf children in their locality after taking the offer to enrol and teach these children. It can be concluded that deaf children were placed at regular schools by the SPS after they were assessed.

5.3.2.2 Academic interventions

Through the focus group discussions, the participants indicated that deaf children experienced academic interventions in regular schools. These interventions were strategies that rendered the teaching and learning of deaf children manageable.

The academic interventions comprised the designing and implementation of the Individualised Education Plan (IEP), a programme that has a plan for the needs of each individual child. The psychologists prescribed the duty of a specialist teacher as consisting of the drawing up of IEPs for deaf children in their classrooms. This programme was based on the outcome of the

psychological assessment. The psychological assessment had information on the academic intervention for the assessed deaf children. The excerpts show that the IEP is a programme that manages the needs of a child. The excerpts further show that the IEP established the level of operation of the child and the teacher utilizes this to come up with goals for the deaf child. The narrations from two psychologists help explain this.

"I am talking of deaf learners who are in the same classroom. For instance, there are seven deaf learners, and the teacher wants to teach them amid their different abilities, talents, and different special needs. For the teacher to address each child with special needs, the teacher prepares what is called an IEP. This IEP operates this way; let's say the teacher is teaching Maths, and John, who is using Sign Language, is a bit advanced as compared to other learners in the classroom. The teacher teaches the same concept but prepares different learning material that suits each learner. The one who is advanced has material specifically prepared for him. The one who is lagging has material prepared for him, and the teacher goes one-on-one, giving one-on-one instruction to every learner in order to address their needs per concept per learning area" (Psychologist 1).

"The IEP is a funny teaching strategy. When the psychologist is doing the assessment, part of the recommendation involves the IEP formulation. The IEP is a guideline that helps in identifying a learner's level as a starting point. The learner's gaps or strengths are identified. This helps me when I am writing a psychological report. I don't just recommend on the hearing impairment. I am saying the learner may have a hearing impairment but can do basic Sign Language and can lip read; so, the teacher has got somewhere to start from. It's a programme for children with disabilities and we don't teach them as a group. We teach them as individuals, that is why it's called Individualised Education Programme. We teach them as individuals because their disabilities make them operate at different levels, even intellectually. After all, we don't know what caused their disabilities. For some, it's medical or illness, but others are just born with the condition. As such, their operational levels are bound to be different. The teacher then plans the appropriate interventions. I am doing this in mainstream learning. This helps to determine the needs of individual children. Some need fundamental social and practical skills before the academic while others need to learn Sign language before the academic. When the child has mastered Sign Language,

the teacher goes straight into the curriculum. So planning takes cognisance of these different levels" (Psychologist 2).

These reports show that an IEP is a programme that recognises individual differences among deaf children, enabling the teacher to plan for each child's own needs, and ensure that these needs are catered for. The IEP, therefore, is an instrumental and indispensable intervention tool in the teaching and learning of deaf children. With proper implementation and supervision, the IEP could be a useful tool for the teaching and learning of deaf children.

Another academic intervention was universalising Sign Language. This entails making sign language the same for Deaf people in Zimbabwe. This reduces chances of misconception and misunderstandings among deaf people. The participants indicated that it was necessary to universalise Sign Language so that all the deaf people in Zimbabwe would sign at the same wavelength. This reduces communication challenges among deaf children and teachers in the schools. It emerged that Sign Language dictionaries were disbursed by the SPS free of charge. This implies that the SPS Department was dedicated to the learning of Sign Language and its universalisation through the use of these dictionaries. The following excerpt from the two psychologists explains this reality.

"There are Sign Language dictionaries. Since English is universal, we also want to universalise Sign Language. As a ministry, we came up with Sign languages and a Sign Language dictionary that will help teachers and learners in the use of Sign Language. We want to standardise our Sign Language. So, we have the 'Sign Language [Dictionary] Volume One' and the 'Improved Sign Language [Dictionary] Volume Two'. These are distributed to the schools that enrol deaf learners" (Psychologist 1).

"We also get Sign language dictionaries from Head Office and we disburse them to the schools that enrol learners with hearing impairment free of charge" (Psychologist 3).

The examinations were said to be modified with comprehension texts having been shortened to suit the needs of deaf learners. The meaning and sense, however, remained the same as that of comprehension texts of hearing candidates. The participants further indicated that poor performance exhibited by deaf children was attributed to the challenges emanating from unmodified language. On interventions in terms of examinations, the two psychologists said:

"Examination papers, instructions and Sign Language have been modified though it is still the same examination and the same curriculum. Inclusivity entails one curriculum, one teacher, and one examination. We treat them like other children. We assess their situations to determine what they need. If they require modified material, we give them. Some of them are hearing impaired, but they acquired the English Language as I indicated earlier. Their English is telegraphic. That's their language. For example, if they want to say, 'Mom and dad, please come here. I want to talk to you'. They simply say 'Father, mother come.' If they write 'Father come', it's marked wrong by those who are not specialists. We are saying, let's identify their needs and then make them compete with other learners" (Psychologist 1).

"What I am certain about is the modified exam because the exam is the one that I have seen. In terms of the language, the comprehension passages are not large. They are precise and straight to the point like they have been decoded into the Sign Language. It's concise and precise, which makes it easy to understand for deaf children. The challenge is that this only comes during national examinations, but in the day to day learning, they are using the usual textbook with long sentences. So they are facing those challenges for the first time. There is a need to marry the examination and also the textbooks so that they get used to the kind of language they are using daily. When they meet it in examinations, we register high pass rates. Maybe, that is why we have low pass rates in languages. Anything to do with words is deficient. They are most gifted in Mathematics as mathematical concepts are exact; one is one and never changes. When it comes to languages, it's different. That's why maybe they fail in Agriculture, languages, and General Paper because they are meeting the modified paper perhaps for the first time" (Psychologist 2).

Deaf children were treated like any other children during examinations except that these examinations were modified. It was interesting to note that psychologists developed an ecological inventory for deaf children's examinations. Deaf children's needs were, therefore, met in the examinations. These needs, however, were only provided during examinations. This scenario could produce examination shock for the deaf children.

On whether examinations were not modified in the past, the participants were uncertain. They used the phrase *maybe for the first time*. One participant had this to say:

"I am not sure how many now. I think it's more than five years now. We had to invite specialist teachers to assist ZIMSEC in our examination boards and in constructing those papers. Initially, deaf learners would write a paper like any other child, learn as any other child and when examinations come, they write a paper like any other child. However, Sign Language is different from other languages; hence, we see very low passes" (Psychologist 2).

The transcript shows that examinations for deaf children were modified. Various stakeholders were involved in setting modified examinations.

5.3.2.3 Deaf children's experiences of inclusion

The participants who participated in the FGDs demonstrated that deaf children experienced inclusive education at regular schools. They were recognised as learning in resource units within the location of the mainstream school. The participants declared that deaf children were included in the mainstream classes during the teaching and learning of practical subjects or when the specialist teachers were not at the school. Deaf children, therefore, had experiences in these areas of inclusion.

On whether deaf children strictly learned in the resource units or whether they were sometimes included in the mainstream classes, there were some disagreements among the teachers in the FGDs. Some participants said that deaf children strictly learnt in the resource units and not in mainstream classes, while others indicated that they received deaf children in their classes occasionally. Another group said that they only received deaf children in their classes when their teachers were not at school. Eventually, the participants agreed that deaf children were sometimes included in the mainstream classes. The evidence from three teachers from the FGDs and a psychologist was represented as follows:

"They mainly learn here [Resource Unit]. There are a few classes they are sent to mainstream classes. When specialist teachers are away, they are allocated to our classes where we have fifty-eight or more pupils already" [with the non-verbal language expressing some unhappiness] (Participant 3A).

"I take them [deaf children] in Computers, but I cannot sign" (Participant 1A).

"I have challenges communicating with deaf children when I teach deaf children Home Economics. This is especially exacerbated by the fact that the specialist teachers do not accompany them to Home Economics lessons" (Participant 6A).

"Our learners with hearing impairment are sometimes included in the mainstream classes for practical subjects" (Psychologist 2).

These participants concurred that deaf children mainly attended class in the resource units but also attended mainstream classes when specialist teachers were not available, attending workshops, for instance. They also participated in mainstream classes particular in subject areas like ICT or Home Economics.

Contrary to these views, some participants from the same FGDs said that deaf children attended instruction strictly in the resource units despite the fact that some teachers had indicated that they taught them when specialist teachers were not present. At the same time, some also stated that they taught deaf children in their specialised subject areas like ICT, Physical Education, and Home Economics. The excerpt from one participant from the FGDs refuted the view that deaf children learned in the mainstream classes. The participant said

"They do not go to mainstream classes; they learn here in the resource unit" [showing signs of being irritated] (Participant 4A).

Participant 4 looked unsettled or irritated each time it was mentioned that deaf children went to the mainstream classes to learn there. These disagreements where some teachers arguing that deaf children did not go to mainstream classes perhaps emanates from the fact that some teachers were not quite conscious of what was transpiring in the schools. Those who said they received deaf children in their classes when their teachers were not around concurred with teachers of such subjects as Information Communication Technology (ICT) and Home Economics who said that they taught deaf children in their special areas in the mainstream classes regardless of the presence of specialist teachers.

There were disagreements on whether deaf children were attending regular classes or not. Some teachers, especially specialist teachers (participant 4A), said that deaf children were learning

strictly in the resource units while other teachers said that they received deaf children in their classes when specialist teachers were not present, with those teaching practical subjects like Physical Education, ICT and Home Economics also indicating that they taught deaf children even when specialist teachers were available. Specialist teachers were perhaps unaware of what was happening to deaf children when they were not at the school. Teachers who experienced the teaching and learning of deaf children in the absence of specialist teachers should have their roles acknowledged. It might be acknowledged that deaf children occasionally experienced learning in regular classes. It should also be acknowledged that deaf children attended particular subject areas in regular classes. These disagreements could be a result of the belief that teaching deaf children strictly in the resource units was the ideal thing. At the same time, some participants wanted to give the correct position of the situation of deaf children in mainstream schools.

Although most teachers in FGDs said that deaf children attended classes in their regular classes as well as in practical subjects, the administrators refuted that view, and concurred with the teacher who said deaf children did not go to mainstream classes and indicated that in the absence of specialist teachers, the school dismissed the deaf children so that they would not be found loitering in the school due to lack of attention from teachers who were unable to sign, teach or communicate with them. On how the school handled deaf children, if both specialist teachers were not present, the administrators indicated that they dismissed them because they could not communicate with them, even during teaching and learning. Apparently, was exclusive to dismiss deaf children on the grounds that specialist teachers were not present. It was going to be a noble idea to distribute deaf children to the regular classes according to grades as reported by regular school teachers, to enhance the learning of Sign Language by every member at the school. This would remove communication barriers. Assigning those teachers with Special Needs Education qualifications to the resource units or at least finding volunteers to teach deaf children until specialist teachers were present was another alternative idea. The excerpt from one administrator below shows how the school, for instance, when both specialist teachers were out for a workshop, handled deaf children.

"No way, we just dismiss them. We have to dismiss them because there won't be any communication. Even those learners end up running about the schoolyard" (Administrator 2).

On whether the parents welcomed the idea of deaf children learning in inclusive primary schools, the participants' responses were in the affirmative as they indicated that both the school and the community welcomed the idea of deaf children learning in mainstream schools. The responses show that the views of the administrators were that the inclusion of deaf children in primary schools was a noble idea because it removed differences and stigma among learners. The participant had this to say on parents' willingness to have their deaf children included in mainstream schools:

"They are happy because if the neighbours or other people see the children wearing the school uniform, no one will ever know about child's disability. Honestly, if these kids are just moving without being talked to, no one will ever know that they can't hear or talk"
(Administrator 2).

The excerpt reveals that deafness is a silent disability. One can only tell that the person is deaf after talking to him/her. The excerpt shows that deaf children's attendance of the school was good as no one noticed that they had a disability. Inclusion, therefore, removes disability and stigma.

5.3.2.4 Accommodated Curriculum

The school was implementing a curriculum in educating their learners, both deaf and hearing. They had something tangible to guide them throughout the teaching and learning process. Accommodated curriculum refers to a modified or adjusted curriculum to meet the needs of deaf children in a regular classroom.

5.3.2.4.1 Nature of the curriculum

Teachers, administrators, psychologists and deaf children commented on the content of the curriculum they had. One administrator and two psychologists expressed their views regarding the nature of the curriculum that was used in the teaching and learning of the deaf children as shown below:

"We use the same curriculum. We have one curriculum, one teacher, and one examination"
(Psychologist 1).

"These learners just learn the curriculum like any other child in the mainstream. The curriculum is the same. The difference is only that theirs is modified. The Language is modified. They learn the same curriculum, but the language is modified" (Psychologist 2).

"They don't have a separate curriculum. They use the same curriculum as those learners in mainstream schools. So they don't have a separate curriculum. Some adjustments are made, for example, when teachers are supposed to teach the mainstream class a topic in about a week, they allocate more time when teaching these children with hearing impairment the same concepts. They adjust some of the things to suit the learners. They need more time. In terms of language, no modifications are necessarily effected" (Psychologist 3).

"We teach the same curriculum, we give them textbooks, and we expect that they are taught using the same pedagogical skills like in the mainstream" (Administrator 1).

Administrators and psychologists concurred that the mainstream school curriculum was used to teach deaf children, with all of them indicating that the same curriculum was used to teach both deaf and hearing children. Although two psychologists said that the curriculum was the same but modified, the other psychologist and an administrator were silent on the 'modified curriculum' though they all stuck to the phrase '*same curriculum*' to describe the operational curriculum being taught to the deaf and hearing children. The participants indicated that the curriculum for the deaf children was modified in terms of language and time. Deaf children were allowed more time to grasp a concept. Thus, deaf children were exposed to the same curriculum as mainstream learners. On what Psychologist 2 meant by *the same curriculum but language is modified*, a participant responded, thus:

"The language for deaf children is concise and straight to the point whilst our language is complex, very long and indirect. We use several words to express a simple thing. When it comes to the deaf, it is so difficult to sign every word. For instance, this text titled: 'Dealing with Attention Deficit Disorder' for Sign language, might be half of the text, meaning that they go straight to the point and skip some consonants or some letters in between words are removed. The sense remains the same, though some words would have been removed".

Regarding the place where this curriculum modification was done or whether there was somewhere where the modified curriculum was written, say in the form of a syllabus, the psychologist's response was:

"In terms of the syllabi, I am not sure. What I know is that teachers are given the same syllabi, but because they are specialist teachers, they modify their teaching plans or schemes for the lessons. These are the specialist teachers for the area so that the IEP (Individualised Educational Plan) is used as a way of modifying it. What I am so sure about is the examination because I have seen it. And maybe their textbook, but that is still limited. One teacher, I think, once pointed out that they are still using the usual textbooks. For our learners, it's difficult; so, there is need for textbooks just to learn Sign Language. Still, I don't think we have a whole package of every subject or learning area that has a modified textbook, maybe except for English which, which has been modified. I am not sure of Science, Maths and Geography" (Psychologist 2)

The participants indicated that it was the duty of the specialist teachers to modify the curriculum for the deaf, which could be a severe challenge in cases of shortages of such teachers. This could also be a challenge when the specialist teachers lacked the expertise needed in modifying the curriculum for deaf children. In this scenario, where each teacher was changing the curriculum for his deaf children, there was no guarantee that deaf children in one regular school would be exposed to the same curriculum as those in the next. Hence, educational exposure for these deaf children varied from one school to the next.

However, contrary to the views of the psychologists and the administrators that the curriculum for deaf learners was the same as that of hearing children, notwithstanding the modifications, the views from focus group discussions indicated that neither the curriculum nor the examination was modified. The participants declared that:

"The Ministry of Primary and Secondary Education alludes to the implementation of the adapted curriculum, but it is not. Examinations are also not adapted" (Participant 3A).

"They use the same textbooks because their examination is the same when they sit for their Grade seven examinations" (Participant 1, FGD 1).

Contrary to the views of the psychologists that curriculum was modified and presented in the language deaf children could understand, that is, Telegraphic English, the participants from focus group discussions said that the curriculum was not altered and Sign Language interpreters were availed during examinations to sign the instructions and questions for deaf children. The

participants indicated that during the examinations administered by the Zimbabwe Schools Examinations Council (ZIMSEC), Sign language interpreters were availed to sign for deaf children throughout the investigations. Commenting on the possibility this initiative since deaf children could have different writing speeds, one participant responded, thus:

"Signing [for examinations] is done number by number. All the deaf candidates have to complete the question that has been signed and then proceed to the next question together" (Participant 5A).

This poses a challenge as all deaf children who are writing examinations are put into the same bracket as if they are a homogeneous class, thinking and writing at the same rate. Previous discussions with the participants have revealed that some deaf children were gifted, yet in this case, they were treated as a homogeneous group in signing for examinations. The issue of availing Sign Language interpreters during the examination process confirms that the curriculum was not modified to meet the language needs of deaf children. During teaching and learning, deaf children experienced Sign Language from their teachers. In contrast, during the examinations, they experienced Sign Language from Sign Language interpreters who were not their teachers and who could be using different dialects that could not be understood by these deaf children easily.

On the suitability of the mainstream curriculum in the teaching and learning of deaf children, the participants indicated that it was not suitable because it was not adapted to suit the needs of deaf children. Two participants from the FGDs explained why the mainstream curriculum without adaptations was not suitable to in the teaching and learning of deaf children. They said:

"The mainstream curriculum is not ideal or friendly to deaf children because some deaf pupils spend over fifteen years in primary school because they needed more time to comprehend concepts" (Participant 4B).

"Teachers need more time to explain concepts to deaf children than they need when teaching hearing children" (Participant 2B).

The mainstream school curriculum was reportedly unsuitable for the teaching and learning of deaf children as it did not accommodate 'the more time' deaf children needed to grasp concepts. It also did not help the 'more time' teachers require in explaining concepts to the deaf children. Both

teachers and deaf children needed more time in their teaching and learning interactions, possibly because of the communication challenges between them.

On whether teachers were allowing more time to explain concepts to deaf children who needed more time to understand concepts, the participants said this was not possible because when some children were left unattended to, they made noise. The utterances below show the experiences of two participants from the FGDs:

"It is not possible to give more time to deaf children though they need more time for explanations for them to understand concepts because others start playing and making noise" (Participant 6B).

"They are being allocated to our classes where we have fifty-eight or more pupils already" (Participant 1A).

Evidently, teachers had no knowledge of how to handle deaf children in an inclusive setup. In addition, the inclusion of deaf children was difficult possibly because of the large class sizes accommodating up to fifty-eight mainstream learners being managed at once. However, the psychologists indicated that the teaching and learning of deaf children had more time allotments as teachers took more days or weeks to cover topics that were covered in one week by mainstream hearing learners. One psychologist said:

"They cover a topic in about a week, and when teaching children with hearing impairments, they often take longer" (Psychologist 3).

The participants indicated that they had shifted from the old curriculum to the new one, commonly known as the Competence-Based Curriculum (CBC). The participants said that the previous curriculum was examination-oriented; hence, it disadvantaged deaf children. Deaf children faced challenges with the language used in the examinations. The CBC focused on competencies, skills, and attitudes, which could be assessed through observations or communication through a language that the learner was comfortable with. Deaf children were performing much better in the CBC than they did in the old examination-oriented curriculum. However, the administrators were not quite sure of how the assessment was implemented using the CBC. The administrators explained, thus:

"The academic tests that we had in the old curriculum were largely summative, whereas the tests using the CBC (Competence Based Curriculum) are both formative and

summative. It is formative in the sense that coursework forms part of the marks. It means they are based on what the child has learned. The child is asked about knowledge acquired from the time the child started school up to Grade Seven. In the old curriculum, testing was on knowledge, whereas when we talk of formative assessment, we are looking at skills, competencies, attitudes, and there is coursework, which constitutes about thirty per cent of the total marks the child is assessed on, then examination questions constitute seventy per cent. If you look at Agriculture, there is a diary, and the child will also be assessed using the diary and the marks and looking at maybe a given portion which the child is expected to look after. To tell you the truth, we have never been given the blueprint right now, because the first assessment will start in 2021. The first examination using the CBC will start in 2021, and we have not yet been given a blueprint on how the assessment is going to be conducted, but roughly, interacting with the syllabus, it tells us that it is going to be assessed using skills, competencies, and attitudes but we are here to preview right now as to how the skills will be assessed. However, we would like to believe that as coursework, children will be assessed in skills, skill by skill; for example, when you look at Agriculture, we are looking at the skills of farming and can say the child has mastered the skills of farming by the products. If the child manages to produce good cabbages at the plot that is assigned to the child, then we can say we have done our part. The child has mastered the skills in farming" (Administrator 1).

"The new curriculum is competence-based whereas the old one was purely academic. We were looking at academics mainly, but this one now looks at what the child can do in terms of skills. English is just communication perfected through conversation. Through those ways, that's when you can say this child is right; maybe at poetry, this child is good in creative writing, and so on. So, generally, that's when you can major with the child in whatever area you think the child can do better" (Administrator 2).

Generally, the CBC was perceived as a good curriculum for the education of deaf children. The challenge was that those who implemented it were bereft of knowledge about assessment criteria. If teachers were doing it wrongly, this is likely to pose a challenge to the implementation of the correct academic assessment procedure when there is no blueprint.

On whether or not the old curriculum was not focusing on these competencies, the participant said:

"It was done in the old curriculum, but clearly, one had to make sure that they produced some academic results. You should make the child being able to produce, if it means once in English or whatever academically" (Administrator 2).

This suggests that the only skills that were assessed in the old curriculum were only in terms of academic examinations.

On whether communication skills for deaf children were assessed in Sign Language or some other language, the administrator was in a dilemma and had this to say:

"I think if the teachers were here, they would help us" (Administrator 2)

This implies that the administrators were out of touch with some academic experiences of deaf children at their school. The administrator expressed ignorance of the language that was used to assess deaf children, indicating that the specialist teachers knew better. This implies that the specialist teachers decided what to teach and how to teach deaf children without the knowledge of the administrators. As such, the administrators consulted the specialist teachers on the academic experiences they subjected deaf children to. Moreover, this implies that the Ministry of Primary and Secondary Education and the school did not have respective policies on the teaching and learning of deaf children. If these policies were there, the administrators would know that at their school, they are implementing the policies along with specific parameters; for instance, the administrator would have known that deaf children were assessed using a specific language.

5.3.2.4.2 Accommodated Time allocation

Each lesson has a specified duration. Accommodated time allocation is the time is the ideal time that is scheduled for each lesson for teachers to effectively deliver a lesson to deaf children.

During the focus group discussions, the participants indicated that deaf children experienced the same curriculum as hearing children. They acknowledged that deaf and 'normal' children were being taught the same subjects which were allocated the same time at school. The participants concurred that thirty minutes was the time allocated to each subject period. In the following extracts, the participants confirm this finding.

"Thirty minutes is allotted to each subject" (Administrator 2).

"Thirty minutes" (Administrator 1).

"The lessons are thirty-five minutes long" (Participant 4A).

The administrators concurred that each lesson period was thirty minutes long, while the teachers said that each lesson period was thirty-five minutes long.

Asked whether thirty or thirty-five minutes were enough for the teachers to thoroughly explain concepts to make their deaf children understand them as well as to give individual attention to the deaf children during the teaching and learning process, one administrator, one teacher and a psychologist perceived thirty minutes as not long enough to effectively deliver a lesson to the deaf children as shown below;

"It's not enough. You see, the ideal situation is whereby we have a syllabus for children with hearing impairment, but unfortunately, we are using the mainstream syllabus. So, if they had their syllabus, it would stipulate that they should have more time" (Administrator 1).

"Deaf children need more time to grasp the concepts. Teachers need to be patient and take time to explain concepts to them, which should work, especially in concrete terms. Basically, we take our time. We do not stick to the thirty-minute periods. Supervisors are aware that we do not stick to allocated time. We just ensure that what we have taught has been comprehended. The Ministry is also aware of the concept of time. That is why they extend the time allocated to deaf candidates during examinations" (Participant 4A).

"Mainstream classes cover a topic in about a week, but when teaching learners with hearing impairment, the time can be longer. They adjust time to suit the learners because they need more time" (Psychologist 3).

The administrator lamented the non-existence of a syllabus for deaf children, an assertion that concurred with earlier findings from teachers who reiterated that there was no adapted curriculum. Teachers needed more time to explain concepts to deaf children, while deaf children also needed more time to decode the delivered concepts. Participants concurred that there was a need for more time for the teaching and learning of deaf children under an adapted curriculum. A suitable

curriculum would stipulate the ideal time for effective lesson delivery rather than having teachers to decide on the time they would want to spend. Teachers, however, intimated that they were taking their time and the ministry, and the administrators were aware that they were taking their time to deliver lessons effectively, which was their reason for allowing deaf candidates to be awarded extra time during examinations. Teachers reported that they ensured that their children had understood the delivered concepts. The idea of spending more time was proffered by a specialist teacher, Participant 4A.

However, one of the administrators spoke at variance with the participants and indicated that she viewed thirty minutes as enough to effectively deliver a lesson to deaf children. The transcript below shows her views.

"One thing I discovered with these learners is that they don't want very long lessons. They are bored with them and end up not paying attention during learning. They start doing all sorts of things, so the shorter the lessons are, the better it appears to them so that even if they do just a short time with this subject, they switch on to another lesson and, maybe later, they come back to that lesson. I have been looking at their lessons, particularly the teachers' lesson plans and the like, even their lessons are planned in such a way that they are so concise that if they are to acquire whatever concept they are doing, it has to be done within a short time. From my observations, they don't have problems in those short lessons or short periods" (Administrator 2).

The administrator felt that the thirty-minute period was the ideal time for each lesson for the teaching and learning of deaf children. She argued that deaf children would end up being inattentive if the lesson period was more than thirty minutes long. The administrator said that she had observed that the teachers' lesson plans were designated short time to these lessons. However, the same teacher indicated that they needed more time to effectively deliver a lesson to deaf children while deaf children also needed more time to understand concept. The views of other participants were that the thirty-minute period was not enough to effectively deliver a lesson to the deaf children, showing that this administrator based her arguments on incorrect assumptions. The idea of being inattentive during lessons exceeding thirty minutes was refuted by the psychologists as shown in the excerpt below:

"They are children. What other children do is the same with deaf children and we have to treat them as such unless there is a comorbidity of deafness and psychological disorders. A child may be deaf but suffers Attention Deficit Hyperactivity Disorder (ADHD). That's an isolated case which we cannot attribute to deafness" (Psychologist 1).

These views show that being deaf alone did not lead to a lack of attention to lessons longer than thirty minutes in duration. Lack of focus could be due to comorbidity, for instance, deafness and ADHD.

5.3.2.5.3 Ideal class size

A good curriculum should specify the number of learners that constitute a class. Ideal class size refers to the size of the class or the number of deaf children in a class that enables teachers to effectively deliver a lesson.

During the focus group discussions, the participants' responses revealed that deaf children were adapted to the ideal class size in a resource unit. Different figures were put forward. In the responses below, one teacher showed this information.

"A class of sixteen deaf children is the ideal one for the teacher to be able to monitor and attend to learners' individual needs in the lesson" (Participant 1A).

The teachers indicated that sixteen deaf children constituted an ideal class, adding that this ideal number would allow the teacher to pay individual attention to all the learners. The participants from FGDs further indicated that the numbers of deaf children enrolled were smaller compared to those of hearing children. The participants said that the number of deaf children in the resource unit were lower while there were more significant numbers in the regular classrooms, totalling fifty-eight or more pupils. The participants said that the number of deaf children were supposed to be smaller because specialist teachers were dealing with special children. They had this to say:

"The more we have learners in the resource units, the more we need specialist teachers because they are dealing with special children" (Participant 3 FG 2).

The idea of calling for more specialist teachers could be a sign that mainstream teachers feared for their inadequacies in handling deaf children and, therefore, delegated all the work related to deaf children to specialist teachers. These views also showed that the participants from the FGDs were

conscious of the need to have smaller classes for the effective teaching and learning of deaf children in resource units.

However, the psychologists recommended a different number they said should constitute an ideal class size for deaf children. One of the psychologists had this to say:

"Ten is the maximum number that constitutes a class of deaf learners. Five to six learners constitutes the minimum size of a class. Five learners constitute a class, and the number can increase up to ten" (Psychologist 2).

The psychologists recommended a smaller number, making the class more manageable. A maximum of ten deaf children in a class is admittedly a manageable number. The participants in the FGDs indicated that when deaf children were in mainstream classes, they were not able to attend to them as individuals because of the large numbers of learners in regular classes. The utterances extracted from two participants from the FGDs crown the whole story, thus:

"When deaf children are in mainstream classes, we do not have time to explain concepts to them. We 'babysit' them. We have a target to meet, for instance, the number of lessons to be delivered per day, the number of written exercises per day, and meeting examination targets" (Participant 1A).

"When specialist teachers are away, deaf learners are allocated to our classes where we have fifty-eight or more pupils already" [expressing unhappiness] (Participant 3A).

The teachers said that when deaf children were in the mainstream classes, they taught their classes as usual, as if deaf children were not included. This could mean that deaf children were not active in learning as the teachers were just 'babysitting' them or nursing them. This was because the mainstream classes were so big that they could not afford to attend to individual learners during the teaching and learning process. Moreover, the teachers had targets they were expected to meet. They were expected to deliver a certain number of lessons per day, give a number of evaluative exercises, and meet examinations targets in the form of pass rates, despite the findings from administrators and psychologists that the CBC was not examination-oriented. The issue of having to meet targets meant that giving individual attention to deaf children would rob teachers of the time needed to meet the set targets. This implies that their target was not children's needs but the requirements of their job, which were not child-oriented but focused on the teacher's records. The

supervisors emphasise teachers' records at the expense of deaf learners' needs. It also suggests that the school's attitudes towards the education of deaf children in the mainstream classes were not yet quite inclusive. This was also perhaps due to the lack of a modified curriculum that specified the academic needs of deaf children. Inclusive attitudes would seek to explore strategies of ensuring that deaf children get maximum benefit out of the system. In this case, it appears as if they were treated as second-class or alien pupils at their school, especially when they were in the mainstream classes. The set targets that were mentioned by the teachers had nothing to do with meeting the academic needs of the deaf children.

5.3.3 Availability of resources

This study revealed that the availability of resources at the school could enhance the teaching and learning of deaf children. These included hearing aids or amplification devices, visual learning aids, skilled human resources, appropriate infrastructure, and books.

5.3.3.1 Amplification devices

Amplification devices are gadgets that boost sound. They boost and excite the ear to hear the sound. Some types of hearing loss, however, may not benefit from amplification devices.

The responses from participants in the FGDs suggest that the availability of hearing aids and amplification devices could enhance the teaching and learning of deaf children at the primary school. However, all the participants indicated that the all the available amplification devices meant for deaf children were hearing aids only, which were bought by either their parents or their donors. Deaf children confirmed that the hearing aids they had were provided by their parents. One teacher from FGDs indicated that deaf children who had hearing aids brought them from their homes. The participant said:

"A few have hearing aids, but all the others do not have them. These hearing aids were bought by their parents or donors" (Participant 5A).

The above report shows that not all deaf children had hearing aids. Those who had them brought them from their homes. Observations also confirmed that a few deaf children had hearing aids which they brought from home.

Deaf children had their experiences regarding hearing aids. One deaf learner said:

"I do not have a hearing aid. I do not like it, anyway [with body language showing disinterest]. Those who have hearing aids bring them from home. The school does not provide hearing aids" (Deaf Child 1).

"I do not have any hearing aid. The school does not supply us with hearing aids. My parents do not have the money to buy me hearing aids" (Deaf Child 2).

"I do not have a hearing aid, but those who have them bring them from their homes. I do not need hearing aids, either because I am totally deaf. Hearing aids are for those who have some residual hearing" (Deaf Child 5).

The excerpts show that some deaf children had no hearing aids. The few deaf children who were in possession of hearing devices brought them from their homes after they were bought by their parents or personal donors. This means that some deaf children had no hearing aids because their parents could not afford them. The excerpts also show that some deaf children did not like hearing aids, indicating that the gadgets were for those with residual hearing. They were not benefiting from them. The participants indicated that the school did not provide them with hearing aids and this contradicted the expressions made by the administrators and psychologists, as shown by the extracts below:

"Deaf children are given free examinations and free hearing aids" (Administrator 1).

"Our audiologist sometimes fits the children with hearing aids if the resource is available" (Psychologist 1).

Thus, the administrators and the psychologist were at variance with the teachers and the deaf children regarding where the deaf children got hearing aids from with the former, indicating that they got them from the SPS Department, while the latter insisted that they got them from home. The deaf children also indicated that those who had hearing aids got them from homes. The teachers from the FGDs indicated that deaf children did not like hearing aids because of the Deaf Culture to which they subscribed, as Deaf Culture had a language that did not require listening nor speaking, as shown in the transcript below.

"Deaf children are not interested in hearing aids because their culture and language do not require listening, hearing or speaking" (Participant 4A).

The excerpt indicates that deaf children do not like hearing aids, perhaps as a principle enshrined by the Deaf Culture to which they subscribed. Their language, Sign Language, did not require listening; neither did it require speaking. The two concepts, therefore, were out of context for deaf children, rendering the idea of using hearing aids by deaf children irrelevant, especially for those who were in the severe-profound hearing loss. This concurs with earlier findings from deaf children that they did not require hearing aids.

In concurrence with deaf children that those with total hearing loss would not benefit from hearing aids, a psychologist and an administrator illustrated, thus:

"If a child's hearing impairment ranges from mild to moderate, mostly with amplification, hearing aids are essential maybe in the mainstream. Then, in the severe to profound range, hearing aids are necessary, but with mainly resource unit placement. Deaf children need both Sign Language and speech development" (Psychologist 2).

"There are some who don't need hearing aids. Those who have a slight hearing need them. Maybe those who do not have profound hearing loss; but those who have not been found to have profound hearing loss may need them. Some may not be assisted by the hearing aids because the hearing loss is so massive that even if they are given hearing aids, they do not hear anything" (Administrator 1).

These excerpts are in agreement with the expressions of deaf children, that is, not all deaf children benefit from hearing aids even if they wanted to use them. Deaf children in the mild to the moderate ranges of hearing loss could benefit from hearing aids. This was subject to their willingness to use the hearing aids. Those in the severe-profound category of hearing loss could not benefit from the hearing aids even though they were not subscribing to the Deaf Culture. Consistent with this finding, observations by the researcher indicated that the two deaf children with hearing aids in the resource units seemed not to be benefiting from speech as they did not respond to speeches presented to them. They relied on Sign Language throughout the interview process.

5.3.3.2 Visual learning aids

The responses from participants in the FGDs revealed that the availability of visual learning aids could be a critical factor fostering the teaching and learning of deaf children at the school. Visual learning aids are gadgets that help children learn through the use of the sense of sight. These aids were in the form of projectors, computers, or interactive boards.

On how the current state of visual learning aids influenced their teaching, one participant from the FGDs said:

“It negatively affects the teacher because we do not have the necessary equipment to teach deaf children” (Participant 3A).

The excerpt shows that visual learning aids were an instrumental component in the teaching and learning of deaf children.

On the necessity of visual learning aids and their value in the teaching and learning of deaf children, the participants indicated that visual learning aids facilitated the smooth progress of the teaching and learning of deaf children as they learnt better through the use of sight. The extracts below, from one teacher from FGDs and an administrator confirmed this finding. The participants said:

“Projectors promote their learning [deaf children]. These are visual learners, and projectors can assist them in their learning” (Participant 2A).

“Computers are important as well” (Participant 1A).

“They learn effectively through a lot of visual aids or visual media because when one sense is not functioning, humans try to improve other senses to compensate for that sense which is not functioning. So senses of touch, smell, and vision come together. So the teacher should have a lot of visual aids and other media” (Administrator 1).

The participants concurred that visual aids were necessary in the teaching and learning of deaf children as these learners learned effectively through visual means. The participants also indicated that the multisensory approach was important in the teaching and learning of deaf children. These aids maximised the use of the sense of vision.

On the availability of visual learning aids, the transcripts from the two administrators, one teacher from FGDs and a deaf child confirm this status. A participant said:

“Yes, we have got computers, but we don’t have interactive boards. Again it’s a question of limited resources” (Administrator 1).

“We have some computers, but they are inadequate. We have whiteboards which are just like blackboards and we write on them. We lack financial resources” (Administrator 2).

“Deaf children are visual learners, so you find that we do not have enough visual aids necessary for their learning. Actually, they learn in a way that would not promote their effective learning” (Participant 4A).

“There is a lack of resources such as computers and interactive boards. These can make our understanding of concepts better” (Deaf Child 5).

Administrators concurred that there were computers, although they were inadequate. They also concurred that there were no interactive boards. Deaf children, however, cited a lack of these resources, which were essential in their teaching and learning. Observations also show that there is a lack of visual learning aids. The computers that were available were for the learning of Information and Communication Technology (ICT). They were not used as visual learning aids but strictly for the teaching and learning of ICT. They were even housed in the ICT room. Visual learning aids were valuable in the teaching and learning of deaf children at the school, but they were not available. These were said to be aiding the learning of Sign Language even on the part of hearing children, especially considering that the available Sign Language dictionaries had still signs, which could be challenging to understand for those who are not native users of Sign Language. Projectors, computers, and interactive boards were also said to be essential for demonstrations and illustrations of concepts both moving and still ones. Observations showed that classrooms had only whiteboards which could not be connected to computers but were merely used for writing using whiteboard markers.

5.3.3.3 Infrastructure

The responses from participants in the FGDs indicate that the availability of infrastructure could be an essential element contributing to the teaching and learning of deaf children at school. Infrastructure refers to the physical structure of the learning environment of the selected school.

The participants raised various issues in connection with experiences of deaf children in terms of infrastructure in the school. These included mirrors and acoustic classrooms. The participants indicated that infrastructure at the school was not quite accommodative of the teaching and learning of deaf children. The participants indicated that the resource units were not accommodative of the teaching and learning of deaf children as they were not acoustically treated. The excerpts from three teachers from both FGDs revealed the following:

“The rooms are not carpeted, there are no double windows; neither are there curtains among other requirements” (Participant 4A).

“The infrastructure does not accommodate deaf children as there are no carpets, double windows, and curtains” (Participant 6B).

“There should be mirrors, hearing aids, and carpets to reduce noise” (Participant 3B).

The participants revealed that the infrastructure was not accommodative of deaf children and did not have resources necessary for the teaching and learning of deaf children, since there were no mirrors in the resource rooms.

Psychologists concurred with teachers from FGDs that resource units were supposed to be acoustically treated and equipped with the resources necessary in the teaching and learning of the deaf children. Some participants said:

“Admittedly, mirrors and acoustic classes are all materials from the ministry. We receive materials, but all the challenges at the time you hear that the mirrors have been broken making speech development difficult because when they are learning Sign Language, like when pushing the door, maybe they can see one chart [showing the chart to the researcher]. The learner needs to practise sounding these letters looking at the mirror while the teacher and the learner are there. The teacher sounds the letter, and the child has to copy. Copying from seeing you and copying through the mirror are different. The mirror is clearer. So we make use of the mirror. Each class or resource unit for hearing impairment has a mirror.

The mouth we see is distorted because of the distance. The resource units are carpeted for purposes of sound. Some resource units, especially new ones, don't have carpets, maybe because of the challenges we are facing. But previous resources units had carpets” (Psychologist 2).

“I have mentioned mirrors and acoustic booths. During the assessment of deaf children, there are booths which minimise outside sounds as much as possible. Even their classrooms should be free from distracters because some of these learners have a residual hearing. They are easily distracted during an assessment, so they make the learning environment as acoustic as possible. By acoustic, we mean soundproof” (Psychologist 1).

The participants reiterated the fact that the resource units were not quite suitable for the teaching and learning of deaf children due to lack of minimum standards in the resource units. In terms of the state of resource units for deaf children, the researcher was shown a class that was divided by high cupboards which, however, did not touch the roof. On the other side of the cupboards was another resource unit with deaf children, and sharp noise from these deaf children could be heard from the other end. Evidently, the resource units were not accommodative for the teaching and learning of deaf children as they were characterised by ambient noise. They were not acoustically treated. Observations indicated that there were no mirrors and carpets in the resource units. Lack of these mirrors could imply that they were either not procured or broken, as revealed by the participants.

The psychologists said that the most recent resource units were not as well furnished as the old ones. Asked why the most current resource units were not well equipped when the psychologists were required to indicate the department's needs to the ministry, one of the psychologists said:

“I think the numbers count. Disability is increasing. I don't think the government will meet its planning. We have goals and visions. We need to plan for long-term goals. Government never expected disability to increase to this magnitude. So maybe they are overwhelmed by the opening of more resource units, but the capacity to furnish every school as expected is hampered by economic challenges. So, in the end, a class might have a mirror, but it's not

carpeted; hence, there is too much noise in terms of interaction and the outside noises”
(Psychologist 2).

The utterances indicate that the old resource units were well furnished, unlike the one at the selected school, which was rather new. In the new resource units, some aspects were accommodative while others were not. The key obstacle was encapsulated in financial challenges. The government had planned for lower numbers of deaf learners; due to the increase in the numbers of deaf children who were then attending classes, Government was not able to cope with the new developments. This implies that the government’s goals could not be manipulated once they were in place.

5.3.3.4 Skilled human resources

The participants in the FGDs indicated that the availability of skilled human resources such as specialist teachers, psychologist, audiologists, remedial tutors, speech therapists, occupational therapists, doctors and nurses positively influenced the teaching and learning of deaf children at the school. Skilled human resources refer to who, during training, specialised in the needs of deaf children. The skilled personnel could form disciplines to deal with deaf children, be it in psycho-social, academic or health-related issues

Commenting on skilled human resources for the education of deaf children, two participants from FGDs said;

“Yes, the school has skilled human resources because there are enough teachers to teach deaf children, with some operating from the mainstream classes” (Participant 1A).

“There are other human resources that they need, like in assessment” (Participant 4A).

These excerpts show that there were enough specialist teachers at the school, although there was need for other personnel skilled in the education of deaf children, particularly audiologists, speech therapists, occupational therapists, doctors, and nurses. Indeed, observations indicated that there were some teachers with qualifications in Special Needs Education who operated from the mainstream classes.

The administrators concurred with the participants from FGDs that teachers specialised in the teaching of deaf children were available at the school. The following excerpts, from the two administrators, show the state of teacher establishment in the school.

“Yes, there are teachers qualified in the teaching of deaf children, and one of them is deaf. She is a qualified teacher but with hearing impairment. The other one is qualified to teach children with hearing challenges” (Administrator 1).

“We have two specialist teachers here. One is deaf and the other one can talk, can hear and can do everything and she is also a specialist” (Administrator 2).

Therefore, the school had enough specialist teachers. The administrators, however, were silent on those teachers who had qualifications in Special Needs Education and teaching mainstream classes. The transcripts above show that the school had one deaf teacher. As a follow up on who was preferred to teach deaf children between a deaf and a hearing specialist teacher as well as reasons for having just one deaf teacher, the participants gave the following responses:

“Their employment is affected by communication. Companies need to employ people whom they communicate with. Their employability is also impeded by stigma and discrimination” (Participant 3A).

“Maybe they prefer other professions other than teaching. If they qualify and apply for training, they are considered, trained, given posts, and they teach” (Psychologist 1).

“I think the country has a limited number of deaf teachers because somehow somewhere, we lose them. They don’t proceed to the tertiary level. They don’t continue to the highest level of education because, in order for a hearing impaired child to go to tertiary level, proper steps should be taken from ECD A up to tertiary level. The child should have proper guidance. I would rather have teachers with hearing impairments in the resource rooms because they easily relate with the challenges these learners face and they know what it is to be deaf and dumb” (Administrator 1).

It was assumed that there were few deaf teachers in schools because either they did not prefer to take up the teaching profession due to communication barriers since the majority of the learners were hearing or because most of them did not proceed to tertiary education due to lack of proper instruction right from ECD to Ordinary and Advanced Levels. The participants also indicate that

they preferred deaf teachers to teach deaf children for their experiences in deafness. They understood the culture and experiences of deaf children. On whether the SPS Department had the specialist human resources for assessment, one participant from the FGDs said:

“We do not have any idea about their availability, but they are the ones who assess deaf children. We have not yet visited the SPS to establish who is there” (Participant 1A).

This suggests that the teachers were not aware of their partners in the education of deaf children; neither did they know what was actually happening at the SPS. The administrators also expressed their views on other skilled personnel who were necessary for the education of deaf children. Regarding skilled human resources like nurses, speech therapists, or occupational therapists, one administrator said:

“It’s unfortunate that these are the people whom we need, but we don’t have resources to engage them” (Administrator 1).

The participants’ views show that other skilled human resources were necessary for the successful teaching and learning of the deaf children, although they were not available due to the incapacitation to engage them. This means that the government did not have the capacity to employ the other necessary skilled personnel.

On how the school got the specialist teachers, the participants indicated that the Ministry of Public Services, through the Ministry of Primary and Secondary Education, was responsible for the employment of teachers after they got declarations of the vacant posts from the schools. The two administrators explained how the school got the specialist teachers. They said:

“I think since it is the Ministry that makes us enrol hearing-impaired learners here, I am sure if we have such programmes here and if we are in need of such teachers, we simply make a request with the Ministry” (Administrator 2).

“If a vacancy arises, we declare it. We declare the vacancy to the District Offices, which in turn, requests for the teacher from the Ministry of Primary and Secondary Education” (Administrator 1).

The report shows that the school administrators got specialist teachers from the government who employed them after they declared that they needed an expert teacher. It was the duty of the District

Schools Inspector to recommend the employment of the suitable candidate through requesting for the teacher form the Ministry of Primary and Secondary Education (MoPSE). This means that getting the teacher was subject to availability. This could also mean that the administrators had no powers to decide whether they wanted a deaf or hearing specialist teacher, even if they felt it was an advantage having a deaf teacher or a hearing teacher teaching deaf children. It could also mean that it was the duty of the government to pay the salaries of specialist teachers since they were their employees. The government, therefore, played a critical role in paying salaries of specialist teachers. This proves that the government was committed to improving deaf children's quality of life through education.

The teaching and learning of deaf children needed some other skilled personnel apart from specialist teachers. Although the teachers from FGDs indicated earlier that specialist teachers were in surplus, the psychologists viewed lack of human resources, especially specialist teachers, as a significant challenge, which was difficult to handle even in cases of their retirement or resignation. Although some teachers suggested that specialist teachers were in surplus, they concurred with the psychologists that lack of skilled personnel was a challenge. Perhaps the selected school was lucky to have enough specialist teachers. In contrast, other schools had shortages, or there was a need to reconsider or rationalise staffing by moving those specialist teachers who were teaching in the mainstream to other schools with shortages if their placement at the selected school was not by design. Generally, skilled personnel was resigning or leaving the ministry for greener pastures with the latest example being the audiologists who all left the whole Ministry of Primary and Secondary Education. This dire straits scenario left the Department of Schools Psychological Services with no audiological services, thereby placing deaf children basing on assumptions on hearing acuity. There were chances of wrong educational intervention from the psychologists as well as improper placement. This could have a negative impact on the education of the deaf child. The report from one participant from FGDs, an administrator and two psychologists, summarise the situation below:

“There are other human resources that they need, like in audiological assessment, they need the speech therapists and teachers are not trained in these areas” (Participant 4A).

“It's unfortunate that those are the people whom we need, but we don't have resources to engage them” (Administrator 1).

“She is the only one in Zimbabwe. So she serves the whole country, and I am told that she has resigned, so we no longer have an audiologist. So it’s a challenge” (Psychologist 3).

“That’s a major challenge. And for hearing it’s a major issue. I don’t know the reason. Maybe hearing impairment specialist teachers are on demand. Most of our schools, like the one I am responsible for, do not have adequate teachers. Once a teacher resigns or retires, it takes maybe two to three years before that teacher is replaced. Maybe it is not because the government doesn’t want to employ them, but the teachers are not there. Some have gone to seek greener pastures in NGOs which are requesting for their services. It’s a challenge this province is facing. Hence, even when we open the resource units, we end up closing them due to the absence of resource teachers. Now, it’s sad news that we no longer have an audiologist in Zimbabwe [whispering]. We had two, but they resigned in December 2019. So in January we didn’t have audiological assessments. So now we are booking our learners in each district, then we look for services from the private sector then they come and assist our learners at once. It’s no longer the usual business. Now we are just doing tentative placement after asking the mother ‘whether the child does have residual hearing. If the mother says no if she is not well informed, there is bound to be wrong placement at times” (Psychologist 2).

The extracts show that the lack of skilled personnel was a major challenge. All the participants concurred that the lack of qualified personnel was a crucial challenge in the teaching and learning of the deaf children. Some challenges stemmed from lack of funds to engage the specialists, a scenario compounded by brain drain. The brain drain signifies that the personnel in the education of deaf children were highly skilled and highly valued by other sectors both in terms of salaries and skills. These personnel were difficult to replace once they left the ministry.

On what the government was doing to retain specialist teachers, say, prolonging their retirement age, paying them allowances, incentives or paying them more to avoid their departure for green pastures, the participants said the specialist teachers were not treated as a special cohort. They earned what mainstream teachers earned despite their extra qualifications. As personnel with some technical skills, they would resultantly flock to where they would be offered better salaries. Others indicated that they were not sure whether there was a difference in salaries between specialist and

mainstream teachers. Thus, on whether specialist teachers were better remunerated than mainstream teachers or whether they had some incentives of some sort for their services as specialist teachers, the participants all concurred that expert teachers were not satisfied with their remuneration. They said:

“I am not sure about the issues of incentives from the government. It’s another department” (Psychologist 1).

“In terms of remuneration, I think everyone is dissatisfied” (Psychologist 2).

“Teachers’ morale is low because of low income and lack of incentives” (Participant 4B).

The findings show that low salaries were not an issue confined to specialist teachers but it affected all government workers. The low salaries were psychologically affecting the performance of the workers.

In the wake of the resignation of the audiologists, the psychologists doubted the capabilities of the specialist teachers in conducting audiological assessments and interpreting the audiograms as a remedy to the absence of audiologists. The transcript below, from one psychologist, depicts the views of the psychologists on the subject.

“I’m not sure because I think there is a skill that is needed. I think maybe through the District Schools Inspector(DSI), they requested anyone who wants to apply for the post but when you don’t see anyone coming to avail themselves, that means they don’t have the qualities because there is an aspect on interpretation of the instruments. Maybe the reason they don’t accept applications is because in assessment they have to read the audiogram and interpret it for the teacher. It’s not like the teacher can interpret the audiogram. So the challenge of teacher interpreting the audiogram makes also a query ‘Can they do the assessment?’” (Psychologist 2)

The data shows that the skills of the audiologist could not be practised by other skilled personnel. This also implies that each personnel was skilled in a specific area and could not extend his or her services to the next area. Thus, the SPS was in dire challenges regarding lack of skilled personnel in the teaching and learning of deaf children. Generally, skilled personnel were not enough for the teaching and learning of deaf children. Specialist teachers were a rare species once they resigned

or retired. Although it emerged from the participants that specialist teachers were more difficult to replace than other personnel once they left, it seemed that audiologists were also difficult to replace because advertisements were put forward but no one responded to them. This means that skilled personnel in the field of Deaf Studies in general, were difficult to replace once they left, which testifies that their technical skills were in high demand outside the Ministry of Primary and Secondary Education in particular and the government in general.

The responses from participants in FGDs showed that the availability of books could play an important role in contributing to the teaching and learning of deaf children at the school.

On whether the textbooks that were used for the teaching and learning of deaf children were specifically for deaf children, the participants in FGDs unanimously indicated that they were for all the children including hearing children. The researcher was only shown Sign Language dictionaries, Volume One and Volume Two which the participants said were adequate for use in the teaching and learning of deaf children. These dictionaries were said to be the only books specific to the deaf children. They were said to be supplied by the Department of Schools Psychological Services free of charge. The views of the participants on the issue of books are indicated in the utterances below as expressed by two participants from FGDs and an administrator.

“They use the same textbooks because their Grade Seven examination is the same”
(Participant 3A).

“There are only textbooks available and Sign Language dictionaries, Volumes One and Two being the only textbooks” (Participant 4A).

“As for resources, we have got textbooks. What they learn is just the same as what is learned in our mainstream” (Administrator 2).

Mainstream textbooks were used for the teaching and learning of deaf children basing on the fact that they sat the same examinations as the mainstream classes. Thus, the participants concurred that deaf children were exposed to the same curriculum as the mainstream classes. Academically, therefore, deaf children performed all the activities performed by hearing children. Deaf children

also shared their sentiments with the researcher on the textbooks they were using. They had this to say:

We do not have textbooks for the resource units except Sign Language dictionaries. We borrow textbooks from the regular classes when we want to use them. We return them when we are through with them” (Deaf Child 2).

“In our classroom, we only have Sign Language dictionaries. We borrow other books from the regular classes” (Deaf Child 6).

The expressions from deaf children show that the resource units borrowed textbooks from the mainstream classes and returned them as soon as they were through with them, irrespective of whether or not these books were being used in the mainstream classes. This concurs with teachers’ views that deaf children used mainstream textbooks, although the teachers were silent on the idea of borrowing the books from the mainstream classes. It may be surmised that by saying ‘mainstream textbooks,’ the participants implied that the books did not belong to the resource units but to the mainstream classes. This implies lack of ownership of the textbooks on the part of the resource units. This also means that the procurement of resources for deaf children was not quite a priority and allocation of mainstream resources was not quite extended to deaf children. Resource units only got the books through borrowing from the mainstream classes. Psychologists expressed different views regarding textbooks are represented in the following reports:

“They use adjusted textbooks with telegraphic language” (Psychologist 1).

“They are still using the usual textbooks. In terms of the language, the comprehensions are precise, straight to the point like they have been decoded into the Sign Language. It’s very short and precise, which makes it easy to understand for the deaf children. The challenge is that this is only coming at examinations, national examinations, but in the day-to-day learning, they are using the usual textbook with long sentences” (Psychologist 2).

The psychologists said that the modified or adjusted textbooks were used in the teaching and learning of deaf children although one of them said that during the teaching and learning of deaf children, mainstream textbooks were used while modified texts were used for public examinations purposes. This posed some challenges when deaf children would meet peculiar issues in the examinations. This could cause examination shock which results in poor performance. The views

of those who experienced the teaching and learning of the deaf children using mainstream textbooks could be believed without doubts. The views of the psychologists pre-empted something which had not yet happened.

5.3.4 Kinds of support services

This study found that the school offered support services to facilitate the learning of deaf children in the school. These included academic, psychosocial and financial support services.

5.3.4.1 Psychosocial support services

Psychosocial support refers to both the psychological and social aspects in the education of deaf children. The responses of the participants in FGDs indicated that deaf children received psychosocial support from the school. These services were offered through psychological and audiological assessments, sporting activities, guidance and counselling and social clubs. Regarding the assessments, deaf children underwent psychological and audiological assessments. These assessments were used to place deaf children in schools that would facilitate their social and academic inclusion. A psychologist describes the process as follows.

“We conduct the psychological assessments of the deaf children and then we refer them to the audiologist for audiological assessments. Audiological assessments compliment the psychological assessment and then we write letters of placement to the schools confirming that the learner would be joining the school” (Psychologist 1).

The transcript shows that after both the psychological and audiological assessments were conducted, the Department of SPS places the deaf child at a school after considering that the conditions at the school would benefit the child psychologically, academically and emotionally. These considerations influenced academic inclusion and the success of deaf children. The administrators indicated that the school offered psychosocial support through the Paralympic games. With regard to psychosocial support offered to deaf children in the school, the utterances cited below depict the perceptions of one administrator and one psychologist. They said:

“We also have special games for them, like the Paralympics, where they do their games at Danhiko on a yearly basis [Danhiko is a centre for people with disabilities in Zimbabwe]. They enjoy these exclusive games because they bring together, learners who have similar challenges, competing at the same level with others. So usually, all of them

would like to go and we usually let the whole group go for these Paralympic games. Even those who are not participating because we have realised that this social interaction with children with the same challenges will make them appreciate that this world is big and there are more people with the same disabilities and they are just as competitive as the rest of the normal people” (Administrator 1).

“The Danhiko games are inclusive in nature. I mean that they don’t focus on one disability, they bring on board different learners with different disabilities in terms of participation in these games” (Psychologist 1).

The transcripts show that deaf children were psychosocially supported through the Danhiko Paralympic Games. The games were inclusive in nature for those with disabilities, hence, the deaf children had time to mix and mingle with their deaf counterparts as well as those with other disabilities. The participants also indicated that deaf children enjoyed the games.

Apart from the sports, deaf children also got psychosocial support in the form of guidance and counselling from both the school and the SPS. In the statements below, an administrator and two psychologists share their views on how deaf children got psychosocial support through guidance and counselling.

“A committee which comprises teachers who have done counselling at degree level does counselling for all students from ECD to Grade seven. So, we don’t just counsel them as people with hearing challenges” (Administrator 1).

“We have guidance and counselling programmes. There are different programmes under the umbrella of guidance and counselling and some of these programmes are the ‘Boys Empowerment Movement and the Girls Empowerment Movement. We also have the quiz competitions. We have embraced the primary schools and we got a special category for the ECD learners and our children are catered for, so they participate” (Psychologist 1).

“Yes, learners receive counselling of some sort. We counsel some of the parents, especially those who are in denial and some of them do breakdown” (Psychologist 2).

Both the school and SPS offered deaf children a wide range of psychosocial services in the form of guidance and counselling. The SPS went further to offer other programmes that promoted self-

awareness for both boys and girls. The programmes were offered in an inclusive nature through their motto, *No Child is Left Behind (NCLB)*. The programmes were not exclusively for the deaf children but for all the children in the school, thereby exposing deaf children to inclusion. School quiz competitions were also offered as psychosocial support for the deaf children in the school to give them the chance to ventilate as they discussed the competitions and other pertinent issues affecting their lives with peers whom they met during the competitions.

Deaf children also shared their sentiments on the psychosocial support offered at the school. On whether teachers talk to deaf children about their psychosocial issues, two of them indicated, in the excerpts below, that the teachers did not talk to them about their psychosocial issues.

“Teachers do not talk to me about my problems here at school or home. Most teachers cannot sign. Most of them have challenges talking to deaf children” (Deaf Child 1).

“No, they do not” (Deaf Child 3).

The challenge of communication remains central in the education of deaf children in regular schools. The participants showed that teachers did not talk to deaf children mainly due to communication challenges existing between them and the deaf children. Possibly until there is extensive capacity building in Sign Language shall the problem be reduced. Apparently, hearing teachers were not offering psychosocial support to the deaf children because they could not sign. This indicates that there is a lack of psychosocial support from teachers meant for deaf children due to communication barriers.

5.3.4.2 Academic support services

Academic support services are the support services that were directly related to the education of deaf children. These were the services that were necessary during the teaching and learning of deaf children. The responses from the participants suggested that deaf children experienced academic support services in the school. On this aspect, the school administrators indicated that the school procured and offered resources. The school also offered academic assessment to deaf children. The following utterances from the administrators show their views on academic support services.

“When these kids come here, they are referred by the Schools Psychological Services. When they come here, they are accompanied by referral letters specifically indicating that they are special kids with a hearing disability. So when they come here, because we have

classes for them, we simply take them to their special classes since we have got teachers who are able to communicate with them. As for resources, we do have textbooks. What they learn is just the same as what is learned in our mainstream classes, except Shona. They write the tests similar to those in the mainstream. I even have their mark schedules and their marks are quite pleasing. Those from Grade 1 to Grade 6 wrote the same test with those in the mainstream, but some of their marks are even better than those in the mainstream” (Administrator 2).

“We don’t have the finances. We give them syllabi and we buy the textbooks and stationery. When electricity was not disrupted, they would have lights throughout their learning period in the classroom because you discover that because of their hearing impairment, they need intense visual perception in the classroom. In other words, other senses should be given the opportunity to flourish more in order to improve their learning” (Administrator 1).

The participants indicated that deaf children were offered various forms of academic support in the primary school; these included syllabi with all the subjects offered in the primary school, except Shona; textbooks, stationery, and the specialist teachers. The school also allocated deaf children into exclusive classes or resource units. The school put deaf children in resource units in line with the recommendations of the SPS. Moreover, the school had lighting which was availed to deaf children as long as electricity was available. Lighting was necessary to allow deaf children to visualise well since they were visual learners. The administrators said that visualising increases deaf children’s visual perceptions. Although the school had the desire to offer academic support services, the school had financial limitations. The school administrators attributed all the school’s challenges in terms of resources to these financial problems. This means that the school could not afford to procure resources related to academic issues and alternative lighting facilities to supplement electricity when it was not available due to financial challenges. Provision of textbooks was a common form of academic support from both administrators while the provision of syllabi and electricity was mentioned by one administrator. The use of multisensory approach was an important element in the teaching and learning of deaf children. The multisensory approach was meant to compensate for the lost sense of hearing through utilising other senses for information acquisition. It emerged from the reports that once one sense was lost, it was crucial to maximise the use of the available ones to maximise learning.

5.3.4.3 Financial support services

The responses from participants in the FGDs revealed that deaf children received financial support in the school. This was monetary support that came from families, personal donors as well as government. Funds played an important role in terms of payment of school fees and the procurement of resources, for instance, for furnishing the resource units, procurement of assistive devices and other educational needs.

The participants said that deaf children got financial support from their parents in terms of school fees. On this idea teachers who took part in the FGDs and the administrators unanimously indicated that the parents of deaf children paid school fees for their children. Participants in the FGDs, psychologists and administrators indicated that deaf children got the Basic Education Assistance Module (BEAM) from government and this was channelled towards their school fees. BEAM, however, was not exclusively meant to benefit deaf children. The facility was, therefore, not for every deaf child but for those who met certain criteria. The community members and the school administration were in the selection committee that validated the beneficiaries who met the selection criteria. These were the committee members who knew the socio-economic background of would-be beneficiaries. Regarding the financial support services, the excerpts from one administrator, one participant from FGDs and three psychologists indicate the financial support deaf children got made their education possible.

“Their parents pay for them” (Administrator 2).

“In some cases, there are donors or organisations. I know of one here whose fees are paid by an organisation I am not sure of. When the mother came here, she said an organisation pays for her deaf child. The donors pay for school fees and other resources required by the deaf learner” (Participant 3A).

“As a ministry, we offer financial assistance, if need be, from time to time, to our resource classrooms. We don’t pay school fees for deaf children as a ministry. We treat them like other children. If the parent is struggling with the payment of school fees and it has been brought to the ministry’s attention, we have got channels of communication to the ministry that this parent is struggling. We have got the BEAM (Basic Education Assistance Module) facility which is not only confined to the deaf children. It benefits every learner who meets

certain criteria. Yesterday's paper indicated that one million children are going to benefit from BEAM. We are increasing the numbers" (Psychologist 1).

"In terms of hearing impairment and physical disability, all resource units are catered for, but we don't publicise it, lest even me a capable parent who can pay the fees also wants their child into the facility but it's provided on individual basis" (Psychologist 2).

"They are on BEAM. Their fees are paid by BEAM. At the moment, I don't know of any organisation except, maybe parents who pay for their children" (Psychologist 3).

The excerpts show that deaf children got financial support from their parents, individual donors, and the MoPSE through the SPS in the form of BEAM. Although there was an increase in the number of children involved in the BEAM facility, the benefit could not be strictly be viewed as deaf children's benefit as they were treated like other learners in the school. The psychologists flatly refuted the claim that they paid school fees for deaf children but for those who deserved it. Although the psychologists acknowledged that they offered financial assistance to the deaf children, they were indicated that only assisted those who met the required criterion. As such, deaf children competed for the BEAM facility with hearing children in the school. However, the administrators and Psychologist 2 and Psychologist 3 spoke at variance with Psychologist 1 as they indicated that the government viewed deaf children as disadvantaged and automatically put them under BEAM. Psychologist 2 even reported that deaf children and other children with other disabilities were catered for by BEAM because they were orphans and vulnerable children (OVCs). It was, however, not publicised to avoid closing the door for those who had capabilities to meet their children's educational needs. Although the administrators differed with the psychologist on whether deaf children were automatically offered the BEAM facility or not, their difference seemed to be a technical one. The idea that deaf children were not automatically offered assistance through BEAM was meant to level their BEAM playing field with the hearing children socially, but practically they were automatically offered the facility. Both views are, however, at variance with the earlier findings from the teachers and administrators who indicated that parents and individual donors paid school fees for the deaf children. Psychologist 2 and Psychologist 3, who were directly dealing with deaf children at the selected school, directly and by implication,

concluded that all the deaf children were on BEAM although there were some sentiments that some parents were also paying school fees for their deaf children.

On the criteria used for placing learners under BEAM, the psychologists revealed that BEAM was meant for Orphans and Vulnerable Children (OVC). Learners had to satisfy that they fell under this category. Participants acknowledged that disability and poverty went hand in hand. Although deaf children were in the OVC category, as supported by the statement *disability and poverty go hand in hand*, they had to undergo a vetting process to satisfy the criteria at their school. The community members knew the children who were in the OVC category, which could lead to fair selection of deaf children eligible for assistance from BEAM. The deaf children could qualify for BEAM facility if they were orphans, coming from child-headed or grandparent-headed family, or any other marginalised family structure, and living with disability. The BEAM facility was a social welfare fund. The excerpts from two psychologists, tell the story on the criteria that were used to select learners for the BEAM facility.

“Vulnerability is the key criterion. Let’s suppose both parents are out of employment and they are struggling to pay school fees for their children, and they are identified at the school level, they can be recommended for the BEAM. If it is approved, they can benefit from the facility. Also, there are grandparent-headed families, child-headed families, and Orphans and Vulnerable Children. Those are the ones that are accorded the chance to benefit from BEAM. All vulnerable children are eligible” (Psychologist 1).

“BEAM is mostly meant for the OVC. The vulnerable members include our learners with hearing impairment. Most of the parents of these learners come from poor backgrounds. Disability and poverty go together. Surely, malnutrition affecting the mother might trigger disability in children. Stress and poor nutrition are most likely to affect the child. Mostly of our learners are covered by the BEAM through social welfare. That’s why BEAM beneficiaries are selected at the school level. It’s not done by psychologists. It’s done in the community and these are the community members who know their people. So my role is just to stamp, like I have here [showing the BEAM form to the researcher] which was brought for the purpose just to ascertain. ‘Does this learner have a disability? Is the learner recommended? If the selection has been done at school, say, they are from a poor

background and we just authenticate the learner's disability. I recommend the learner"
(Psychologist 2).

Selection criteria were supposed to be met to avoid flooding the facility with those who had the capabilities to pay school fees. However, deaf children were classified as vulnerable children, enabling them to qualify for BEAM. The psychologist would always authenticate the selection by stamping the BEAM forms for the deaf children. The excerpt, therefore, validates that deaf children were automatically covered by the BEAM facility. Psychologists qualified all learners with disabilities for the BEAM facility.

In concurrence with the psychologists that deaf children were OVCs and were automatically under BEAM, the administrators expressed the following views:

"The government looks at deaf children as disadvantaged members of society, and as such, they are put under BEAM. They are automatically put under BEAM" (Administrator 1).

The excerpt shows that the psychologists and administrators concurred that learners who benefited from BEAM were marginalised, disadvantaged, or vulnerable. Vulnerable children, like the deaf, automatically qualify for assistance under BEAM.

On whether MoPSE and the Department of SPS had the financial muscles to meet the needs of deaf learners in the schools, such as the infrastructural and material resources, one psychologist had this to say:

"I don't think we have, in terms of their needs. A learner will have different needs; assistive devices, learning materials, and mostly learning material are on an individual basis. So it's like, in terms of capacity, we still have a mile to go [laughing]. We need human and learning material, infrastructure and so on" (Psychologist 2).

The extract shows that the MoPSE and the SPS did not have financial muscles to supply enough resources, for the teaching and learning of deaf children. They were far from being able to meet the needs of the deaf child in schools. The extract also reveals that resources for deaf children were not the same but were specific to each child. This means that teaching and learning resources and assistive devices were supposed to be specific for each deaf learner and they needed a substantial sum of money to procure these resources. Resources and assistive devices for one learner could be

unsuitable for the next learner. This means that although deaf children fell under the category of vulnerable children, MoPSE and SPS had no financial capabilities to meet their needs. Hence, their financial needs were supplemented by parents and personal donors. The transcripts below, from one teacher and an administrator, show that deaf children's financial needs were met by their parents and their donors, which could be in line with the expressions of the psychologists that they were far from being able to meet the financial needs of deaf children.

“The donors pay for school fees and other resources required by the deaf learner, part of the agreement that the donors pay everything for the deaf child's educational needs”
(Participant 6A).

“I am sure there are donors. I think they are for individuals pupils. The donors came with ear moulds for a particular child. They were saying I should give them to a certain child”
(Administrator 2).

If the MoPSE and SPS were financially stable to meet the needs of deaf children, there was no need for parents to pay for their deaf children's school fees, let alone seeking donations.

5.3.5 Psychosocial experiences of deaf children

This study revealed that deaf children experienced psychosocial issues related to acceptance, relationship, socialisation and counselling.

5.3.5.1 Acceptance of deaf children at school

Acceptance of deaf children at school refers to the welcoming of deaf children in the school. The phrase refers to whether deaf children were welcomed in the school or not. After the placement of deaf children in the school, it was important to note whether the participants felt comfortable and accepted by other children and the school staff in the school.

The participants from the FGDs indicated that the parents accepted deaf children to learn together with hearing children in the school. The participants acknowledged that they felt comfortable working with deaf children and enrolling them at their school. They further indicated that deaf children are accepted socially and academically at the school. The participants unanimously emphasised that the school had taught children to accept each other. The perceptions of the three participants are stated as follows.

"Hearing children, teachers, and parents accept deaf children to learn in mainstream schools. Parents of deaf children do not have the money to send their children to special schools. Hence, they bring them here" (Participant 6B).

"I am comfortable with enrolling deaf children at this school. However, there are some challenges affecting how they relate with hearing peers. In case of a conflict, they cannot resolve it on their own due to lack of communication" (Participant 1B).

"The School has taught children to accept each other; hence, they mix well" (Participant 3A).

These reports show that deaf children mainly attended mainstream schools because of their financial limitations. The participants further indicated that the parents of deaf children had no money to send their deaf children to residential or special schools even if they wanted to do so. They could not afford exorbitant fees charged by the special schools. These residential schools had skilled and qualified teachers in Deaf Studies.

On whether it was a noble idea to enrol deaf children at the school, one administrator said:

"Especially at this school, I think it is good since we have teachers who are qualified in that area" (Administrator 2).

The transcript shows that the school had specialist teachers for deaf children; hence, there was no justification for their failure to enrol deaf children.

5.3.5.2 Relationships between deaf children and their hearing peers

Deaf children socialized with their hearing peers in the school. The study investigated on how deaf children and their hearing peers related.

The responses from participants suggest that the relationships between deaf children and their hearing peers were strained by communication mainly misconceptions and failure to resolve conflicts due to lack of understanding of each other. Some conflicts between deaf children and the hearing people arose as a result of misconceptions due to language challenges.

The participants indicated that although they accepted deaf children at their school, there were serious challenges to their effort to include them. One challenge was attributed to mainstream teachers' inability to sign. Two participants in the FGDs said:

"Mainstream teachers cannot sign; hence, when conflicts between hearing and deaf children arise, we take them to the specialist teachers (Participant 4B).

"I have challenges in signing. I cannot go beyond basic signing such as, 'Hallo', 'How are?' I can't sign" (Participant 3A).

The transcripts show that mainstream teachers could not communicate and resolve conflicts between deaf and hearing children due to their inability to sign. They had basic Sign Language as shown by one of the participant in the FGDs.

"Mainstream teachers were given basic skills to handle deaf children in terms of communication" (Participant 4B).

In concurrence with the views from the FGDs, the administrators said that although it was a noble idea to include deaf children at the school, they were encountering several challenges. One of the administrators had this to say on the enrolment of deaf children and the challenges they faced:

"We have teachers who are qualified in that area, but in case that their teachers are not present, we face a challenge because no one can communicate with these learners. Most teachers, even hearing children cannot communicate with them. For example, when we are at assembly, if their teachers come late, the kids with special needs normally just wonder what is happening without any meaning. I sympathise with them. Even when the National Anthem is being sung, they don't even know what is happening, and even the instructions given to other learners they don't even follow them. They just stand there and only walk when they see that the others are just walking away. They just observe what others are doing but if their teachers are there, they communicate to them whatever is being said through Sign Language" (Administrator two).

When there were no specialist teachers, deaf children learnt through observations. This could mean that the sense of vision was critical in their learning. Although responses from FGDs and one of the administrators indicated that they accepted or welcomed the deaf children at the school, another administrator said that he felt that educating deaf children in the mainstream schools was not

proper. He said that he felt the best option for educating deaf children was in exclusive schools. He had this to say on whether it was a noble idea to enrol deaf children at the school:

"Yeah, I think it's not really proper. I would be more comfortable if there was an environment where nearly every child in that school or an exclusive school where they have other children with similar challenges" (Administrator 1).

The transcript shows that the administrator was exclusive-oriented. He was concerned about homogeneity rather than diversity or biculturalism as he appears to think outside the box to find solutions to the inclusion of children who were different. Societies always embrace diversity.

5.3.5.3 Ineffective socialisation of deaf children at school

Communication is an important tool in socialization. Deaf children had a different language from that of the rest of the school members. As a result of these differences, socialisation was not effective. There were challenges in the socialisation of deaf and the hearing children.

The participants' responses indicated that deaf children experienced socialisation with hearing children at school, though it is not viable. Some participants mentioned that deaf children did not socialise with hearing children due to communication barriers. One participant said:

"Deaf children do not socialise well with hearing children due to communication problems. Hearing children cannot sign while deaf children cannot speak orally" (Participant 4B).

The participants indicated that deaf children were always isolated. The extracts from two participants from FGDs illustrate these views.

"Deaf children are always on their own due to their different behaviour. The 'normal' learners are beaten by the deaf ones, and they are feared by hearing children. When there are conflicts, and the case is reported, teachers are always on the side of deaf children to protect them" (Participant 5B).

This transcript shows an element of labelling of children as hearing children were the 'normal children' and the deaf children were perceived as abnormal.

Bad relationships between deaf and hearing children existed in various forms as depicted by the views expressed by participants from FGDs:

"Hearing children imitate the sounds made by the deaf children, which annoys them" [deaf children] (Participant 6B).

These extracts indicate that deaf and hearing children did not socialise with each other and deaf children were always on their own. This lack of socialisation was attributed to communication barriers. Hearing children used a spoken language while their deaf counterparts used Sign Language leading to misconceptions and quarrels which the deaf children always won due to support from teachers. Hearing children were also rude to the deaf children through imitating the sounds they made. The participants in this FGDs viewed deaf children as not 'normal', hence, they needed protection. One participant from the FGDs had this to say:

"To call a spade a spade, deaf children are not normal, hence, they need protection. Deaf children always want to be felt by the hearing children" (Participant 3B).

The transcript shows that teachers considered deaf children as abnormal, yet earlier, they had indicated that they accepted their enrolment in the school. This raises eyebrows regarding how they accepted and accommodated the children they considered abnormal in the school.

Participants from FGDs indicated that friction arose between deaf children and their hearing peers. The participants indicated that to counter the behaviour of the hearing children, deaf children came up with drama that portrayed that they were human beings just like the hearing people. One participant said:

"The deaf children dramatise to show that they are human beings who exist just like any other human beings. Their drama shows that disability does not mean inability" (Participant 2B).

By implication, deaf children wanted to be treated like any other human being, not like devalued persons. On how deaf children were able to dramatise for hearing children who could not sign, a participant said:

"The 'normal' children get meaning from the drama by watching the signs and actions" (Participant 2B).

Apparently, the views of the participants from FGDs indicate that deaf children and hearing children did not socialise and that deaf children were always on their own. Deaf children indicated

that they had few friends they socialised with. The following excerpts from two deaf children describe their socialisation with hearing children:

"I just have one friend. My friend is also deaf. I learn in the same class with my friend .I do not have friends who are hearing. They do not like me because I do not talk" (Deaf Child 1).

"Yes, I have two friends who are also deaf. I do not play with hearing children. They play on their own while I play with my deaf friends this side. Hearing children take advantage of our lack of hearing and backbite us while we are present" (Deaf Child 2).

The transcripts show that another cause of poor relationships between the deaf and hearing children was the element of backbiting. The two parties took advantage of communication barriers between them and backbit each other even in the presence of the other part.

On whether they also did not backbite the hearing children in their presence, the participant said:

"We do because they do" (Deaf Child 2).

This shows that there was retaliation between the two groups of children. Deaf children backbit their hearing counterparts because they also backbit them. On whether they did not fear that hearing children could pick one or two signs as they backbit them, the Deaf Child 2 responded:

"We sign so fast that they cannot pick anything from our communication".

These sentiments indicate that there was a relationship gap between deaf and hearing children. The extracts show that deaf children socialised with peers who were also deaf. The rift was possibly created by backbiting precipitated by communication barriers. Hearing children were backbiting, assuming that deaf children would not know that they were backbitten while deaf children had to retaliate. There was suspicion that each category was backbiting the other, thereby breaking the relationship between the two parties.

5.3.5.4 Extra morality activities (Sports)

The school offered extracurricular activities to the children. These included sports. The study investigated to find if deaf children were involved in these activities.

On sports, the participants indicated that deaf children at the school participated in sporting activities separately from the mainstream school teams. The participants mentioned the challenges in communication between the coaches and deaf children as well as between referees and deaf children as hindering the inclusive participation of deaf children in mainstream sports. They concurred that deaf children had exclusive competitions in the form of the Danhiko Paralympic Games. Danhiko is a centre for people with disabilities. People with disabilities reportedly participated in games organised by Danhiko Centre, hence, the games were called Danhiko Paralympic Games. The transcripts below, from one participant from FGDs, one administrator, and one psychologist show that deaf children participated in the Danhiko Paralympic Games.

“Deaf children participate in sports, but they have their separate sports. In the past, they used to participate in the mainstream, but they now have their sports. They usually go for Danhiko Paralympic games, not in mainstream school teams” (Participant 2A).

“Deaf children have special games for them, like the Paralympics, where they do their games at Danhiko every year” (Administrator 1).

“The Danhiko Games are inclusive, I mean they don’t focus on one disability; they take aboard different learners with different disabilities for these games” (Psychologist 1).

The transcript shows that the participation of deaf children in exclusive games accorded them the chance to meet and participate with other deaf children. This gave them the chance to share experiences, thereby improving their emotional wellness. It was good that the school allowed all the deaf children to attend the games. Attendance and mixing with other deaf children allowed deaf children to realise that there were many other people with the same conditions as theirs. The transcripts show that the Danhiko Paralympic Games were inclusive in terms of disability, hence, deaf children were going to learn to socialise with people with other disabilities. This had the potential to raise their self-esteem.

On whether deaf children enjoyed these Paralympic games, the administrators indicated that they did, especially that they were meeting and competing with homogeneous groups facing similar challenges. Meeting other people with the same characteristics as theirs enabled them to realise that there was life beyond the horizon and that they were not the only ones with disabilities. The schools appreciated the gathering of people with disabilities by allowing all children with

disabilities to attend the Paralympic games. This implies that the Danhiko Paralympic Games were a big gathering of participants. The excerpt from one administrator summarises the story, thus:

“They enjoy these exclusive games because you see; they are meeting learners who have similar challenges and they are competing at the same level with others. So usually, all of them would like to go, and we usually let the whole group go for these Paralympic games, even those who are not participating because we have realised that this social interaction with children with the same challenges will make them appreciate that this world is big and they are more people with the same challenges, and they are just as competitive as the rest of the normal people” (Administrator 1).

On the nature of the Danhiko Paralympic Games, the deaf teacher indicated that they were one of the most significant events for the Deaf. In concurrence with the above excerpt, which shows that schools allowed all deaf children to attend the show, the participant indicated that the event was one of the biggest gatherings that gave deaf people the chance to meet, and compete in sporting activities. Adult females had limited numbers attending the event because they were taking care of the family. Some adult females like those who did vending had the chance to meet in town to share information. The excerpt below shows the perceptions of the deaf teacher regarding the Danhiko Paralympic Games:

“The Danhiko Paralympic Games are one of the biggest attractions for the Deaf. It takes place during the last weekend of October. Adult males have their soccer league where they meet. For females, it becomes difficult for them after school except those who do vending, who meet in town. However, many stay at home. The Danhiko Paralympic Games are the most attended show” (Deaf Teacher).

Thus, the Danhiko Paralympic Games gave the deaf people a platform to mix. These games were attended by both adults and children, thereby, indeed, making it one of the biggest gatherings of people with disabilities in Zimbabwe. There were chances of spreading information, news and the Deaf Culture during these games since there were adults and children. Sharing information was very important to keep both deaf children and deaf adults abreast with news and information on important and topical issues like the COVID 19, Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS). Thus, the Danhiko Paralympic Games gave the Deaf the chance to share news and information on such issues as HIV/AIDS, the most recent novel

coronavirus, or the latest phenomenon of the machete-wielding gangs in Zimbabwe, commonly known as ‘Mashurugwi’. ‘Mashurugwi’ terrorise members of the public. The extract below, from the Deaf teacher, represents the Deaf’s views on the importance of information sharing.

“It is not easy to get all the information about HIV/AIDS. The issue has been around for long now to the extent that those who have been to school have information, depending on their level of education. The ‘Mashurugwi’ menace is still confusing, but my husband meets some friends in beer halls and information filters in as those who drink try their best to share information though it is limited. With time, the news becomes adequate. This is also the case with deaf learners” (Deaf Teacher).

Information filtered to the Deaf slowly. It took time for the Deaf to have full details on contemporary or topical issues. The transcript shows that access to information was better for those who were literate as they could read from various sources to access information. It could mean that by the time they got the information, the damage could be at an advanced stage.

On whether deaf children were not good enough to be included in mainstream school teams, the participants blamed communication barriers on their failure to include deaf children in mainstream sports teams. Hence, they chose exclusive competitions where they would meet other deaf people with a common language. One teacher from FGDs and both administrators summarise the views of the participants on the subject:

“Although they may be good, communication affects the participation of deaf children in mainstream school teams. Referees may also lack communication with deaf children during the games” (Participant 5A).

“I think there are so many challenges. For example, normally the trainers, or umpires or the referees cannot communicate with these kids. As you know, they have to say what is expected of these children when they do their activities, and they don’t know how to communicate with them. Still, if they go and compete with other children who are like them, who know how to talk to them, the umpires there know how to talk to them” (Administrator 2).

“The other challenge is that because of the limited number of students that the school can enrol, it may be challenging to organise meaningful sporting activities for these children. For example, this school has sixteen hearing impaired learners in the resource unit. Half are girls, now you need to train them soccer, volleyball, netball, basketball, tennis, the numbers may not be adequate to constitute a team” (Administrator 1).

Although the participants concurred that there were challenges in including deaf children in mainstream sports, they were at variance on the nature of the challenges. The teachers and one of the administrators concurred that there were communication challenges between the deaf children and coaches or referees. One of the administrators, however, cited the low numbers of deaf children who were enrolled by the school as a limiting factor in the sense that deaf boys could not constitute a soccer team. Likewise, deaf girls could not. This implies that this administrator did not focus on the challenges to inclusive sports but challenges to coming up with exclusive sports teams. He was concerned with forming a soccer team for the Deaf rather than blending them into the school soccer team with their hearing counterparts. The school, therefore, decided to settle for exclusive games because there were challenges in the form of communication barriers. Deaf children could have been good in sports, but the school concentrated on communication between them and the deaf children rather than on the performance of the children in the sports fields. The school authorities thought that they were doing a favour to deaf children by affording them the opportunity to participate in exclusive games as they cited that deaf children enjoyed these exclusive games. Yet, it could be that they enjoyed them because that was the only option available to them. It could also be possible that deaf children were going to enjoy and experience more had they been exposed to inclusive sports. The Danhiko Paralympic Games were an annual event; hence, deaf children were starved of sports. Thus, they were bound to be happy and show their enjoyment on the days of the sports.

Teachers from FGDs indicated that the school was getting trophies from these Danhiko Paralympic Games. One participant from the FGDs expressed views regarding the trophies the school was getting when deaf children won at the Danhiko Paralympic Games.

“The school gets some trophies or awards from the Danhiko Paralympic Games which are displayed to show the school’s achievements in sports” (Participant 3B).

The transcript shows that deaf children were good in sports and they won trophies and contributed to the school's souvenirs of trophies.

Thus, on the participation of deaf children in sports, the participants spoke with one voice that deaf children did not participate in school sports but in the Danhiko Paralympic Games in which hearing children did not participate. The point that deaf children brought in trophies that the school displayed is testimony to the fact that these deaf children performed well at the Danhiko Paralympic Games to the extent of significantly contributing to the school's prestige. Deaf children in the school, therefore, were significant members of the school society as they contributed significantly to its development. They used their assets to contribute to the development of the school. The participant mentioned that the school used to practise inclusive sports but had moved from inclusion to exclusion in terms of sports. The participants attributed the practice of exclusive sports to communication challenges. It is interesting to note that the participants acknowledged that deaf children could be good at sports, but the barrier was communication. Furthermore, the hearing people were conscious that deaf children could perform well in sports if there were no communication barriers. It could also mean that in cases where they could not perform well, the problem could be attributed to communication barriers rather than deaf children. Moreover, it could mean that the skills they were supposed to showcase were not explicitly explained due to language barriers. The participants said that they faced communication challenges during coaching, a scenario that affected all the match officials during the games. This means that the school do not have enough human resources capable of communicating in Sign Language. This often resulted in the exclusion of deaf children from school sports. The submissions by the administrators that the school had a challenge of limited numbers of deaf children to constitute a team may only be a problem in an exclusive society. In an inclusive school, even one deaf child may be included and participate alongside his/her hearing peers. It was a problem because the school was practising exclusive sports. It appears the school felt they were doing a favour to deaf children by enabling them to participate in their own sports, the Danhiko Paralympic Games, yet they were being exclusive. The participants said that deaf children were participating in Danhiko Paralympic Games where they competed against other deaf children. Although the participants indicated that the challenge involving the inclusion of deaf children in school sports was communication-related, they did not focus on correcting these communication barriers. Instead, they focused on adjusting deaf children to participate in the Danhiko Paralympic Games only.

They could have focused on language barriers and adjusted these to suit the needs of deaf children in inclusive sports. The school administrators said that deaf children enjoyed the Danhiko Paralympic Games because they were competing against other deaf children. If the deaf children enjoyed the Danhiko Paralympic Games, it could be that they subscribed to the Deaf Culture and enjoyed participating in the games as prescribed by their culture, they enjoyed meeting deaf peers and adults, or they enjoyed the games because they accepted exclusion after realising they had nowhere to participate besides in these games. All the deaf children were allowed to attend the Danhiko Paralympic Games to realise that their school was not the horizon in terms of the deaf population, but there were many other deaf people beyond their school and communities. This was a noble idea that could allow them to enlarge their friendship base, thereby allowing them to share information from as many people from their culture as possible.

Deaf children, however, seemed to view the issue of sports using different lenses from those of the other participants. They seemed to love being included in the school teams. On sporting activities, the deaf children indicated that they were very good at sports despite being excluded from the school teams. The transcripts below express the feelings and sentiments of four deaf children;

“I love playing soccer, and I am good at it, although I am not in the school team [expressing unhappiness]. I have challenges in communicating with the hearing children and teachers, but I feel I can match the hearing players” (Deaf Child 1).

“I like sports, but I am not given the chance to participate. This is one of the reasons why I would prefer a special school to this one [showing unhappiness]” (Deaf Child 4).

“Being excluded from the games that we can play makes us feel unwanted [showing unhappiness]” (Deaf Child 3).

“I participate in social sporting activities, especially in netball. I am good at netball. I know the rules of the games I play. When someone or I break the rules, I quickly check with the umpire and take his/her decision. I also like athletics, but I am not good at it. I just observe other athletes. When they go, I also go. We [deaf people] are very good at observing the rules of the games we play. We do not face challenges playing social games with hearing peers” (Deaf Child 5).

The body language during the interview process indicated that deaf children were not happy being excluded from school sports. The children's feelings towards being excluded from school sports depressed them and possibly affected their academic performance. Deaf children indicated that they preferred attending special schools to this school because of being barred from participating in inclusive school sports, indicating that the subject was a thorn in their flesh. This could tell stories in the school's position that deaf children were happy and enjoyed the exclusive Danhiko Paralympic Games without considering how much they loved and enjoyed inclusive school sports where they loved to match their hearing peers. Although the other participants cited communication barriers between deaf players and their coaches or referees, the deaf children indicated that they were conversant with the rules and regulations of the games they played and would not be found wanting if they were included in the inclusive school sports. They said that they were so observant that they would not break the rules and regulations. The argument of the teachers and the administrators that they practised exclusive sports because there were communication barriers contradicted the perceptions of the deaf children. Teachers and administrators confirmed that deaf children were visuals; hence, it could be believed that they were observant and conscious of the rules of the games they played.

Their ability to take part in social sports at school without controversy confirms that they were conversant and complied with the rules and regulations of the games they played. This view concurs with that of one of the administrators who said that when children were outside the classrooms for lunch or break, deaf children played with hearing children. The excerpt from one administrator expresses how deaf children played during break or lunchtimes.

“No specific games. They will be just running like what other kids will be doing, but normally, I have seen that they like soccer. They play with their balls, even the girls”
(Administrator 2).

This could imply that deaf children played several games together with hearing children in harmony, observing the rules of the games. Playing together in harmony could imply knowing and following the rules of the game, failure of which one could be ejected. Exclusive games could take away deaf children from the cultural norms and values of the mainstream society such as observing the rules, tolerance in terms of biculturalism or multiculturalism or sharing. It is interesting to note that teachers and administrators failed to handle deaf and hearing children in inclusive sports when

the children alone, deaf and hearing, could manage themselves in inclusive social sports. It may not be clear whether they tried it or the challenges were just perceived.

Participants cited communication barriers as the reason for excluding deaf children from school teams in sports. Participants also cited a lack of other human resources who could handle deaf children in sports like coaches and sports officials such as referees. These sentiments imply that the school and the schools' sports committees lacked collaboration where they could work with specialist teachers and gradually learn in the process. It could also be a question of negative attitudes towards deaf children that people were not ready to learn Sign Language through collaboration and other Sign Language capacity building programmes.

5.3.5.5 Social roles and responsibilities

Deaf children, as responsible members of the school community, played roles and exercised responsibilities for the functioning of the school. They had roles and responsibilities they performed in their individual capacities or as duties meant for every child in the school.

On whether deaf children performed duties and responsibilities at the school, the participants unanimously agreed that deaf children were given and were taking up social roles and responsibilities just like hearing children. The transcripts below, from two teachers, one administrator, and two deaf children, reveal that deaf children had roles and responsibilities they carried out at the school.

“There are currently two deaf children in the school prefects list, a boy and a girl”
(Participant 3A).

“There are currently two deaf children in the school prefects list, a boy and a girl. The selection of school prefects is done on ratios of mainstream children to deaf children”
(Participant 1A).

“At one time, the captain of our handball team was a hearing impaired learner. He was so good. They also take part in cleanliness, cleaning the environment, cleaning the school environment, picking up papers, sweeping pathways. Yes, they are part of this society. If we can call the school society, they are an essential and integral part of this school. They are involved in all the activities that are done at the school” (Administrator 1).

“I go to the garden to dig, and I plant maize, vegetables, and beans. I water the garden. I sweep the classroom. I clean the schoolyard by picking papers and other dirt. I am not a prefect, but there are prefects who are deaf, one boy and one girl” (Deaf Child 1).

“I sweep and scrub the classroom. I work in the garden. I do all the other duties which are done by every pupil here. Apart from doing these duties, I have other duties as a prefect” (Deaf Child 5).

All members agreed that deaf children carried out all the activities that were carried out by mainstream school children. Deaf children took part in the general cleaning of the school environment, gardening, and other duties that were available. The participants concurred that deaf children had responsibilities like being prefects, class monitors and school sports team captains. Observations confirmed that there were two prefects who were deaf, a boy and a girl. However, observations did not show the availability of deaf children as class monitors. Prefects were selected on a ratio basis. This sounds as if the selection was not based on meritocracy, but on ratios regardless of even having many deaf children competing with hearing children in terms of academic performance and behaviour if they were selected basing on merit, that is merit in terms of all the attributes that may be considered by the school. This implies that the school was treating deaf children with some sense of differences in mind. The participants agreed that deaf children were integral members of the school community as they had duties and responsibilities they performed at the school, just like hearing children. They contributed to the development of the school community in the same way that hearing children did.

On how it was possible to have a handball team captain from deaf children when initially the school had indicated that the deaf children had separate sports from mainstream school sports, the administrators made a U-turn and said that they were only meeting challenges in including deaf children in mainstream school sports but they included them. This was a U-turn from the earlier submission that the school practised exclusive sports for deaf children in the form of Paralympic games, which participants even indicated that deaf children enjoyed very much. Despite these revelations, the transcript from one of the administrators, the same administrator who preferred exclusive sports and instruction for deaf children, shows that deaf children were involved in mainstream school sports.

“Yes, although I said, [stammering] at first, that there were challenges because they don’t constitute a team, but we integrate them into teams that are in the school. However, the challenge is that when the referee blows the whistle, they don’t hear. We don’t leave them out. Our hope is that they will be many enough to constitute a team so that whoever is given the task to handle a match knows that the people I am looking at right now need special considerations as far as officiating is concerned”.

Although the administrator made a U-turn and said that they included deaf children, he maintained his stance that deaf children in the school were not enough to constitute a team. These sentiments indicate that the administration was still inclined towards exclusive sports.

5.3.5.6 Counselling

Deaf children were offered counselling services both by school and the Department of Schools Psychological Services. The psychologist and an administrator concurred that counselling services were being offered to deaf children by the school and the SPS. They said:

“No child is left behind, that’s our motto. Yes, no child is left behind. That’s inclusivity. Even the ECD learners are not left behind. We have a Guidance and counselling programme which is threefold. It is a learning area, which is a service, and it’s also a programme. As a learning area, we have a syllabus, a teacher’s manual. It’s a learning area that is stretching from ECD A to A’ Level (Advanced Level), and no child is left behind. As a service now, it’s offered upon request. Heads will phone specialists to address the learners on the issue of, say, substance abuse, and then we go and educate them or come and see some learners who escaped car crash. We go and counsel them. As a programme now, that’s when we introduce different programmes under the umbrella guidance and counselling and some of these programmes are the ‘Boys’ Empowerment Movement, the Girls’ Empowerment Movement, formerly BEMGEM. BEMGEM, we also have the National High School Quiz Competition” (Psychologist 1).

“Yes, we have teachers who have done counselling at degree level who do counselling for all students from ECD to Grade seven. So we don’t just counsel them as people with hearing challenges. Counselling is done for every other learner who is in the school” (Administrator 1).

The Department of Schools Psychological Services offered Guidance and Counselling as a subject that had a syllabus. They could also go to provide counselling services upon request from the school. The school was offering counselling services. Both the Schools Psychological Services and the school concurred that they offered counselling services to all children, not only deaf children, from ECD A to the highest level of learners, reflecting their motto, ‘No child is left behind’.

Counselling services were not only offered to the deaf children but also to their parents, as shown by the psychologist’s view cited below:

“We do counsel some of the parents, especially those who are in denial; some of them do breakdown. They cry, and we counsel them so that they accept their condition and that of their child, and once they accept these realities, we work hand and glove with them”
(Psychologist 2).

Parents, especially those who were in denial, were offered counselling services so that once they moved out of denial, they would be cooperative concerning the educational provisions that could be preferred by the education system for their deaf child. Thus, deaf children and their parents experienced counselling services from the school as well as the Department of Schools Psychological Services. This means that they had quality counselling services.

5.3.6 Benefits of having deaf children in in the school

Deaf children and the hearing school community had some benefits in being at the same school. Deaf children had benefits in learning in the school while the hearing people also had their share of benefits. Thus, there were benefits to both deaf children and the hearing school community when deaf children learned in the school. On the one hand, some benefits of having deaf children in the school benefited deaf children. These benefits included socialisation, getting information on current affairs from peers, and learning cultural norms and values. In the transcripts below, two teachers and an administrator reveal these views.

“Deaf children learn to socialise with their hearing peers, getting news of what is happening around them, at the same time learning their culture, norms and values. For instance, when the school sings the National Anthem during assembly times, deaf children pay attention after observing that mainstream children pay attention to the activity”
(Participant 2A).

“One deaf child went as far as district level participating in school drum majorettes team after learning the exercise from hearing peers during socialisation” (Participant 6A).

“To some extent, they do benefit from the mainstream. Although earlier on, I indicated that the best institution is an exclusive school, it should also be appreciated that in real life, we don’t live in a society where deaf children live on their own, with hearing children or people living on their own. We live as a society with children with hearing challenges, so they learn to live with normal children. They learn to appreciate the way of life in a society of people who hear. At the same time, the programmes that we design for them at the school will also make them benefit because we use the same curriculum, we give them textbooks, and we expect that they are taught using the same pedagogical skills like in the mainstream. At the end of it all, we produce children who will succeed in life. So we can say they are benefiting” (Administrator 1).

By learning in the school, deaf children learned to socialise with hearing people. The transcript shows that deaf children participated successfully in sporting activities after learning these activities through socialisation. In socialisation, deaf children could learn the cultural norms and values of the hearing peers. The participants, therefore, concurred on the point that deaf children learned to live with hearing people and appreciate their values. They learned the cultures of hearing people and appreciated how the hearing people lived. They also learned to appreciate both biculturalism and multiculturalism. Deaf children were learning how to live together with people who are different from them, apart from hearing people. They were learning the cultural norms and values of the hearing world. They learned to appreciate the differences between them and the hearing people, especially the fact that they were living among hearing people. Contrary, the DRT observed that there were little benefits in having deaf children in the school as reflected by the Grade Seven public examinations:

“Not much I think, because this is reflected by the units they come up with, especially at primary school. Most of them don’t do very well, meaning there is a need for teachers who can sign very well. Maybe that’s the reason why we don’t have many deaf children passing their Grade Seven examinations” (Psychologist 3).

The purpose of going to school was to acquire knowledge, skills, and attitudes in the form of norms and values of the society, as reflected by the CBC. Deaf children were not meeting the aims of the

CBC through learning in the mainstream; hence, they benefit very little from learning in the mainstream school. This lack of benefit was attributed to the lack of specialist teachers who were able to sign proficiently. On whether the teachers and hearing pupils were also learning something from deaf children, the participants said that, indeed, they were learning from them. They indicated that learning was a two-way process whereby the two parties had to learn from each other. The excerpts below show that learning was a two-way process.

“Yes, of course. Learning is a two-way process. We learn to appreciate. For example, a person who has not come across children with hearing impairment, maybe driving and blow the car horn will find that the person does not get off the street. If one has not met deaf children or deaf people, one gets angry because they think everyone can hear. So when you have experienced the life that we have experienced with our children, you experience that even if you have blown the horn of the car, a person may not hear because s/he is deaf. A person who has not met these people may not think like that. S/he may think that the person may be stubborn. What it means is that we have learned to appreciate people with hearing impairment. At the same time, we have come to realise that apart from their being impaired, they are just as normal as anyone else and can do anything, they are just as responsible as anyone else” (Administrator 1).

“Hearing children and teachers learn Sign Language and accept deaf children as members who complement the success of their school. Hearing children even teach the community to accept deaf children, for example, when they play with them [deaf children] as their friends in the community during weekends and holidays” (Participant 6A).

“We learn that disability is not inability because we can send them to fetch water or to do any other duties, and they perform them as proficiently as the hearing children” (Participant 6B).

The school also gained experience in the life of deaf people in terms of the Deaf Culture. The school community learned to accept deaf people with their condition of deafness, experiences which could not be known or accepted by people who had not lived with deaf people. The critical issue is that they learned to accept diversity. The school community came to realise that deaf children, despite being deaf, could carry out activities that were carried out by hearing children, and they were as responsible as their hearing counterparts. This could lead to socially valorising

deaf children. This implies that teachers had learned to accept and appreciate deaf children while deaf children did the same. The school community learned that their role was to provide an environment that allowed deaf children to function ‘normally’ or as nearer to ‘normal’ as possible rather than lead a restrictive life. Hearing peers and teachers learn to accept deaf children as equal members of their school community, members who equally contributed to the development of the school community. By implication, deaf children needed acceptance to cope with life in hearing communities without challenges. The participants further learnt that ‘*Disability does not mean inability*’, when deaf children performed all the activities required of them as good as their hearing partners, observation and knowledge they would have lost if they had not enrolled deaf children. Administrators concurred with teachers that both deaf children and the hearing school community members benefited from their relationship in the school. It was, therefore, a symbiotic relationship.

5.3.7 Successes in the education of deaf children in the primary school

The education of deaf children in the school was characterised by successes. The successes were registered in both social and academic spheres.

5.3.7.1 Social successes

Participants from the group indicated that the teaching and learning of deaf children in the mainstream school had several successes on the part of deaf children, the school, and the community. These were success stories in social intercourse. These hinged on social and academic inclusion. Social successes refer to the achievements of deaf children mixing with hearing people.

The participants indicated that deaf children were effectively integrated into the mainstream school and the community as shown by the utterances cited below:

“Deaf children will integrate well into the school and the community” (Participant 2B).

Deaf children learned to socialise with the hearing people in the school; hence, they were going to continue socialising well with the hearing people even beyond the school community. They learned to appreciate and accept other cultures.

Teachers from FGDs also had other success stories to tell about deaf children. The deaf children were also good at drama, drawing, and sports as shown by the excerpts from two teachers and one administrator:

“Some deaf learners excel in sporting activities. At one time, we had an outstanding soccer player who was a striker, and we went up to the district level due to his prowess” (Participant 3B).

“Deaf children are good at drama. The ‘normal’ children get meaning from the drama by signs and actions” (Participant 4B).

Participants indicated that deaf children performed well in sporting activities and drama. The use of the phrase ‘normal children’ could imply that the participants viewed deaf children as not normal, raising suspicion on their acceptance of ‘what is not normal’. It emerged earlier on that there were prefects and class monitors who were deaf. If school prefects were chosen based on meritocracy, this could imply that deaf children were successful both socially and academically. The participants also indicated that on the social side, parents were no longer hiding their deaf children in their homes. The participants indicated that parents had a habit of hiding their deaf children in their homes for cultural reasons until perhaps they were reported to the law enforcement agents, either from the community or from the government. One participant from the FGDs, the deaf teacher, and a psychologist narrated experiences of parents who were hiding their deaf children. They said:

“Because of enrolling deaf children in the mainstream school, parents are no longer hiding their deaf children in their houses because they see other deaf children here. Parents used to hide their deaf children until they were perhaps reported to the traditional law enforcement organs or the police. They were hiding their deaf children for traditional or cultural reasons” (Participant 1B).

“As far as disability is concerned, cases of hiding children with disabilities are many. How can you explain a twenty-two-year-old who has never been to school just because of deafness? And how can you explain the lack of Sign Language? This clearly shows that these deaf learners were hidden as children” (Deaf Teacher).

“They hide them in their homes. Do you know that if someone lives, especially in the remote rural areas, they give birth to these deaf children, all forms of disability, they hide them? They don’t move out. They don’t play with other children” (Psychologist 1).

Parents were initially hiding their deaf children in their homes to the extent of being reported to the law enforcers. After realising that there was a school enrolling deaf children and seeing other deaf children going to and coming from school, they decided to send theirs to the school too. Parents hid their deaf children because of cultural reasons or because they did not want to be associated with disability. However, some parents hid their deaf children because of a lack of mobility on the part of the deaf child, especially in cases of comorbidity involving deafness and physical disabilities. Deaf people who did not attend a school or those who lacked Sign Language were a sign that they were hidden in the homes.

5.3.7.2 Academic successes

Academic successes refer to the achievements of deaf children in their learning process. On successes scored in the teaching and learning of deaf children, the participants indicated that deaf children understood mathematical concepts better than any other subject or concept, particularly those in the mechanical form where there could be little language barrier due to the few or no words in the problem. The transcripts from two participants from FGDs and an administrator express these views. They had this to say:

“Some deaf children are gifted, especially in Mathematics. They understand mathematical concepts easily” (Participant 3A).

“Mathematical concepts are concrete, unlike abstract concepts they have not visualised. Visualising affects their memory. It influences deaf children’s learning” (Participant 4A).

“They are mostly gifted in Mathematics. An indicator that mathematical concepts are exact is that one is one. It can never change. When it comes to languages, it’s different” (Psychologist 2).

“This is the Grade Three mark schedule [showing the marking schedule to the researcher]. Basing on the fact that this is a deaf child but acquiring those marks which are

not even obtained by some of our hearing children. By the time these children get to grade six, they will be able to do wonders” (administrator 2)

Deaf children performed well in Mathematics, possibly because this concept had few words, thereby reducing language problems. This was a success for the school and the deaf children. Perhaps, Mathematics concepts were made more concrete than other concepts. This was a success for deaf children in the school. Observations made on the mark schedule showed that one of the deaf children scored good marks, that is, in Mathematics Paper One, which was out of fifty, she scored thirty and in Mathematics Paper Two, she scored eighteen out of thirty-five. In Mathematics, the total score was forty-eight out of eighty-five. Although the researcher did not see the mean score for the grade level, these were pleasing marks for children who the teachers indicated were adversely affected by communication issues in the teaching and learning situations, with even the teachers indicating that they were being taught Sign Language by the deaf children. Being taught Sign Language by deaf children implies that teachers had challenges in communicating with deaf children, including during the teaching and learning process. Another deaf child [name withheld] had passed all the subjects except two in red marks (failing marks) in some papers but the average marks were passing. The administrator indicated that they were likely to get some more deaf teachers out of these children if they continued performing like that. The performance of deaf children indicated that they could compete with hearing children in academic performance and, in fact, in all school activities like sports, drama or general cleaning.

5.3.8 Legislation and policy

The education of deaf children is governed by laws and regulations that specify their provisions. Legislation and policy refer to the laws that regulate the education of deaf children. The legislation influenced the education of deaf children in the school. The provisions of legislation determine the steps that are taken in the teaching and learning of deaf children.

On the state of legislation and policy provisions in the education of deaf children in Zimbabwe, the transcripts from the three psychologists summarise the participants’ views on legislation and policy provisions on the education of deaf children. A participant said:

“According to the Constitution, we now have sixteen languages in Zimbabwe, including Sign Language” (Psychologist 2).

“Normally, policy issues don’t address only one area of disability. Our approach to policy formulation is holistic. We formulate a policy that caters for the needs of each child, deaf children included. There are several policies. We treat them as learners, and we formulate policies for them. However, there is this policy on the adjustment of the examinations; it’s on the signing of instructions before taking examinations and the like. Like I indicated, there is a policy for all learners, not deaf children per se, except for the one I have mentioned. We have got a policy on language, which states that at the infant level, from ECD A to Grade Two, the teaching instruction should be in the child’s first language. If the mother tongue is English, then you can use English as the language of instruction; if the mother tongue is Shona, the same applies. When children are in Grade Three and above, the language of instruction is English” (Psychologist 1).

“At the moment, I don’t know of any, but as a ministry, as a country, I think we are trying to come up with an inclusive policy where all learners with disabilities should be included in the mainstream. Maybe that one is going to assist in the inclusion of all learners in the mainstream. It’s still not yet a final thing” (Psychologist 3).

The participants indicated that the Constitution of Zimbabwe was legislation that constitutionalises the existence of Sign Language as one of the sixteen official languages to be used in the country. The transcripts show that there was no policy for deaf children but a policy for all the children in schools. The only policy that was specific to deaf children was on the adjustment to examinations. Policy on language and language of instruction was addressing the needs of all children in the schools. The policy was silent on Sign language but on the native languages that were supposed to be used as the language of instruction in infants' grades. Such a policy would not promote diversity. It would be based on the one-size-fits-all principle, that is, all the learners are the same. Some people may not believe that Sign Language is a language; hence, they may not apply it to the teaching and learning of deaf infants. It emerged, however, from Psychologist 3 that a policy on inclusion was still at the draft stage. It was still not clear on what the provisions of the draft policy were. It could mean that the current policy existed even before the education of deaf children in the country and was later presumed to cover their education. The interpretation of such a piece of legislation may rest with the reader leading to as many interpretations as the number of educators.

5.3.9 Early identification and intervention

Early identification and intervention refers to the process of identifying deafness and apply strategies to harness it before it negatively impacts on the emotional, physical or cognitive development of the child.

Early identification of disability and the subsequent intervention reduced the impact of disability and, therefore, played a significant role in the education of deaf children. If the education of deaf children was going to be effective, there was a need to identify deaf children early and intervene early. On early identification and intervention, the utterances of one of the psychologists give more insights into this finding. It is said that:

“If the children are identified early, intervention is done earlier and their condition improves; but if they are hidden, they become illiterate. They never go to school. Also, when the parents are no longer there, they will face more severe challenges. They won’t be independent. We send these learners to school so that they attain personal independence. But now they will be dependent for life. Early identification leads to early intervention. In fact, in the ministry, we have a ‘catch them young’ slogan. Whatever we do, whatever programmes that we introduce, everything that we do in the ministry, should catch our learners young” (Psychologist 1).

The transcript shows that MoPSE’s ‘catch them young’ motto is meant to identify children with disabilities early for early intervention. Early identification and intervention reduce the impact of the disability and improve the living conditions of individual deaf children. Early identification and intervention could lead to the independence of the individuals with disabilities. On the age of enrolment of deaf children into schools, the extracts from two psychologists give information on how early deaf children were supposed to be enrolled in the schools.

“Deaf children are like any other child. Normally, our learning starts at ECD, ECD A, ECD B progressing to Grades one and two. Any child can access learning at that point, including deaf children. Like I indicated earlier, our policies treat all learners holistically. They don’t isolate learners basing on disability (Psychologist 1).

“These children are as good as other children. From the age of four years, they go to ECD” (Psychologist 2).

The participants concurred that deaf children were treated like other children in terms of enrolment. The enrolment of deaf children started at ECD A, just like the hearing learners. Like other children, deaf children had the right to be enrolled into ECD A classes as early as they turn four years. Their enrolment was governed by mainstream policy rather than by specific policy regulating their enrolment. However, the programme was negatively affected by the parents who hid their deaf children. On whether parents brought their deaf children to school for enrolment or assessment at the ages they were expected to be in the schools, one of the psychologists and the deaf teacher expressed the following views, thus;

“That’s a challenge in some communities. Surely, early identification is a challenge. You find that because of incapacitation, some parents hide these children only to be identified maybe at outreach assessments. We conduct outreach programmes. It is at these outreach programmes where these learners are identified and unfortunately, some of them are identified very late when they are supposed to be leaving the primary school. That’s when they are identified, at fourteen years sometimes. As a ministry, we normally recommend that they pursue the non-formal route because we have got programmes for such learners in our non-formal institutions” (Psychologist 1).

“It’s difficult to explain that a twenty-two-year-old child has never been to school just because of deafness. How can you explain the lack of sign language? It clearly shows that they were hidden as children” (Deaf Teacher).

Although the education system wanted to identify deaf children early and intervene early, the programme was dependent on the willingness of the parents to avail their deaf children who were mostly hidden, with most of them being identified during the Schools Psychological Services outreach programmes. Such identifications were usually late, with some children identified early as old as fourteen years or even twenty-two years old. Such deaf children had no Sign Language. Deaf children who were hidden were, therefore, enrolled into the schools late, resulting in some of them being given the non-formal option because they were too old to mix with learners of the

primary school age. However, if something was done as early as the identification was done, improvements were likely to be realised. For instance, identifying a deaf child at twenty-two years and instantly teach the child Sign Language would improve the communication and social skills from the onset of the language, thereby reducing the impact of lack of communication. On the reasons why parents hid their deaf children, the participants cited cultural beliefs. Giving the reasons for hiding the deaf children, one of the psychologists explained, thus:

“Maybe, this emanates from cultural beliefs. You know our culture at times has got some connotations or stigma attached to the birth of a disabled child in the family. Some cultures think it’s a bad omen or punishment from the gods for promiscuity, mostly on the part of the mother, things like that. So in order to avert stigma, these children are tied, they are hidden. However, with the outreach programmes we are conducting as a department throughout the country and we are reaching even the remotest part of Zimbabwe, the people are being educated on the need to bring forth these disabled children early for school” (Psychologist 1).

There were connotations of stigma that were attached to having a child with a disability. Parents were not comfortable with being associated with these connotations. People believed that having a child with disabilities was a punishment from the gods for bad behaviour such as promiscuity, especially on the part of the mother of the child. Those who were not promiscuous would be hurt to know that people viewed them as promiscuous when they were not. The promiscuous ones would realise that their promiscuity had been discovered. To cover-up, they would hide their deaf child on the basis of their beliefs. Some people also believed that having a deaf child was a sign of bad omen. The outreach programmes mounted by the Department of Schools Psychological Services educated people on deafness and encouraged them to bring forth their deaf children for early identification and intervention. However, some parents, despite loving their deaf children and not worried about cultural beliefs, hid their deaf children because they were not able to carry them everywhere they were conducting their manual work. Perhaps due to language challenges, these deaf children had no friends to play with or in the case where there was deafness comorbidity with physical disabilities. The possible option for the parents was to lock them up in the home as shown by the excerpt from one of the psychologists who said:

“It’s not that I don’t love my child, but the child is now too big for me to strap him on my back. For me to carry a load of firewood and this child on the back, [maybe the child was around twelve or so], it’s a huge burden” (Psychologist 1)

On whether there were adverse academic effects on the deaf children if they were hidden by their parents, the excerpt from a psychologist confirms the existence of these effects as summarised below:

“There are. There are services offered by other professionals, not only psychologists, audiologist, speech therapists and the like, we have got our partners like Ministry of Health. In the Ministry of Health, we have professionals like physiotherapists, speech therapists and occupational therapist. If these children are identified early and they are sent to these partners, these therapists will improve their condition. I have heard of cases of children who come here without speech or language acquisition, and without a language, we refer them to speech therapists. They undergo sessions and they come back happy now talking” (Psychologist 1).

The excerpt shows that deaf children needed the services of several disciplines. There was a need to identify them early and send them to these multidisciplinary teams so that they could improve on the conditions of the deaf children. If the deaf children were hidden, they were not going to access the services from the other disciplines or they were going to access these services after the critical ages for the development of the required skills. The adverse effects of deafness could be reduced or managed when deaf children were identified early and sent to these specialists for intervention.

5.3.10 Deaf children’s challenges at the primary school

The deaf children experienced many challenges in teaching and learning processes. The challenges included lack of resources, communication barriers, and negative attitudes from teachers and hearing children.

5.3.10.1 Lack of resources

On challenges in the teaching and learning of deaf children, the participants said that the resource units and other classrooms in which deaf children attended classes were not suitable for educating

deaf children. The teachers from the FGDs indicated that teachers in the resource rooms were borrowing textbooks from mainstream classes. This meant that there were no books intended for the resource units. The extracts below, from one participant from the FGDs and one psychologist, show the state of the infrastructure in the schools;

“The rooms are not carpeted, there are no double windows, neither are there curtains among other requirements” (Participant 4A).

“Some resource units, especially new ones, don’t have carpets, maybe because of the challenges we are facing. But previous resource units had carpets. A class might have a mirror, but it may not be carpeted” (Psychologist 2).

The school had no proper resource units for the teaching and learning of deaf children. The resource units allowed ambient noise which disturbed the teaching and learning process. The new resource units, like the ones at the selected school, were not completely furnished. Observations showed that background noises from outside and worse from the next resource unit were making it difficult to operate from any of the two resource units.

5.3.10.2 Communication barriers

The enrolment of deaf children had challenges related to communication. Although the teachers indicated that they were comfortable with enrolling deaf children at the school, they said that they faced some challenges in how hearing and deaf children related due to communication challenges.

“There are some challenges on how they relate with hearing peers. In case of a conflict, they cannot resolve it on their own due to lack of communication” (Participant 3B).

“Mainstream teachers cannot sign” (Deaf Child 4).

These sentiments suggest that there were conflicts between deaf children and hearing children. Teachers and hearing children were unable to resolve disputes between deaf children and hearing children because they were not able to sign. In contrast, deaf children could neither speak nor hear, leading to the language barrier. In other words, the two parties could not communicate. This led to misconceptions which possibly deepened the conflicts. Probably, the causes of conflicts were misconceptions caused by language barriers. This might imply that mainstream teachers could not resolve conflicts between deaf and hearing children due to their inability to sign. The major challenge in the teaching and learning of deaf children was, therefore, the language barrier.

On the teaching and learning of deaf children, the participants indicated that they had challenges, especially in that they were not able to sign and only had rudimentary Sign Language that enabled them to say *'Hello, Good morning, or How are you?'* Thus, teachers were not able to sign. Teachers, however, said that Sign Language was being taught as a subject. Although teachers indicated that Sign Language was being taught as a subject, they intimated that they were taught the subject by deaf children instead of them teaching it to the deaf children. The following transcripts from two participants from FGDs and one administrator show the nature of signing by teachers.

"I have basic signs, like 'Hallo', 'How are you' or 'Good morning'. Sometimes, deaf children can tell that my signs are wrong, but they acknowledge understanding of what I am saying to them" (Participant 3B).

"I have challenges in communicating with deaf children when I teach them Home Economics, especially the fact that the specialist teachers do not accompany them to Home Economics lessons" (Participant 6A).

"We have a challenge because no one can communicate with the deaf learners. Most teachers and hearing children cannot communicate with them" (Administrator 2).

The transcripts show that teachers, administrators, and hearing children were not able to sign and, therefore, faced challenges in communicating with deaf children. Probably, the specialist teachers were better placed to communicate with deaf children. Mainstream teachers only had basic Sign Language, especially for greetings. Deaf children could tell from the hearing people's Sign Language that their signs were wrong, but they tried to make sense out of that. Challenges in communication during teaching and learning of deaf children in the mainstream classes were compounded by the fact that specialist teachers did not accompany their deaf children to these classes. It was likely to be worse in special area subjects like ICT and Home Economics where there could be certain terminology that deaf children did not interact with in their common language. There was, therefore, a communication gap that could make teaching, learning, and social interaction difficult.

Deaf children also concurred that teachers were not able to sign. The excerpts below, from two deaf children, indicate that mainstream teachers were not able to sign:

“Most teachers cannot sign. My teacher, who is deaf and another teacher who teaches deaf children, can sign, although this other teacher is not quite proficient in signing. She sometimes writes what she wants to say when communicating with deaf children” (Deaf Child 5).

“Mainstream teachers cannot sign. Only teachers from the resource rooms can sign, although one who is not deaf is not quite proficient in signing. My teacher uses Sign Language to teach me. My teacher, however, here and there, opens the Sign Language dictionaries to check for some signs of what she wants to say. Sometimes, she writes words when she does not know the signs, and sometimes she writes a word so that we give her its sign” (Deaf Child 4).

The specialist teachers used Sign Language to teach deaf children. The hearing specialist teacher, however, was not quite proficient in Sign Language such that she would sometimes either write what she was not sure of in terms of signs or consult the Sign Language dictionaries.

On whether the school had some people who could communicate with deaf children since communication appeared to be a key challenge, the administrators gave a contradictory view to those of deaf children that one of the specialist teachers was not proficient in Sign Language. The administrators said that specialist teachers were qualified to teach deaf children. The participants said that specialist teachers could communicate in Sign Language proficiently. The extracts below, from the administrators, show that specialist teachers were proficient in Sign Language;

“Their teachers are qualified. As I have said, one of the teachers is deaf and dumb, but she even has a degree. She has acquired a degree in Special Education” (Administrator 2).

“Yes, the teachers are qualified to teach deaf children, and one of them is deaf and dumb. She is a qualified teacher with hearing impairment. The other one is qualified to teach in that department with children with those challenges” (Administrator 1).

The findings show that both specialist teachers were qualified to teach deaf children. However, teachers from FGDs in which the hearing specialist teacher participated indicated that teachers, except the deaf specialist teacher, were not able to sign proficiently. They also stated that they were being taught Sign Language by deaf children. The differences between the views of the

administrators and those of deaf children were perhaps because administrators considered the qualifications of the teachers at the expense of practical signing. The differences could also have arisen because administrators themselves were not proficient in Sign Language; hence, they could not notice that one of the specialist teachers was not quite skilled in signing. The level of signing the administrators referred to as proficient was probably not proficient to the native Sign Language users.

Although the administrators said that the specialist teachers could sign proficiently, the excerpt from the DRT suggests otherwise.

“The deaf children are taught by teachers who can sign but unfortunately, we have got a challenge with teachers who have Sign Language qualifications. We only have one deaf teacher at one of our primary schools [Name of school withheld]. She signs. She is the only one who is deaf among our teachers, but most of them use total communication when they are teaching” (Psychologist 3).

Specialist teachers who did not specialise in Sign Language were not able to sign proficiently. They learnt Sign Language from the deaf children as earlier confirmed by one of the hearing specialist teachers that in most cases, teachers were taught Sign Language by deaf learners.

Although the teachers were not able to sign, they indicated that Sign Language was being taught as a subject, as shown by the excerpt below:

“Sign Language is taught as a subject, but in most cases, teachers are taught the language by the deaf children” (Participant 4A).

“If the teachers did not specialise in Sign Language, most of them just learn the signing from the learners themselves” (Psychologist 3).

This confirms the fact that mainstream teachers and the hearing specialist teachers were not proficient in Sign Language. This suggests that there was a difference between having a qualification in Special Needs Education (SNE) specialising in Deaf Studies and Specialising in Sign Language. Those who just specialised in Deaf Studies were not able to sign proficiently and learnt Sign Language from the deaf children, while those who specialised in Sign Language could sign. The idea that Sign Language was taught as a subject was, however, refuted by the psychologists and administrators, as shown by the utterances cited below:

“Sign Language is not taught as a subject, but as a language of communication or as a language of instruction, not as a standalone subject” (Psychologist 2).

“No, we don’t have Sign Language as a learning area, but what I am saying is that Sign Language should be taught for communication purposes so that even if these kids are at break time, wherever they are, will be able to communicate because right now, our learners, all other learners, are only able, maybe to say, ‘Come here, Go and How are you’ [signing]” (Administrator 2).

The submission from teachers that Sign Language was being taught as a subject was shot down by the administrators and the psychologists when they said that Sign Language was not taught as a subject. The administrators and the psychologists were probably concerned with Sign Language for communication purposes during the teaching and learning of deaf children or as a tool for deaf children to be functional in social set-ups rather than considering it as an examinable subject like any other common language subjects that are being taught or being used as languages of instruction. The administrators viewed Sign Language as a language for communication purposes in social circles and a tool for teaching, not a subject to be taught.

Participants further indicated that deaf children sometimes wrote on the ground or pieces of paper what they wanted to say to the school staff members or their hearing peers. School staff members also said that they wrote down what they wanted to communicate to the deaf teacher if they found some challenges in putting across something. The deaf teacher would also respond in writing, either on a piece of paper or on social media. It could mean that communication was aided by writing the information on pieces of paper or through social media, as shown by the transcripts below from one participant from the FGDs and an administrator.

“Deaf children sometimes write down what they want to say on discovering that people fail to understand them” (Participant 2A).

“We usually write it down, and she responds in writing. Even when the deaf teacher wants something from this office when she comes and sees that we are not able to communicate, she can type, she can use social media or even a piece of paper. Even when other teachers are talking to her, they just use social media. She responds there and then (Administrator 2).

For the deaf teacher, communication through social media could not be a challenge because she could afford to use a WhatsApp-enabled smart phone. Moreover, by standard, the deaf teacher was better placed in terms of reading and writing. There were chances that deaf children could not afford WhatsApp-enabled smart phones. This system of communication was a sign of acceptance of each other by the members concerned. The submission by administrators also confirms that teachers were not proficient in Sign Language. Teachers were writing to the deaf teacher while she would also respond in writing, be it on paper or social media.

There were also challenges that mainly impacted on the teaching and learning of deaf children. On whether there were challenges deaf children encountered at the school, the administrators indicated that there were several challenges like composite classes, communication, resources, and sports. In the excerpts below, two administrators show the challenges encountered in the teaching and learning of deaf children.

“A teacher who is teaching children with hearing impairment is forced to teach three or four grades, whereas if they were at an exclusive school, a teacher would concentrate on, maybe, grade ones have seven children in grade one and another teacher having seven children in grade two up to grade seven. Now, in this case, because of the limited number of places and facilities, we are forced to have two teachers. One teaches ECD A to Grade Three and another one teaches Grade Four to Grade Seven. So there will be composite classes. The other challenge is that because of the limited number of students that the school can enrol, it may be challenging to organise meaningful sporting activities for these children; for example, this school has sixteen hearing impaired learners in the resource unit. Half of them are girls; now you need to train them soccer, volleyball, netball, basketball, tennis, the numbers may not be adequate to constitute a team” (Administrator 1).

“This teacher who is deaf and dumb takes ECD A, ECD B, Grade One and Two” (Administrator 2).

The administrators concurred that specialist teachers were teaching composite classes, although they differed on the grades that were taught by each teacher. Specialist teachers were the teachers who had Special Needs Education specialising in Deaf studies. One administrator said that one

teacher was teaching from ECD A to Grade Three while another administrator said that one teacher was teaching from ECD A to Grade Two. The composite classes were attributed to a limited number of deaf children the school could enrol as well as the limited facilities for the teaching and learning of deaf children the school had. These facilities could imply the number and nature of the resource units, hearing aids, or textbooks, including the availability of skilled personnel. The administrator indicated that sixteen deaf children made two composite classes. These were manageable figures in terms of paying individual attention to these deaf children as compared to the fifty-eight or more pupils in each class in the regular classes where deaf children sometimes attended classes. The administrators saw the limited number of deaf children they could enrol as a cause for exclusive sports. Having teams for deaf children alone defied the logic behind educating them at the school. The idea of teaching deaf children at the school should as holistically inclusive as possible. On whether it was not possible to train them together with hearing children, the participants indicated that there were communication challenges even with the referees. The extract below shows the views of the administrators:

“They may be able to do, but these games have rules and regulations using the whistle and these children may not hear the whistle when there is an infringement or when the referee signals that a rule has been broken. However, in an exclusive team, the man in the middle will maybe put himself in a position where all children will be able to see him signalling that a foul has been made. It may also be challenging for the match official to communicate with the learner because he may not be well versed with Sign Language, but if they are put in an exclusive school, all these challenges can fall away because the person in the middle will be able to use Sign Language and communicate with the learners” (Administrator 1).

“No one is able to communicate with the learners” (Administrator 2).

By indicating that they created exclusive sports, the participants seemed to be suggesting that they addressed the problem with the idea in mind that deaf children had challenges rather than addressing the system so that it meets the needs of deaf children in inclusive sports. That is, the school or sports organisers were supposed to develop ways of successfully including deaf children in sports rather than creating exclusive sports for them, which indicated that they did not fit into

the mainstream society of the hearing people. The system was supposed to address the communication challenges that existed between the deaf and the hearing people.

5.3.10.3 Negative attitudes from teachers and hearing children

Deaf children in the school experienced disparaging attitudes from mainstream teachers and hearing children. These had some impacts on the psychosocial and academic lives of deaf children. These attitudes manifested through the procurement of resources and the social activities of the school. These attitudes were also shown through the crafting of legislation. These had some impacts on the education of deaf children, as indicated below:

“There is a lack of resources like computers and interactive boards. These make our understanding of concepts better. The mainstream teachers, including the administration and other hearing children have negative attitudes towards us. We are also not involved in sporting activities. We are not happy to be out of school teams” (Deaf child 5).

“Being left out of games that we can play make us feel unwanted. For me, that is why I decide to be with my friend or stay alone. When hearing people do not greet us or respond to our greetings, we feel they think we are not worth talking. We think they are saying we are not human” (Deaf child 1).

Failure to provide resources was viewed as pointing to negative attitudes towards deaf children’s education, especially that resources for the teaching and learning of the deaf children were borrowed from the mainstream classes. Hearing teachers and children did not talk to deaf children, neither did they greet them. This was not in line with the cultural norms of the society in which the study was conducted. Exclusive sports for deaf children were also a sign of negative attitudes towards deaf children. They loved participating in mainstream activities and possibly realised how much they fared against their mainstream peers. Teachers exhibited negative attitudes through their failure to sign, especially given the fact that they were socialising with specialist teachers and even with the deaf teacher. The excerpts below explain this finding:

“We are socialising very well with her. We have the basic skills to communicate with her. Also, if we find some communication challenges with her, we usually write it down, and she responds in writing. At assembly, we usually ask Sign Language teachers to teach basic

communication skills using Sign Language. We give them about five to ten minutes, though it's not adequate” (Administrator 1).

“If a teacher cannot sign, it is difficult to communicate with deaf learners. It is possible to attend Sign Language lessons every day, but it's about attitude now; so, it's up to the administration” (Psychologist 2).

Regular teachers socialised well with the deaf teacher, and when they encountered communication challenges, they would write down their messages, and she likewise, would respond in writing. The same could be as well used to learn Sign Language from the hearing specialist, but perhaps because of negative attitudes, this was not happening. The school had some Sign Language programmes which were done at assemblies on Mondays. Although the administrators acknowledged that the time allocated to the programme was not adequate, failure by teachers to sign was probably a sign of negative attitudes towards Sign Language, deaf children, and their education. Both the administrator and the psychologist indicated that there were Sign Language programmes. Contrary to the views regarding negative attitudes, the deaf teacher said that the attitudes of hearing people were positive. The transcript below shows her expression.

“The attitude of hearing people is generally friendly. The problem comes when the two parties want to communicate. Communication is better for those who can write” (Deaf Teacher).

The excerpt still shows that teachers were not able to sign and those who were literate took advantage of their literacy to communicate with deaf people. Communication between the Deaf and hearing people, therefore, was better if both parties were literate. This concurs with the communication that existed between hearing teachers and deaf children and the deaf teacher.

5.4.1 Summary

This chapter presented and analysed data. Data were presented and analysed using the narrative analysis method. Themes were identified and data were grouped and analysed under these themes. The data presented included the biographic data of the participants and thematic results of the study. The next chapter focuses on discussion of presented data, limitations of the study,

recommendations based on the findings, reflection of the study and conclusions of the study drawing on the findings.

CHAPTER 6

DISCUSSIONS OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

6.1 Introduction

This chapter focuses on discussions of findings of the study, conclusion and recommendations. Findings will be discussed under their respective research questions. The research questions under which the findings will be focused on academic experiences of and support services for deaf children in a primary school. The research questions also focused on psycho-social and academic experiences of deaf children in a primary school as well as the challenges that were experienced in offering psycho-social support to them. The chapter also looks at the limitations of the study. Recommendations were drawn on the basis of the findings of the study. Moreover, the chapter looks at how the study has contributed to new knowledge. Finally, a conclusion of the study findings will be provided.

6.2 Discussions of main findings

Research question 1: What are the academic experiences of deaf children in primary schools concerning resources?

The study found that the only amplification devices that were available in the school were hearing aids. It emerged from the teachers that the availability of hearing aids was important for the teaching and learning of deaf children in the school. In concurrence, literature has shown that amplification devices were used to enhance academic performance and communication for deaf children in primary schools (UNESCO, 1994). Studies have shown that some deaf children used the common hearing aids such as the body-worn, the In-The-Ear (ITE) or the Behind-The-Ear (BTE) hearing aids while others used other types of hearing aids like cochlear implants, the FM system or the loop (Hadjikakou, et al., 2008; Alasim, 2018). However, the study found that the only available amplification devices for the deaf children at the selected school were the common hearing aids, the BTE, which the deaf children brought from home after they were bought by either their parents or their donors. Observations confirmed that the deaf children who had hearing aids were wearing the BTE hearing aids. However, Mpofu and Chimhenga, (2013) found that ordinary hearing aids like the BTE, the body worn or the ITE have a disadvantage of picking all the sounds in a vicinity including unnecessary ones, some of which may be irritating to the user, unlike the

FM system and the induction loop which transmit and receive sounds at set frequencies (Mpofu & Chimhenga, 2013). The amplification devices suggested by literature could be more advanced than the ordinary hearing aids the deaf children at the school had. Although the loop and the cochlear implant types have an advantage of not picking ambient noise, they could be more expensive than the BTE such that parents may not be able to afford them; hence, it was likely that they would go for the cheaper amplification devices. Consistent to this are the findings of Musengi and Chireshe, (2012) who indicated that deaf children in inclusive set-ups used hearing aids which were donated long ago and were no longer efficient. Contrarily, Thwala, (2015) found that some schools had no technological resources, like hearing aids to successfully teach deaf children in primary schools. The teachers in Thwala's (2015) study even indicated that they were not competent in using technological devices even if they were available since they only had lessons in theory about these gadgets and had never touched them. The lack of knowledge on the use of amplification devices was going to be worse if the school was using the FM or the induction loop systems which are more complicated than the ordinary hearing aids and require the direct involvement of the teacher (Mpofu & Chimhenga, 2013). The inconsistency in the literature could be because the studies were conducted in different countries with different participants who probably held different views. Musengi and Chireshe, (2012) conducted their study in Zimbabwe while the other one by Thwala (2015) was conducted in Eswatini (formerly Swaziland). It could be possible that donors in one country may value donating hearing aids to deaf children while in another, perhaps due to negative attitudes towards deaf children, donors did not value the use of hearing aids. Although there is inconsistency in the literature, it could be inferred that the schools had no hearing aids to offer to the deaf children. The schools with hearing aids were those that were fortunate to get donors or they had deaf children who had parents or personal donors who procured the hearing aids for them.

It emerged from teachers that some deaf children had no hearing aids. Observations confirmed that a few deaf children had hearing aids. Although UNESCO, (1994) says that the distribution of resources should be the responsibility of the state which should also consider the needs of deaf children, it emerged from the deaf children and the teachers that those who had the hearing aids brought them from home after they were bought by their parents or donors. The Constitution of Zimbabwe recognises that children with disabilities have a right to, within the limits of the resources available to the State, State-funded education when they need it (Constitution of Zimbabwe Amendment (No. 20) Act, (2013) under section 83 paragraph (f). This could mean that

the state was not able to fund the procurement of hearing aids for the deaf children due to resource limitations, hence, the deaf children had to rely on their parents or personal donors for such provisions. This could also mean that some deaf children had no hearing aids because their parents could not afford to buy for them.

Deaf children and the teachers revealed that some deaf children did not like hearing aids. They indicated that hearing aids were for those deaf children with residual hearing. The teachers further revealed that deaf children did not like hearing aids because they subscribed to the Deaf culture, their culture. Their language, Sign language, does not require listening, neither does it require speaking. It also emerged that those who were totally deaf did not benefit from hearing aids even if they liked them. Studies have shown that the hearing aids that were used in some schools were of poor quality and they were also stigmatising since they were conspicuous from a distance such that deaf children sometimes removed them during school time (Musengi and Chireshe, 2012). It could be that those deaf children who did not like hearing aids were concerned about the stigma that was associated with deafness since the available hearing aids were the BTE. It could be also that the deaf children were not benefiting from the hearing aids either because they were of poor quality or because they had no residual hearing.

The school had no hearing aids to offer deaf children although the administrators and the psychologists revealed that deaf children got hearing aids from SPS, contradicting findings from Musengi and Chireshe, (2012) that hearing aids were donated. Thus, the administrators and the psychologist were at variance with the teachers and the deaf children on where the deaf children got their hearing aids. In concurrence with deaf children, the administrators indicated that deaf children with hearing loss in the severe to profound range did not benefit from hearing aids. Observations indicated that the two deaf children with hearing aids seemed not to be benefitting from speech as they did not respond to it. They relied on Sign language throughout the interview process.

Visual learning aids facilitated the teaching and learning of the deaf children. These visual learning aids were in the form of projectors, computers or interactive boards. It emerged from the teachers that visual learning aids enabled the teaching and learning of the deaf children to progress smoothly as they learnt better through the use of sight. The teachers and administrators concurred that visual

learning aids were critical resources in the teaching and learning of the deaf children as they were visual learners. It emerged that the multisensory approach was important in the teaching and learning of the deaf children, hence, visual learning aids facilitated maximisation in the use of sight considering that deaf children are visual learners. The study however found that there were no visual learning aids in the school. Observations also showed that there was lack of visual learning aids in the resource units. There were no computers, projectors or interactive boards. Observations showed that the computers that were available were only for the teaching and learning of ICT.

The finding is consistent with literature that points out that deaf children needed computers to improve their learning (Hadjikakou et al., 2008). Although the deaf children needed computers in teaching and learning, Sibanda, (2018) notes that there is lack of Information Communication Technology (ICT) hardware and software for the teaching and learning of deaf children in primary schools in Zimbabwe. The use of ICT in the teaching of deaf children is important in aiding learning through the sense of vision (*ibid*). Chimhenga (2016) notes that in Botswana some schools lacked funds to procure material and technological resources like computers and other teaching and learning aids. In another study in South Africa, Tshifura (2012) found that some schools had no financial resources, hence they were not able to procure the necessary resources to effectively implement the teaching and learning of deaf children in primary schools. Similarly, Chimhenga (2016) found that computer laboratories for children with disabilities were equipped with outdated and non-functional hardware and software because much of these were found outside the country, including technicians for these computers. It would be expensive for the schools to procure the hardware and software and hire technicians from outside the country. It would, therefore, take some time for the hardware and software to be replenished or for the hired foreign technicians to jet into the country. The lack of these technological devices was attributed to a lack of funding or a lower budget for Inclusive Education (Chimhenga 2016; Kaputa & Charema 2017; Sibanda 2018). Studies have shown that the effective use of visual learning aids was dependent on the availability of skilled personnel (Musengi, et al., 2012; Musengi and Chireshe 2012; Chireshe 2013; Chimhenga 2016; Sibanda 2018). The resources could be available and lie idle due to lack of skilled personnel with the capacity to use them (Musengi, et al., 2012; Chimhenga 2016). Observations showed that classrooms had only whiteboards which could neither be connected to computers nor used as visual learning aids but were for writing on using whiteboard markers.

Infrastructure at the school was not conducive for the teaching and learning of deaf children. It emerged from the teachers and the psychologists that the resource units were not suitable for the teaching and learning of deaf children. They were not acoustically treated and they had no mirrors, curtains, double windows and carpets to reduce ambient noise. Observations showed that the two resource units were a classroom which was divided by high cupboards. On each side of the cupboards was a resource unit and sharp noise from either side could be heard. Observations indicated that there were no mirrors and carpets in the resources. This signified that the resource units were not quite accommodative for the teaching and learning of deaf children. The study also found that the recent resource units were not fully furnished. It emerged from the psychologists that the most recent resource units were not as well furnished as the old ones. For the new resource units, some aspects were available while others were not.

The findings were consistent with existing literature. Studies have shown that classrooms for the teaching and learning of deaf children should be acoustically treated to reduce ambient noise just like resource rooms for speech training and audiometric assessments (Gudyanga, et al., 2014). Resource units should be sound proof so that only the required sound, mainly from the teacher and the pupils, is utilised during the teaching and learning, speech training, auditory training and audiometric assessments (*ibid*). Similarly, in Ethiopia, Desalegn and Worku (2016) note that most inclusive primary schools lacked suitable classrooms for deaf children, classrooms that are equipped with specific material resources for the deaf children. The resource units were not acoustically treated perhaps because of limited resources at the state's disposal (Constitution of Zimbabwe Amendment No. 20 Act 2013; Mandina 2013; Chireshe 2013). Findings were also consistent with literature from the Netherlands that points out that the cost of Inclusive Education has increased considering that the numbers of students that were being enrolled for Inclusive Education had tremendously increased (Gubbels, Coppens & de Wolf 2017). According to Hadjikakou et al., (2008) and Mpofu and Chimhenga (2016), the use of the loop and FM system reduces the effects of ambient noise which gives them an edge over other types of hearing aids like the BTE or body worn hearing aids. Thus, the use of these amplification devices could have solved the challenge of ambient noise in the resource units that were not acoustically treated. The school could have used the FM or the induction loop systems for amplification to solve the problem of ambient noise in and around the resource units. It was unfortunate that the school had no other amplification devices besides the BTE hearing aids. This scenario called the school to have

acoustically treated resource units. However, the use of the FM and induction loop was dependant on whether the deaf children benefited from amplification or not.

The availability of skilled human resources positively influenced the teaching and learning of deaf children in the school. The study found from the teachers and administrators that specialist teachers were enough and some were teaching mainstream classes. Indeed, observations based on the biodata indicated that some teachers with Special Needs Education (SNE) qualifications operated in the mainstream classes. Perhaps this was so because MoPSE did not have an account of the teachers' qualifications, hence, they did not post or redeploy them to the needy schools. Such teachers are likely to be underutilised. It could also be possible that the schools had shortages of specialist teachers because they were affected by brain drain. Contrarily, Musengi and Chireshe, (2012) reveal that primary schools had inadequate specialist teachers for deaf children although there were many specialist teachers in Zimbabwe who had done their diploma and degree programmes through various institutions of higher learning in Zimbabwe. This observation means that many teachers should be specialists for the deaf (Musengi et al., 2012). What then could be happening to these teachers who completed their courses in Inclusive Education with these various institutions when studies indicate that schools had shortages of specialist teachers for deaf studies? Consistent to the study findings, The CIET, (1999) answers that after completing their Inclusive Education courses, the specialist teachers were sent back to their original schools even if these schools did not need specialist teachers.

There were other skilled personnel who were necessary for the education of deaf children, like the audiologists, speech therapists, occupational therapists, doctors or nurses who were not available. The study found that these skilled personnel were not available and the available teachers were not trained in these areas. Literature confirmed that apart from specialist teachers, there were other skilled personnel like psychologists, occupational and speech therapists who were need to form interdisciplinary and multidisciplinary teams in the education of the deaf children (UNESCO, 1994; UN-CRPD, 2006). It emerged that generally, skilled personnel were resigning or leaving the ministry for greener pastures with the latest example being of the audiologists who left MoPSE without one. Consistent to this is the assertion that the CIET, (1999) found that the National Audiological Centre in Zimbabwe was operating with a skeletal staff (Musengi and Chireshe, 2012). The study found that the available audiologists had resigned leaving MoPSE with no

audiologists. Chances were high that deaf children could be wrongly placed and offered a wrong prescription of academic interventions. This could have a negative impact on the education of the deaf child.

The study also found from the administrators that the school had one deaf teacher. The participants indicated that there was one deaf teacher because their employment was affected by the fact that most learners could hear. It also emerged that deaf children did not mostly proceed to the tertiary level of education since they dropped due to poor instruction by teachers. The country has few deaf teachers. The finding was consistent with literature that observed that there was need to employ deaf teachers to teach deaf children for their role in the teaching and learning of Sign language as well as instilling deaf culture in them (UNESCO, 1994; Hauser, O'Hearn, McKee & Steider 2010; Mclroy 2010; Humphries, Kushalgar, Mathur, Napoli, Padden & Smith, 2013). UNESCO says that the recruitment of deaf teachers ensures that the deaf children have role models around them in the form of teachers and they are introduced to the deaf culture including the teaching of Sign language and communication skills (UNESCO, 1994; Mclroy 2010; Humphries et al., 2013; Mapepa & Magano, 2018).

Specialist teachers were employed by the Public Service Commission under the government. It merged that it was the duty of the school administrator to declare the vacant post to the District schools Inspector (DSI). The DSI would recommend the employment of the required teacher from the MoPSE. This could mean that the administrators had no powers to prescribe the teacher they wanted in the form of a deaf or hearing specialist teacher. The study found that the specialist teachers were treated like all workers under PSC where everyone lacked a living wage. They earned the same salary as the mainstream teachers without incentives, yet they had technical skills that mainstream teachers did not have. In consistence with the findings, regional studies have shown that teachers were not motivated to upgrade themselves to be able to man resource rooms because specialist teachers were not remunerated better than mainstream teachers, yet they had an extra task (Musengi & Chireshe 2012; Thwala 2015; Desalegn & Worku, 2016). The CIET, (1999) noted that after completing their course in Special Needs Education, the specialist teachers got only a notch higher which did not take them to the next promotional grade. Resultantly, as skilled personnel with some technical skills that were on high demand elsewhere, they flocked to

employers who offered them better salaries. The study found that the low salaries were psychologically affecting the performance of the workers.

The availability of books was important in contributing to the teaching and learning of deaf children at the school. It emerged from the teachers and the administrators that mainstream textbooks were used for the teaching and learning of the deaf children because deaf children sat for the same examinations as the mainstream children. The study found that the resource units borrowed textbooks from the mainstream classes and returned them as soon as they were through with them. The books that were shown to the researcher were only Sign language dictionaries. It emerged that Sign language dictionaries were enough for use in the teaching and learning of Sign language. The dictionaries were supplied by the Department of Schools Psychological Services free of charge, an indication that SPS was dedicated to the teaching and learning of Sign language in primary schools.

This was consistent with the findings of some study findings where mainstream schools did not have textbooks for the teaching and learning of the deaf children (Musengi & Chireshe, 2012; Donohue & Bornman, 2014; Chimhenga 2016; Mapepa & Magano, 2018). Aro and Ahonen, (2011) also note that there is shortage of textbooks and instructional materials for children with disabilities. Primary schools, therefore, used mainstream textbooks because they did not have the textbooks specific for the deaf children due to ‘the limits of the resources’ available to the state (the Constitution of Zimbabwe Amendment No. 20, 2013). It could also be due to lack of political will (UNESCO 1994; Kaputa and Charema 2017; Sibanda 2018) for fear of stretching the limits of the resources of the state by purchasing textbooks specific for the deaf children. Contrary to the findings on Sign language dictionaries, literature has shown that some schools have no Sign language dictionaries for the teaching of Sign language (Musengi & Chireshe 2012; Chimhenga 2016; Kaputa & Charema 2017). These variations could be as a result of the shoe-string budgets for the inclusion of deaf children under which states operate. At one time, the state could have resources to avail for the education of deaf children while at other times it could have limited resources to avail to primary schools. In concurrence, researchers have observed that Inclusive Education is allocated and operates with shoe-string budgets (Charema 2010; Chireshe 2013; Mandina 2013; Kaputa & Charema 2017).

Psychologists revealed that deaf children used modified textbooks. The psychologists, however, differed on when the modified textbooks were used. While one of them said that modified textbooks were used during the teaching and learning of the deaf children, another one said that adjusted texts were used for public examination purposes only. The inconsistencies in the views of these participants could be because the psychologists' views were on issues which were still in the pipeline.

Literature shows that only time was adjusted in terms of the examination of deaf pupils, otherwise the examination was the same (CIET, 1999). In Zimbabwe, the assessment system for deaf children is the same as that of their hearing counterparts with only a time allowance of 25%, when it is needed (CIET, 1999). Time allowance for deaf children in examinations was, therefore, not mandatory but optional. Contrary to the idea of having the same examinations for deaf children as the mainstream learners, the IDEA, (2004) posits that deaf children's performance in the USA is measured using their Individualised Education Plan (IEP), that is, it is based on whether they have achieved the set target(s) in their IEP. This sounds logical since the deaf children were taught following their respective IEPs. Subjecting them to the same examinations as the mainstream children would mean that their academic assessments are divorced from their respective IEPs. Giving the deaf children the same examinations as the hearing children without adhering to their respective IEPs would be inconsistent with the Jomtien Conference, (1990) which emphasised basic learning needs for children and youths with disabilities rather than basic education. The basic learning needs for the deaf children could be in their respective IEPs, hence, subjecting them to the same examinations could be focusing on basic education at the expense of their basic learning needs.

Deaf children got financial supports from their parents, individual donors and BEAM from the government. It emerged from teachers from FGDs and administrators that the parents of deaf children paid school fees for their children but in some cases school fees for some deaf children were paid by the deaf children's personal donors. The CIET (1999) concurs with the study finding that parents paid for their deaf children's school fees while NGOs chipped in to supplement for the insufficient school fees from parents. Perhaps the NGOs referred to by the CIET were the personal donors the deaf children had. In contrast, the DZT (2013) notes that some parents do not pay school fees for their deaf children, neither do they pay visits for them nor ask for their results

or school reports. The study found from the psychologists that the deaf children got financial support from the government in the form of BEAM for their school fees. The study found that vulnerability was the criterion that was used to qualify learners for BEAM. BEAM is a social welfare fund. It emerged from the psychologists that BEAM was meant for the Orphans and Vulnerable Children (OVC). Learners had to satisfy that they fell under this category before they were selected for BEAM. It also emerged from the psychologists that disability and poverty go hand in hand. In concurrence, studies have shown that there is a relationship between disability and poverty, the vicious circle of poverty and disability (Leigh, Ching, Crowe, Cupples, Marnane & Seeto, 2015). The vicious circle illustrates poverty as a driver and cause of disability, in turn leading to social vulnerability which increases the chances of poverty (*ibid*). This is consistent with the Constitution of Zimbabwe [Amendment No. 20] Act, (2013) which gives the deaf children a right to, ‘within the limits of the resources available to the State’, State-funded education when they need it. Parents, including through their personal donors, were paying school fees for their deaf children to supplement the ‘limits of the resources available to the state’. In concurrence, Sibanda, (2018) found that the availability of funding is dependent on political will and the country’s socioeconomic status.

A study by Chimhenga, (2016) revealed that financial limitations impeded the successful implementation of Inclusive Education, while Mandina, (2013) also cites budgetary limitations on the part of MoPSE and schools’ responsible authorities as a barrier to the implantation of inclusive education. These shoe-string budgets could be related to political reluctance (UNESCO, 1994; Sibanda, 2018). Contrarily, Takala et al., (2009) found that in Finland, children with disabilities got one and a half times more funding than hearing children. The psychologists revealed that the resources for the deaf children were not the same but were specific to each child. This could mean that the teaching and learning resources and assistive devices were supposed to be specific for each deaf child, hence, their procurement chewed a substantial amount of money. This could mean that although deaf children fell under vulnerable children, MoPSE and SPS had no financial capabilities to meet the needs of each individual deaf child. This possibly suggests why their financial needs were supplemented by parents and donors.

Research question 2: What academic support services are available for deaf children in primary schools?

Teachers revealed that deaf children were placed at the school by the Schools Psychological Services (SPS) while others heard about the school's capacity to enrol deaf children through other means and decided to come for enrolment. It emerged that deaf children were enrolled into the school either through placement by SPS or by coming on their own just as hearing children after getting information about the school's capacity to enrol deaf children. It however emerged from the administrators that deaf children were only enrolled into the school after they were assessed by SPS. Thus, deaf children had psychological and audiological assessments before they were enrolled. The school enrolled the deaf children after SPS had approved the enrolment through writing that they were placing the deaf child at the school. The study found from the administrators that the school had no powers over the placement of deaf children at the school. SPS's decision to place deaf children at a school was not negotiable. This was because of policy circular No. 36 which empowered the Principal Psychologist to place children with disabilities in schools in which they fitted according to their respective assessments, that is, children with special educational needs were placed at schools that offered the needs they required. In line with this, Gudyanga, et al., (2014) note that it was the duty of SPS to place deaf children at schools that suited their needs. The consistence with this study has with this literature may be because the writers conducted their study with the Zimbabwean system of placement of the deaf children in schools. This could mean that after the psychological and audiological assessments, the deaf children were placed at a school that could meet their academic and emotional needs. This could imply attending schools even those away from their homes, schools which could have different cultures from their home background, thereby offering similar services to the institutions in some instances. Contradicting the idea of the deaf children learning away from their homes, Kaputa and Charema, (2017) say that all learning takes place in an individual's society; for instance, we learn to cook, dress, speak, wash or eat from other people in our societies. If one is socially excluded from their society, their learning is limited in terms of their society's cultural norms and values, while their 'normal' counterparts in their societies may miss out on learning about and from counterparts with disabilities (*ibid*). Kaputa and Charema, (2017) further say that learning alone is not enough unless it is learning societal values and norms from and among peers. In line with this, Musengi and Chireshe (2012) view the learning of the deaf children in primary schools as fostering their society's sociocultural norms and values and that placement of deaf children in institutions may deprive them of acquiring their society's sociocultural norms and values.

The placement of children into schools which could cater for the needs of deaf children may be inconsistent with Italy's Law No. 517/1977 which was popular for officially closing down special schools and replacing the term *inserimento* (placement) with the phrase *Integrazione Specialistica*, literally meaning specialist integration. The Law differs from Zimbabwe's policy circular No. 36 which recognises the role of the Principal Psychologist in the placement of children with disabilities in schools in which assessed children have to fit well according to their needs. Contrary to Zimbabwe's policy circular No. 36, the Italian Law 517/1977 called for the provision of special educational needs to mainstream schools to enable them to cater for children with exceptionalities. Law 517/1977 concurs with SREOPD, (1993) and UNESCO, (1994) which call for schools to be adapted to the needs of the deaf children not vice-versa.

One of the academic interventions the school offered to deaf children was the designing and implementation of the Individualised Education Plan (IEP). The study found from the psychologists that an IEP was a programme that identified the gap between the weaknesses and the strengths of the learner and addresses it (Roppolo, 2016). The study found that an IEP ensures that each child with disabilities is offered an education programme which suits his/her particular needs. It emerged that an IEP recognises individual differences among deaf children, enables the teacher to plan for their children's individual needs and ensures that these needs are met through its implementation. This definition was consistent with the definition from Individuals with Disabilities Education Act (IDEA), (2004). Consistent to the findings was the provision that deaf children should receive educational programmes suitable for their individual needs so that they develop socially, intellectually and morally to their fullest potential through IEP while they learn in environments adapted to suit their particular needs, the Least Restrictive Environment (LRE) (IDEA, 2004). In concurrence, UNESCO, (1994) and UN-CRPD, (2006) call for reasonable adaptations, in terms of the curriculum, to be made for children with disabilities to benefit the most out of primary school systems. The study also found that it was the duty of the specialist teacher and multidisciplinary teams to design an IEP for each deaf child in his/her class. Studies have indicated that a multidisciplinary team comprising specialist personnel in their respective fields like occupational therapists, speech therapists, doctors, parents and teachers among others should design an IEP (IDEA, 2004; Roppolo, 2016). It emerged from the study that the IEP was designed in line with the outcome of the academic interventions as suggested by the psychologist. This

finding was consistent with the recommendations of IDEA, (2004) that an IEP must be designed in line with findings of psychological assessments.

Another academic intervention was universalising Sign language through using Zimbabwe National Sign language dictionaries. It emerged that there was need to universalise Sign language so that those who used it in Zimbabwe would use it at the same wavelength to avoid communication challenges among consumers. In concurrence, Ntinda et al., (2019) found that Sign language should be universalised to enable users to utilise it without challenges. It also emerged that the Sign language dictionaries were disbursed by SPS free of charge. Observations showed that at the selected school, uncountable Sign language dictionaries were available. Contrarily, studies have shown that some teachers and school administrators lamented the lack of Sign language dictionaries which were requested from the MoPSE to no avail (Aro & Ahonen 2011; Musengi & Chireshe 2012; Chimhenga 2016). The inconsistency could be due to the fact that when these studies were conducted SPS had not started supplying Sign language dictionaries to schools. For studies that were conducted outside Zimbabwe, it could be that the provision of Sign language dictionaries was not a priority for the states.

Examinations were modified with comprehension texts having been shortened to suit the language needs of deaf children. It emerged that psychologists assessed the needs of the deaf children and established that those who required the examinations with modified language were to get them. The study found that examinations in the past were not modified but when they were finally modified it was done with various stakeholders, including the specialist teachers, being roped in to work on examination modifications. The study found that academic examinations for the deaf children were the same as those of the hearing children except that the language was modified to suit the language needs of the deaf children. The meaning and sense, however, remained the same as those of comprehension texts of mainstream candidates. The study also found that specialist examiners, who were familiar with telegraphic language, were identified to mark the examination scripts of the deaf children. The psychologists indicated that the examinations for deaf children also had modifications in terms of time allowance up to a quarter of the writing time. This is consistent with CIET, (1999) that found that examinations for the deaf children had a time allowance of 25%, when it was needed. More to this, the DZT, (2013) recommends further adjustment in terms of subject based signs to avail all signs to be used in respective subjects during

teaching and learning as well as in assessments of deaf children since Sign language was their primary or native language. In line with this, Title 3 Article (8) of the 2000 *Loi Portant Statut, Protection etPromotion de la Personne Handicapee* says that children with disabilities should benefit from certain respective adaptations in examinations like time allowance and sign language for Deaf children (Repulique Centrafricaine, 2010). There are similarities in the institution of examinations in Zimbabwe and CAR in terms of time allowance although the 2000 *Loi Portant Statut, Protection etPromotion de la Personne Handicapee* does not specify the time that is allowed for each examination.

Deaf children mainly learnt in the resources units. The study found that deaf children mainly learnt in the resource units but also occasionally attended mainstream classes. It also emerged that deaf children also attended mainstream classes for practical subjects like ICT or Home Economics. In line with this, Gudyanga, et al., (2014) and Majoko, (2019) found that children with disabilities may be placed in part-time resource units, self-contained classrooms or full-time inclusion with the blessings of the department of SPS. Consistent with these findings, the study found that deaf children attended classes in resource units and occasionally in mainstream classes. Deaf children also indicated that they sometimes learnt in the mainstream classes although they had some communication challenges in those classes. This was consistent with literature that deaf children had communication challenges in schools and mainstream teachers wanted them to learn in resource units (Musengi and Chireshe, 2012 DZT, 2013; Ntinda, et al., 2019).

One of the administrators, however, revealed that they sent the deaf children home when the specialist teachers were not at school. The administrator indicated that in the absence of specialist teachers they dismissed the deaf children so that they were not found loitering in the school due to lack of attention from teachers who were not able to sign, teach or communicate with them. This finding was consistent with literature that deaf children had challenges of negative attitudes held by regular classroom teachers and head teachers towards their education and even enrolment in primary schools resource units (Musengi & Chireshe, 2012; Makhopadhyay & Musengi, 2012). The sending away of the deaf children in the absence of the specialist teachers could be a sign of negative attitudes towards deaf children's education in the school. However, this administrator was an outlier since all other participants indicated that deaf children attended mainstream classes in the absence of specialist teachers.

The administrators revealed that both the school and the community welcomed the education of deaf children in the school. This was inconsistent with literature that found that schools were ranked according to summative examinations, hence, administrators were uncomfortable with enrolling deaf children in their schools for fear of lowering their pass rates (Adoyo, 2007; Thwala, 2015). The inconsistency could be due to differences in cultures since this study and literature were conducted in different settings which could have different cultural backgrounds. The study found that Parents welcomed the education of their deaf children in the school because neighbours would not be able to tell that their children were deaf. They would just see them like any other child going and coming from school since deafness was a silent disability. Consistent with the findings, Mwangi and Orodho's (2014) study in Kenya and Sibanda's (2018) finding in Zimbabwe reveal that some parents hold attitudes towards their deaf children basing on the cultural beliefs which are associated with the causes of disability. Moreover, their attendance of local primary schools would lead to their acceptance by the school and the community in general after realising their capabilities (Kretzmann & McKnight 1993; Bunch, 2008; Chireshe, 2013). Contrarily, studies have shown that mainstream teachers wanted deaf children to be taught by specialist teachers in resource units and in special schools (CIET, 1999; Musengi & Chireshe, 2012; Kaputa & Charema, 2017). The inconsistency between literatures could be due to different samples that were used in the studies in which participants had different cultural views. Similarly, the inconsistency with the finding could be as a result of the communities in which the studies were conducted. For instance, Musengi and Chireshe, (2012) conducted their study in the rural area while this study was conducted in the urban area. The people in the rural area and those in the urban area may have different cultures leading to different beliefs. Thus, while literature shows that parents were not happy with their deaf children learning in the primary schools, the finding of this study reveals that parents were happy and comfortable with their deaf children being enrolled in this school. However, the CIET, (1999) and Alasim, (2018) note that the increased enrolment of deaf children in schools is attributed to the financial capacity of parents to meet exorbitant fees from special schools, expectations of parents for their children which could be similar to those for hearing pupils or technological advancements like cochlear implants and other forms of hearing aids although a few deaf children had hearing aids (Alasim, 2018).

The psychologists and administrators indicated that the curriculum that was used to teach the mainstream children was the same curriculum that was used to teach deaf children. The only

difference was that the curriculum for the deaf children had modified language. The key idea was that the same curriculum and examination were used for both the deaf and hearing children. The finding is consistent with SREOP, (1993) and UNESCO, (1994) which say that curriculum for primary schools that include deaf children should be adaptive, giving room for modifications or differentiations. However, studies conducted were inconsistent with the findings of this study. Literature has revealed that primary schools that include deaf children used regular school curricular which were not modified to suit the diverse needs of deaf children in their schools (CIET, 1999; Adoyo, 2007; Thwala, 2015; Desalegn & Worku 2016; Sibanda, 2018). Teachers used unmodified curriculum because they lacked knowledge of adapting them (Musengi & Chireshe, 2012, Thwala, 2015; Sibanda, 2018). Contrarily, the study found from teachers that unmodified mainstream curriculum was used to teach deaf children. It emerged from the teachers that the modification of the curriculum was still on the lips of MoPSE (Adoyo, 2007; Singh, 2015; Sibanda, 2018). However, the Zimbabwean Chief Education Officer's Circular No. 3 of 1989 emphasises adapting the regular school curriculum and methods to suit the needs of children with disabilities (CIET, 1999). In line with the findings, primary schools used mainstream curricular because they lacked skills to adjust them to suit the individual needs of the children (SREOPD, 1993; UNESCO, 1994; UNCRP, 2006; Musengi & Chireshe, 2012, Thwala, 2015).

The psychologists revealed that the schools were given the same syllabi and it was the responsibility of the specialist teacher at his/her school to modify the curriculum to suit the needs of the deaf children in their respective classes. However, literature has shown that mainstream teachers lack the skills needed to adapt the curriculum because they were not trained in deaf studies (Musengi & Chireshe, 2012; Thwala, 2015 Desalegn & Worku, 2016; Magano & Mapepa, 2018) and it is worse in the absence of the specialist teachers (Musengi and Chireshe, 2012; Chireshe, 2013; Thwala, 2015; Majoko, 2019). Singh, (2015) found that a scenario where each teacher was modifying the curriculum for his/her class deprived the deaf children in different classes or schools of a common curriculum. A related finding from teachers from the FGDs was that during Zimbabwe Schools Examinations Council (ZIMSEC) examinations, Sign language interpreters were availed to offer Sign language services throughout the examination process. It emerged that the Sign language interpreters would sign each question and wait for all the deaf candidate to complete answering that question before they proceeded to sign the next question. In line with the finding, literature revealed that the deaf children required the services of Sign language interpreters

in all academic situations rather than in examinations only (SREOPD, 1993; Adoyo, 2007; UN-CRPD, 2006). Contrarily, Musengi, et al., (2012) indicated that some teachers were worried that deaf assistants could spoon feed deaf children with answers.

The unmodified mainstream curriculum was not suitable for the education of deaf children because it was not adapted to suit their needs. The study found that it did not accommodate 'the more time' both teachers and the deaf children needed to explain and comprehend concepts respectively. In line with the findings, Sibanda, (2018) observed that regular school curriculum was never meant for inclusive education but for learners who use typical means to access information, hence, it should be adapted, modified or differentiated so that it was not a barrier to the education of deaf children in primary schools. Moreover, literature from South Africa has shown that the successful implementation of Inclusive Education does not only depend on the provision of resources but strongly on modified and accommodative curriculum (Donohue & Bornman, 2014). The study found that educating deaf children in mainstream classes was difficult because of the large class sizes of at least fifty-eight mainstream learners plus deaf children allocated to such classes. The study found that it was difficult to attend to individual needs in such large classes. This is consistent with literature which has shown that teachers do not attend to individual needs of learners in their classes due to large class sizes (Chireshe, 2013; Thwala, 2015; Majoko, 2019). The deaf children were treated like mainstream learners ignoring that they had other needs like adjusted language or more time to understand concepts delivered to them in a language other than Sign language or even extra instruction in some cases.

The school had shifted from the old to the new curriculum which was commonly referred to as the Competence-Based Curriculum (CBC). It emerged that the old curriculum was examination-oriented, hence, it disadvantaged deaf children, while the new curriculum focused on competencies, skills and attitudes of the candidate. It was argued that deaf children had challenges with the language that was used in examinations, hence, they performed poorly. However, studies have shown that primary schools that include deaf children use their regular schools' centrally designed and extensive curricular which were examination oriented (Adoyo, 2007; Thwala, 2015). The inconsistency between findings and literature could be due to the change of the curriculum by Zimbabwe. The CBC was relatively new such that when these studies were conducted it was not yet quite operational. It emerged that the CBC assessment could even be conducted through

observations or communication through a language that the learner was comfortable with. Deaf children could perform better in such assessments. Perhaps this curriculum came as a response to the UN-CRPD's (2006) call for countries to ensure that children with disabilities have a right to education with a curriculum that develops their human potential, respect for human life, self-worth and dignity, a curriculum that is not exclusive but targets the development of personality and talents to their fullest potential. It emerged from the administrators and the psychologists that the CBC focused on skills, attitudes and competencies. Thus, the curriculum focused even on the skills which were not examinable in the formal assessments. These included skills even in sports. If the CBC was effectively implemented, it was going to benefit the deaf children. It also emerged from the administrators that the old curriculum focused on competencies, skills and attitudes but were only examined through formal examinations without production or coursework. However, there was inconsistency between findings and literature which showed that assessment basing on the mainstream curriculum was examination-oriented leading to ranking of schools (IDEA, 2004; Adoyo, 2007; Thwala, 2015). Again, this inconsistency was probably due to the new curriculum that was recently adopted by Zimbabwe. Zimbabwe adopted this curriculum after these studies were conducted. In this study, however, schools were not being ranked but apparently teachers still had targets in the form of examinations pass rates and daily evaluative exercises. However, it emerged that the administrators were not sure how assessment under the CBC was going to be implemented. The administrators indicated that they were not given a blueprint on how the assessment was supposed to be done. What they knew was that the CBC assessment focused on competencies, skills and attitudes and coursework constituted thirty percent while examinations contributed seventy percent of the total assessment in a subject. The administrators, therefore, presented their understanding of the CBC assessment procedures not from the blueprint. It emerged from the administrators that the CBC assessment for public examinations was going to be implemented in the year 2021. This could imply that before 2021, the school would be implementing CBC assessment in line with how they understood it. The study found that the administrators were not sure of the language that was used to assess deaf children during local CBC assessment and indicated that teachers knew better. This could imply that the administrators were out of touch with some academic experiences which deaf children were exposed to at their school.

Thirty minutes were the allocated time for each subject period for both deaf children in the resource units and mainstream classes. Consistent to these views were the arguments of an administrator and a teacher who claimed that thirty minutes were not enough to effectively deliver a lesson to the deaf children. The participants indicated that deaf children needed more time to learn concepts which were supposed to be in concrete form. The teachers indicated that teaching the deaf children needed patience and in the resource rooms they were basically patient and took their time to fully explain their concepts. In concurrence with the finding, studies confirm that each lesson was thirty minutes long and that teachers did not attend to individual differences due to restrictive time-tables in terms of time as well as due to large class sizes of up to one hundred learners for a teacher (Musengi & Chireshe, 2012; Chireshe, 2013; Thwala, 2015; Majoko, 2019). Furthermore, mainstream teachers felt that deaf children may best be taught in resource units with fewer numbers of learners leading to specialist teachers' capacity to give them individual attention (Musengi & Chireshe, 2012). This made it difficult to complete the syllabus if it was not adapted to meet the time needs of deaf children (Thwala, 2015). It emerged from one of the participants who was a specialist teacher that the administrators and other supervisors were aware that deaf children required more time to conduct their activities which was the reason why they allowed more time for their examinations. The administrators and teachers lamented that there was no syllabus designed specifically for deaf children thereby concurring with earlier findings from teachers that there was no adapted curriculum for the deaf children. This is consistent with literature that mainstream teachers and administrators indicated that the syllabi were not fully addressing the needs of deaf children (Musengi & Chireshe, 2012; Donohue & Bornman, 2014). Literature further revealed that syllabi did not cater for individual differences with regard to additional instruction for those needed it, since it is difficulty to do so within the thirty minutes allocated for each lesson period as well as large class sizes (Musengi & Chireshe, 2012; Chireshe, 2013; Thwala, 2015; Majoko, 2019).

Contrarily, one of the administrators revealed that thirty minutes were enough for the teachers to fully explain concepts as well as to give individual attention to the deaf children during the teaching and learning process. The administrator argued that thirty minutes were the ideal time allocation for each lesson period for the teaching and learning of the deaf children arguing that deaf children lost attention if the lesson was more than thirty minutes long. This view was inconsistent with a study by Thwala, (2015) who noted that there was no learning progress in classrooms since there

was need for more time to explain concepts, especially to a large number of learners who needed individual attention and extra instructional support services (UNESCO, 1994). The inconsistency between literature and the views of the administrator could be because the administrator did not clearly observe how the deaf children were taught, considering that she had no qualifications in deaf studies. She was also an outlier since all the teachers and another administrator revealed that thirty minutes were not enough for a lesson for the deaf children. Although she was an outlier, there is need for further studies along these sentiments. The psychologists, however, refuted that deaf children lost attention when lessons were more than thirty minutes long. They argued that being deaf alone would not cause one to lose attention in thirty minutes when other children were still paying attention unless there was comorbidity of deafness with Attention Deficit Hyperactivity Disorder (ADHD). In such a scenario, one would not generalise failure to pay attention to the deaf children but to ADHD.

An ideal class of deaf children had a minimum of five and a maximum of ten deaf children. The psychologists revealed that a maximum of ten deaf children in a class was a manageable number. This allowed the teachers to give each child contact time during lessons. Literature was silent on the exact size of class for the deaf children but recommended small and manageable classes (Musengi & Chireshe, 2012; Chireshe, 2013; Thwala, 2015; Majoko, 2019). The study found that the numbers of deaf children in resource units were smaller while there were larger numbers of fifty-eight or more pupils in the regular classrooms. Indeed, literature has shown that mainstream classes had large class sizes ranging from forty to one hundred pupils per teacher (Chireshe 2013; Thwala, 2015; Sibanda, 2018; Majoko, 2019). Studies found that due to large mainstream class sizes, mainstream teachers just gave evaluative exercises to deaf children without giving them individual attention (Chireshe, 2013; Thwala, 2015; Sibanda, 2018; Majoko, 2019).

On early intervention and identification, the study found that they reduced the impact of deafness. It emerged from the psychologist that if identification and intervention were instituted early, the conditions of the deaf children were going to improve and the deaf children were going to be independent. It also emerged from the psychologists that they had a slogan or motto, 'Catch them young' but the goals of the slogan were derailed by the parents who were hiding their deaf children. The participant said that the motto 'catch them young' was meant to identify children with disabilities early for early intervention. However, observations from the biographic data of the deaf

children revealed that deaf children attended school late. Psychologists, however, revealed that the deaf children were treated like any other child in terms of enrolment. Formal learning started at ECD, hence, the deaf children's enrolment also started at ECD like the hearing children, at the age of four. Antia et al., (2009) found that widespread implementation of early identification and early intervention for deaf children in the primary schools led to the development of language and communication skills within the range of their hearing counterparts. Consistent to the findings, Musengi et al., (2012) found that deaf children entered into school at the age of six or seven years when they were already behind their non-deaf peers in terms of language. The study found that early identification and intervention were derailed parents who hid their deaf children for cultural reasons until they were identified as late as twenty-two years, hence, they were forced to write the ZIMSEC examinations before they were ready or to take the non-formal route to education thereby concurring with Musengi and Chireshe, (2012), DZT (2013), Mwangi and Orodho (2014) and Sibanda (2018). In line with this, literature has shown that successful education of deaf children in primary schools depends on early identification and early intervention, and early stimulation and assessment of children with disabilities at a tender age (SREOPD, 1993; UNESCO, 1994; UN-CRPD, 2006; Antia et al., 2009).

Hiding the deaf children had adverse on their lives. It emerged from the psychologists that the deaf children required the services of several disciplines which they could not access if they were hidden. The study found from the psychologist that they worked with partners in the Ministry of Health and that some deaf children who got the services of these partners early were able to talk, despite being deaf. This was consistent with literature that revealed that the education of the deaf children in primary schools required multidisciplinary teams to manage the various needs of deaf child (Roppolo, 2016; Majoko, 2019). The psychologists revealed that there was a need to identify the deaf children early and send them to these multidisciplinary teams so that they could work to improve on the conditions of the deaf children. It emerged from the participants that if the deaf children were hidden they were not going to access services from these other disciplines or they were going to access them after the critical ages of the development of the required skills. The findings were inconsistent with literature that found that human resources in other departments related to SNE were not quite connected with the schools as well as deaf children posing challenges on the referrals made by the schools (Makhopadhyay & Musengi, 2012). The management of the deaf children's needs was likely to be compromised in such scenarios. Detachment of the other

professionals from the schools was perhaps because of professional ethics where the other professionals were not teachers and did not value attending to the children's needs.

The school offered deaf children syllabi with all the subjects offered in the primary school, except Shona, a third language after their native Sign language and English, textbooks and stationery. The administrators indicated that the school offered the deaf children syllabi although they were mainstream ones that were not modified to meet the needs of the deaf children. Consistent with the findings, Musengi and Chireshe (2012); Musengi et al., (2012); Thwala (2015) found that some primary schools offered deaf children syllabi but they were not meeting the needs of the deaf children, worse still when implemented in large class sizes. Literature revealed that primary schools lacked resources like textbooks but they prudently utilised the available ones (Tshifura, 2012; Chimhenga, 2016). This is in line with the sentiments of UNESCO, (1994) which calls for the utilisation of available resources for the success of the education of children with disabilities in schools. Generally, resources for the education of deaf children were not enough.

It also emerged that the school allocated deaf children to the resource units with specialist teachers, with occasional inclusion into the mainstream classes. In line with this finding, literature revealed that, "[o]wing to the particular needs of deaf and deaf/blind persons, their education may be more suitably provided in special schools or special classes and units in mainstream schools" (SREOPD, 1993, Rule 6, section 9; UNESCO, 1994:18). Thus, literature recognises the education of deaf children in resource units. The study found that the placement of deaf children in resource units was a directive from SPS. This is consistent with studies that revealed that teachers and administrators wanted the deaf children to be taught by the specialist teachers in resources units (CIET, 1999; Charema, 2009; Musengi and Chireshe, 2012; Mukhopadhyay and Musengi, 2012; Kaputa and Charema, 2017; Ntinda et al., 2019). It also emerged that the school had lighting in the resource units which was availed to deaf children as long as electricity was available. The study found that lighting was necessary to allow deaf children to visualise well since they were visual learners.

Deaf children integrated well in the primary school. It emerged from the teachers that the deaf children learnt to socialise with the hearing people in the school, hence, they were going to extend this to their communities. They accepted other cultures both in the school and during the Danhiko

Paralympic games. Consistent to this finding, literature has shown that children in inclusive primary schools accept each other when they realise each other's capabilities and when they continue to stay together. Antia, et al., (2009) and Chireshe, (2013) found out that attitudes and social acceptance have improved for children with disabilities in general and for those in primary schools in particular. The improvement of social acceptance and attitudes could be attributed to inclusion in primary schools (Antia, et al., 2009; Chireshe 2011; Chireshe, 2013). This could mean that inclusion in primary schools enabled children with differences to get used to each other and eventually accept each other in every respect as they learnt to adjust to the way of life of their peers.

The school had successes in the teaching and learning of deaf children. It emerged from the teachers, administrators and the psychologists that the deaf children understood maths concepts better than any other subject or concept, particularly those in the mechanical form where they could be few language barriers because of few or no words in the problem. This was consistent with the findings Marschark, Shaver, Nagle and Newman's (2015) study that revealed that mathematics test results were better than English test results. Similarly, Antia, et al., (2009) revealed that many deaf students in primary schools performed average to above average in reading and language writing and above average in Mathematics. Thus, the deaf children performed better in Mathematics than in any other subject. It emerged that the deaf children had challenges with languages other than their native Sign language. Deaf children did well in Mathematics because the subject had few or no words. This was a success for deaf children in the school. Indeed, consistent with literature, during the interview process the deaf children indicated that they loved Mathematics more than any other subject. Observations of the mark schedules from administrators also showed that the deaf children were performing well in Mathematics. Observations of the mark schedules further showed that some deaf children were doing better than the hearing children in Mathematics as revealed by Antia, et al., (2009). Their performance was a sign that they could compete with hearing children in academic performance and, in fact, in all school activities like sports, drama or general work at the school (Kretzmann & McKnight, 1993). It also emerged from the teachers that deaf children were also good at drama and sports. The participants indicated that deaf children were good in sporting activities, drama and other areas. The other areas included being prefects, class monitors and team captains and general work at the school. If school prefects

were chosen basing on meritocracy as revealed by the administrators, then deaf children were successful both academically and socially.

Parents were no longer hiding their deaf children. It emerged from the participants that it was important that socially, parents no longer hid their deaf children in their homes. The study found from the psychologists, administrators, teachers from FGDs and the Deaf teacher that the parents had a habit of hiding their deaf children in their homes for cultural reasons until perhaps they were reported to law enforcers, either from the community or from the government. When the parents realised that there was a school enrolling deaf children they decided to enrol theirs too.

The study found that the constitution of Zimbabwe was the only legislation that constitutionalised the existence and use of Sign language as an official language in the country (Constitution of Zimbabwe [Amendment No. 20], Act, 2013). Deaf children had a constitutional right to Sign language, both in social and academic spheres. This is consistent with the declaration of Sign language as the constitutional language of preference for deaf children in learning and social situations by the DZT, (2013). This is also consistent with the Director's Circular No. 2 of 2001 that directs schools to introduce, teach and use Sign language in schools. The study, however, found that these pieces of circulars could be overridden by the emergency of new ones. The study found that that policy issues did not address a specific group of learners. Such policies, however, were not specific on the needs of deaf children and their education in primary schools. These policies were, therefore, based on a one size fits all, especially for teachers who had not undergone Deaf Studies. The study found that there was no policy for the education of the deaf children but it was in the process of being crafted and it was still not clear what its provisions were going to be. These findings were consistent with literature which has shown that Zimbabwe has no clear policy on Inclusive Education in primary schools and is encouraged to formulate one which should deal with issues of teacher education curriculum, teaching and learning curriculum in primary schools, the development and learning of Zimbabwe Sign language and the provision of assistive devices among others (CIET, 1999). Contrarily, Sibanda, (2018) notes that Zimbabwe has laws and policies meant for Inclusive Education in primary schools but they are not clear on the exact procedures to be taken. Zimbabwe has no clear policy as required by the international policy documents like the SREOPD, (1993), UNESCO, (1994) and UN-CRPD, (2006). It could mean that the current mainstream policies existed even before the promulgation of policies for the

education of deaf children and were later presumed to cover deaf children. The interpretation of such a piece of legislation may rest with the reader leading to as many interpretations as the number of readers.

Research question 3: What are the psycho-social experiences of deaf children in primary schools?

Deaf children had psychological and audiological assessments before they were enrolled into the school. The study found that psychological and audiological assessments complemented each other. It emerged that before deaf children were enrolled in the school, they were assessed by the educational psychologists to evaluate their intellectual capability and establish the educational intervention needed. The study found that assessments were purely psychological and were based on intellect and comorbidity. It emerged that in the case of comorbidity, placement was based on the dominant disability. The study found that audiological assessments were meant to establish the hearing acuity of the deaf child. The study also found that an audiologist had resigned leaving the department without one. However, literature has shown that SPS had depleted manpower in the form of audiologists and they were detached from the deaf children (CIET, 1999; Makhopadhyay & Musengi, 2012). The study found that department of SPS had District Remedial Tutors (DRT) who were monitoring the placement of deaf children to the different schools in order to check on their progress and to establish how best they were benefitting from the system. The DRT was responsible for the monitoring the academic, financial and psychosocial welfare of learners. The DRT was an instrumental figure in the education of vulnerable learners for the district. This findings were consistent with Majoko's (2019) revelations that SPS was responsible for assessments and placement of children with disabilities into school. This is also consistent with the CAR 2000 *Loi Portant Statut, Protection etPromotion de la Personne Handicapee*, translating to Law for the protection and promotion of Disabled Persons, the State is responsible for controlling and screening of children with disabilities (ACPF, 2011). After the screening of the deaf children in CAR, they were placed in schools that could offer them relevant services, like what was being done in Zimbabwe. Deaf children were only in schools that could manage their needs rather than the nearest school being adjusted to meet the needs of the local children as required by the Education Act [Zimbabwe], (1987). When deaf children are required to attend schools that suit them, they may not attend schools nearest their homes, that is, school they could

have attended if they had no disabilities (the [Zimbabwe] Education Act, 1987; UNESCO 1994). The findings were inconsistent with SREOPD's (1993) and UNESCO's (1994) call for schools to be adapted to the needs of children with exceptionalities and not vice-versa. Similarly, D'Alessio, (2011) found that Italy practises *Inserimento Selvaggio*, literally translating to wild integration, since they practised integration without changing the learning environment to suit the needs of children with disabilities at the same time not checking whether students with disabilities performed better under integration or in the mainstream schools set-up. The study found that SPS was concerned with whether the deaf children were benefitting from the set academic interventions or not. They were not worried about whether the set academic interventions were in the mainstream setup or in the resource units. Thus Zimbabwe and Italy practised similar systems in the education of children with disabilities in primary schools.

Parents, teachers, hearing children and administrators accepted deaf children in schools. It emerged from the teachers that the school community felt comfortable working with deaf children and enrolling them at their school. The deaf children were accepted socially and academically at the school despite the communication challenges that were between the hearing school community and the deaf children. It emerged from the participants from FGDs that the school had taught children to accept each other. Consistency with the findings was that children with disabilities were being accepted in schools and the attitudes of the hearing people had changed to being positive (Chireshe, 2013; Kaputa and Charema, 2017). The consistence between the literature and the findings could be due to similar cultural views between the participants used in the literature and those used in this study leading to similar attitudes. Contrary to these findings, some studies have shown that deaf children had challenges of negative attitudes held by regular classroom teachers and administrators towards their full-time inclusion and even enrolment in self-contained classrooms in their schools (Musengi & Chireshe, 2012; Makhopadhyay & Musengi, 2012). The inconsistency could be due to the fact that the community from which this study was carried had accepted deaf children as their partners while studies in the literature were conducted in communities that subscribed to the medical model of disability and viewed the deaf children as having a deficit and, therefore, needing a separate school.

It also emerged from the teachers that deaf children attended the school because their parents had no money to send their deaf children to special schools. The study found from the teachers that the

parents of deaf children had no money to send their deaf children to residential or special schools even if they wanted to do so. In concurrence the CIET, (1999) notes that there was per capita grant for all children in schools as well as a government education grant, managed by Social Welfare Department, for every child with disabilities in schools although parents lament the money was not enough for boarding institutions which offer better academic services to deaf children. To this effect, the CIET, (1999) notes that children with disabilities got a meagre grant from government which could not cater for their boarding fees which were very high and prohibitive. They could not afford exorbitant fees charged by the special schools. These schools had teachers who were skilled and qualified in deaf studies. Thus, the parents were compelled to send their deaf children to mainstream school by their financial limitations and lack of adequate state-funded education.

The relationships between deaf children and their hearing peers were strained mainly by misconceptions and failure to resolve conflicts due to lack of understanding of each other during communication. Some conflicts between deaf children and the hearing people arose as a result of misconceptions due to language challenges. DZT, (2013) notes that misunderstandings arose because the deaf children were not able to communicate orally while teachers and hearing peers could not sign although some hearing peers were eager to sign and help them in communicating with teachers and hearing peers who could not sign. This suggests that there were hearing children who had positive attitudes towards the deaf children and Sign language. In this study, however, the mainstream teachers, the administrators and the hearing children were not able to sign. Although the relationships between the deaf and hearing children were sour, literature, however, has shown that it is healthy to have social relationships for both deaf and hearing children (Batten, Oakes and Alexander, 2013). Friendships and social interactions are associated with social well-being, a factor that suppresses stressors and developmental challenges (*ibid*). Literature revealed that teachers and hearing children accepted and had developed positive attitudes toward deaf children in their classes and in the schools (Chireshe, 2013; Batten et al., 2013; Alasim, 2018). These views were inconsistent with this finding of the study probably due to the relationships that existed between the hearing and the deaf children in the set ups of the studies. Maybe the hearing children at the schools where data were collected for literature had positive attitudes towards Sign language and could sign, hence, there were no misconceptions between them and the deaf children. Kaputa and Charema, (2017) and Alasim, (2018) concur that the greatest barrier to inclusion, be it social or academic, is negative attitudes. It emerged from the teachers that when misunderstandings

between the deaf and the hearing children arose, they were taken to the specialist teachers to resolve the conflicts. In concurrence with the finding of this study were Deaf children's revelations that their communication challenges were eased when specialist teachers were present to sign to those who could not sign but they were not readily available for their rescue due to other commitments (Musengi & Chireshe, 2012). This could mean that there were no hearing children who were willing to sign and assist with communication between the deaf children and the teachers as noted by the DZT, (2013). This meant that mainstream teachers could not sign to communicate and resolve conflicts between deaf and hearing children due to their inability to sign. The teachers revealed that they were only given survival skills by the specialist teachers to communicate with the deaf children, hence, they could not go beyond basic greetings. In line with this, UNESCO, (1994) and the CIET, (1999) state that trainee teachers should be oriented to inclusive education for deaf children during their pre-service training programmes, thereby being exposed to the needs of deaf children and the material resources that may be used in their teaching and learning.

Contrarily, one of the administrators revealed that he felt that educating deaf children at the school was not proper. He revealed that the best option for educating deaf children was in exclusive schools where all the children were deaf and everyone was able to sign. The findings were consistent with Dudley-Marling and Burns' (2014) observations that in the USA some teachers and superintendents suggested that children with disabilities should be educated in segregated institutions considering the negative attitudes they encounter in the regular classroom (. Further consistency with findings emerged when Adoyo, (2007); Mukhopadhyay and Musengi (2012), and Gudyanga, et al., (2014) who confirmed that head teachers preferred that deaf children be educated in self-contained classrooms or institutions where they were taught by specialist teachers. This could explain why the selected school educated the deaf children mainly in the resource units. Nevertheless, UNESCO (1994) says that local administrators and school heads play key roles in making schools Least Restrictive Environments (LRE) for deaf children. This could mean that instead of creating LRE for deaf children in the schools, the school administrators viewed enrolling the deaf children at their schools as a drawback to their efforts of raising the standards of their schools. However, the administrator's views were consistent were UNESCO and SREOPD's views that, "[o]wing to the particular needs of deaf and deaf/blind persons, their education may be more suitably provided in special schools or special classes and units in mainstream schools"

(SREOPD, 1993, Rule 6, section 9; UNESCO, 1994:18). Although the administrator was an outlier, he was consistent with literature.

Furthermore, the study found that deaf children experienced socialisation with other hearing children at school, but it was not effective. It emerged from the teachers and the deaf children that deaf children did not socialise with hearing children due to communication barriers. The participants revealed that the deaf children were always on their own. This lack of socialisation was attributed to communication barriers. However, Xie, Potmesil and Peters, (2014) confirmed that augmented hearing improves oral communication skills, general communication skills, daily living skills, socialisation, interaction initiation and eventually participation in both social and academic spheres, although communication on a one-to-one basis was better than communication with a group. Most deaf children at the selected school had no hearing aids and those who had them were apparently not benefitting from them. Maybe the poor socialisation that existed between the deaf and the hearing children was due to lack of augmented hearing to improve their oral communication skills, socialisation and academic participation. Batten et al., (2013) say when deaf children have close relationships with hearing peers, they are likely to have increased self-esteem, emotional regulation, successful adjustment to academic issues and positive attitudes towards their academic studies. It emerged from the participants from the FGDs that hearing children used a spoken language while deaf children used Sign language leading to misconceptions and quarrels which the deaf children always won due to support from teachers. In concurrence with findings, studies have shown that the deaf were not able to communicate orally while teachers and hearing peers could not sign leading to lack of communication between the two parties (Musengi & Chireshe, 2012; DZT, 2013). The study found that the teachers regarded the deaf children as 'abnormal' and useless, hence, they needed protection against the 'normal' children, thereby holding negative attitudes towards their academic and social inclusion (Gudyanga, et al., 2014). This is, however, contradicts the theory of ABCD which says the strength of ABCD lies in the premise that communities come up with their development processes through identifying and mobilising existing, but often unrecognised, community assets (deaf children in this scenario), leading to responding and creating local economic opportunities (Kretzmann and McKnight 1993; ABCD Toolkit). Surely, no one would have positive attitudes towards something they considered 'abnormal'. The study found that the deaf children developed defence mechanisms against hearing children's mimics and dramatised to portray that they were human beings just like the hearing

people. The teachers revealed that although the hearing children were not able to sign they got the meaning of the drama from watching the signs and actions.

Deaf children in the school participated in exclusive sports. It emerged from teachers and administrators that the deaf children participated in exclusive games in the form of Paralympic games. The teachers and the administrators confirmed that the deaf children at the school participated in sporting activities separately from the mainstream school teams. In concurrence, studies have shown that children with disabilities have limited social contacts and were involved in fewer extracurricular activities as compared to their peers without disabilities (Montie and Abery 2011, in Hanass-Hancock 2014). It emerged from the psychologists that the Paralympic games were inclusive in nature in the sense that they included all the people with disabilities. Although the psychologist regarded the Paralympic games as inclusive, it was going to be better if the deaf children were included in sports with mainstream children.

Deaf children enjoyed the Paralympic games. It emerged from the administrators that the deaf children enjoyed the games considering that they were meeting and competing with homogenous groups. The school honoured these Paralympic games by allowing all deaf children to attend the games. The study found from the deaf teacher that the Danhiko Paralympic games were one of the biggest events for the Deaf that gave them the chance to mix and spread their culture. The Deaf teacher confirmed that the Danhiko Paralympic games were attended by both adults, especially men, and children thereby making it one of the biggest congregations for people with disabilities in Zimbabwe. It also emerged from the Deaf teacher that sharing information was very important to keep both the deaf children and adults abreast with news and information on topical subjects like the COVID 19, HIV/AIDS or the machete-wielding gangs in Zimbabwe commonly known as *Mashurugwi*. *Mashurugwi* terrorise members of the public. Indeed, the CIET, (1999) and Sibanda, (2018) show that deaf people had limited access to information, hence, it was necessary that they mixed with all groups of children so that they could access information from these peers. True to literature, the study found that information filtered slowly to the deaf people. Mixing with many children in inclusive sports and other set-ups was going to increase the filtering of information among the deaf children. It emerged from the Deaf teacher that it took time for the Deaf people to have full information on topical issues. Chances were that by the time information got to them, it

was already too late, be it good or bad. It could mean that by the time they got the information, damage could be at an advanced stage.

Communication barriers barred deaf children from practising inclusive sports in the school. It emerged from the administrators that the deaf children could not participate in inclusive sports due to challenges in communication between the coaches, referees and deaf children that hindered inclusive participation of deaf children in mainstream sports. Contrarily, Title 3, Article [8] of the 2000 *Loi Portant Statut, Protection et Promotion de la Personne Handicapee*, the CAR government requires all service providers in education to make necessary adaptations to ensure that children and youths with disabilities participate freely and independently in cultural, sporting and leisure issues (ACPF, 2011). This is a good piece of legislation that recognises that deaf children require leisure activities. This legislation gives deaf children the right to participate in inclusive sports following the necessary adaptations. Another finding from the teachers from FGDs was that the school got trophies from the Danhiko games. It emerged from the teachers that the school was getting trophies that the deaf children won at the Danhiko games. *Deaf children performed well in sports at the Danhiko games* which was a significant contribution to the school's efforts in sport achievement. This is consistent with the ABCD theory that communities can come up with their development processes by identifying often unrecognised assets and mobilising them, thereby responding to and creating local economic opportunities for these often unrecognised assets without focusing on their deficiencies (Kretzmann & McKnight, 1993). Thus, the often unrecognised assets in the form of the deaf children contributed to the school's gaining of sports trophies. The Deaf children in the school were, therefore, significant members of the school society as they contributed significantly to its development ABCD Toolkit; Kretzmann & McKnight, 1993). According to Mcknight and Kretzmann, (1993), ABCD is about community-driven development basing on how to link micro-assets, in this case the deaf children, to macro-ones, mainstream children. This meant that the school could recognise deaf children, mobilise them and include them to be useful and effective members of the mainstream school and beyond (*ibid*). Thus, instead of practising exclusive sports, the school could has mobilised and included the deaf children in inclusive sports to produce magnificent results as evidenced by the trophies that the deaf children brought from the Danhiko Paralympic games.

Deaf children were very good at sports despite being out of the school teams. Observations of the body language of the deaf children during the interview process indicated that they were not happy at being excluded from school sports. It emerged from the deaf children that they preferred attending special schools to this school because of being excluded from sports. They revealed that the issue was a thorn in their flesh. It emerged from the deaf children that they were conversant with the rules and regulations of the games they played. They indicated that they were observant enough not to break the rules and regulations. This confirms the earlier finding from teachers and administrators that deaf children were visual learners.

Deaf children performed duties and responsibilities at the school. It emerged from the administrators, teachers and the deaf children that the deaf children were taking up duties and social responsibilities just like hearing children. The study found that the duties and responsibilities included general cleaning of the school environment, gardening, sweeping, scrubbing, being prefects, class monitors and sports captains, although it was initially revealed that deaf children performed in exclusive sports. Observations revealed that there were two prefects who were deaf, a boy and a girl. It emerged from the teachers that prefects were selected on a ratio basis. Contrarily, literature revealed that deaf children had no leadership posts delegated to them by the school or their teachers (Musengi & Chireshe, 2012). The inconsistency could have been caused by the cultural beliefs of the participants who were involved in the earlier studies. It could mean that the participants of this study embraced deaf children and viewed them as capable of performing leadership roles while those used in other studies viewed the deaf children with lenses of the infirmity model of disability, viewing the deaf children as having a deficit, hence, they could not perform leadership roles. It emerged from the administrators that the deaf children were integral members of the school community as they performed duties and responsibilities performed by hearing children at the school. They contributed to the development of the school community in the same way that hearing children did. According to Kretzmann and McKnight, (1993), community development takes place when members of the community commit themselves to taking part in their community development activities through their gifts and skills. ABCD, according to Kretzmann and McKnight, (1993), views outside assistance for community development as something that does not come easily. It is for this reason that community development is successful when it is from inside to outside. Kretzmann and McKnight, (1993) claim that that is why communities are not built from outside, neither are they built from top to

bottom. Thus, the ABCD views development of a school as best taking place when members value each other as equal members of the community and share responsibilities according to talents to deliver common goals for their community's development. This is consistent with the finding of the study since the deaf children contributed to the development of the school through conducting all the duties that were performed by the hearing children.

It emerged that deaf children received counselling services from both the school and SPS. It emerged from the administrators that the school had a department that comprised teachers who had studied counselling at degree level. The study also found that the deaf children received guidance and counselling from SPS. It emerged that SPS offered guidance and counselling in three areas, namely, learning as a subject with a syllabus, service and programme. They offered counselling services upon request from the school. SPS also introduced Guidance and counselling programmes like the *Boys' Empowerment Movement*, the *Girls' Empowerment Movement* (BEMGEM). It emerged from both SPS and the administrators that they offered counselling services to all children, not exclusively to the deaf children in the school. Contrary to the findings, existing literature has shown that there was weak implementation of provisions for deaf children in Zimbabwe (Charema, 2009; Kaputa and Charema, 2017), hence, they could not realise these psycho-social supports. The study also found that SPS was going a step further by offering counselling services to the deaf children's parents especially those who were in the denial stage so that once they moved out of denial mode they would be cooperative in terms of the educational provisions that would have been proposed by the education system for their deaf child. Thus, deaf children and their parents received counselling services from the school as well as SPS.

The study found from teachers and administrators that the deaf children benefitted from learning in the school. The benefits included socialisation, getting current affairs issues from peers and learning cultural norms and values. Deaf children learnt to socialise with hearing people and learnt to participate in activities conducted by the hearing peer like in sporting activities or sweeping the classrooms after learning these activities through socialisation. The study found that deaf children learnt the cultural norms and values of their hearing peers. They learnt the cultures of hearing people and appreciated how the people lived. Existing literature was consistent with the findings. For instance, Musengi and Chireshe, (2012) found that inclusion in primary schools fosters society's sociocultural norms and values into deaf children while placement of deaf children in

institutions deprives them of acquiring society's sociocultural norms and values. Similarly, Kaputa and Charema, (2017) found that all learning takes place in an individual's society, for instance, we learn to cook, dress, speak, wash or eat from other people in our societies. Thus, inclusion offers all the children in the school the chance to learn from each other as well as the chance to accept each other. Deaf children learnt to live with people who were different from them, apart from hearing people. They learnt the cultural norms and values of the hearing world and learnt to appreciate the differences between themselves and the hearing people especially that they were living among hearing people (SREOPD, 1993; UNESCO, 1994; Musengi & Chireshe, 2012).

It however emerged from the DRT that there were little benefits in having deaf children in regular primary schools as reflected by their poor grade seven public examinations results, blaming lack of use of Sign language by teachers during the teaching and learning of the deaf children. In concurrence with the finding, the DZT, (2013) observed that ZIMSEC Grade seven examinations results for deaf children were poor and lower compared to their non-deaf peers due to lack of Sign language during their teaching and learning sessions. Contrarily, Antia, et al., (2009) revealed that itinerant teachers who taught deaf children indicated that most of their deaf children were competitive academically and met all academic standards in the teaching and learning aspects as well as assessment. It emerged from the DRT that the purpose of going to school was to acquire knowledge, skills and attitudes in the form of norms and values of the society as reflected by the CBC. The DRT revealed that the deaf children were not meeting the aims of the CBC through learning in the mainstream as evidenced by their poor results in public examinations. The DRT attributed this to the lack of specialist teachers who were able to sign proficiently. This is consistent with the assertion by the SREOPD, (1993), Rule 6, section 9 and UNESCO, (1994:18) paragraph 21 that, "[o]wing to the particular needs of deaf and deaf/blind persons, their education may be more suitably provided in special schools or special classes and units in mainstream schools."

Another finding was that the teachers and hearing pupils also benefited from the deaf children in the school. It emerged from the administrators that learning was a two-way process whereby the two parties had to learn from each other. This meant that the school community learnt from the deaf children while the deaf children also learnt from the hearing people. This is consistent with the theory of ABCD which recognises that all members of the community are equal and valuable in its development (Kretzmann and McKnight, 1993). To this effect, the hearing community had

something to learn from deaf children. The absence of the deaf children in this school community could have deprived the hearing school community of some experiences in the Deaf culture. The study found that the school community gained experiences in the life of deaf people by being exposed to the Deaf culture. It emerged from the teachers and the administrators that the school community learnt to accept Deaf people, experiences which could not be gained or accepted by people who had not lived with the deaf people. It emerged from the teachers that they learnt that *Disability does not mean inability*, when they noted that the deaf children could perform all the activities performed by the hearing children as required of them as good as or better than their hearing peers, an observation and knowledge they would not have gained had they not enrolled deaf children. The relationship between the deaf children and the hearing school community was, therefore, symbiotic. The finding was consistent with Wolfensberger's (1983) indication that devalued people were much more likely to experience *the good things in life* if they held socially valued roles than if they did not. Teachers learnt to accept and appreciate deaf children while deaf children did the same, hence, deaf children were likely to be accorded *the good things* that hearing children experienced. The school socially valorised them because of their capabilities (Wolfensberger, 1983; Kretzmann and McKnight, 1993).

Research question 4: What challenges are experienced in offering psycho-social support services to deaf children in primary schools?

Infrastructure for the teaching and learning of the deaf children was not accommodative. It emerged from the teachers and the psychologists that the school had no proper resource units for the teaching and learning of deaf children. The study found that the resource units were not acoustically treated and had no double windows, carpets or curtains among other things. The resource units allowed ambient noise from one resource unit to the next and from mainstream classes which disturbed the teaching and learning process. Contrarily, Gudyanga et al., (2014) found that resource units and inclusive classrooms for the deaf should be acoustically treated. Furthermore, existing studies note that most inclusive schools lack suitable classrooms for the education of deaf children, and that classrooms should be equipped with specific material resources for the deaf, assistive devices together with specialist teachers to give professional services to deaf children (Desalegn & Worku, 2016; Chimhenga, 2016; Hankebo, 2018).

There were sour relationships between the deaf and hearing children. It emerged from the participants that the teachers and hearing children were unable to resolve conflicts between deaf children and their hearing counterparts because they were not able to sign while deaf children could neither speak nor hear leading to language barrier (Musengi & Chireshe, 2012; DZT, 2013; Desalegn & Worku, 2016). The two parties could not communicate. It emerged that the major causes of the conflicts were misconceptions due to language barriers. The study found that specialist teachers were better placed to communicate with deaf children. It also emerged from the teachers that challenges in communication during the teaching and learning of deaf children in the mainstream classes were compounded by the fact that specialist teachers did not accompany their deaf children to these classes. It was likely to be worse in practical subjects like ICT or Home Economics where there could be certain terminologies that the deaf children did not encounter in their common language. There was, therefore, a communication gap that could make teaching, learning and social interaction difficult. Observations showed that the deaf children were at different grade levels making it impossible for the two specialist teachers to accompany each of them to the mainstream classes. This concurs with existing literature that observes that few specialist teachers may not be able to cater for deaf children who may be scattered across grades (Musengi and Chireshe, 2012; Thwala, 2015; Sibanda, 2018; Mapepa & Magano, 2018; Ntinda et al., 2019) leaving some deaf children with regular teachers only who might be incompetent to handle deaf children (Musengi & Chireshe, 2012; Thwala, 2015; Sibanda, 2018). Indeed, the deaf children revealed that only the resource unit teachers were able to sign. In line with this, deaf children indicated that their critical challenge in mainstream classes was communication since the hearing children, administrators and teachers could not sign while the deaf children could not speak (Musengi & Chireshe, 2012; DZT, 2013), hence, both social and academic inclusion were not be effective. It also emerged from the deaf children that the hearing specialist teacher could sign but was not proficient.

Writing was used to counter communication challenges between the hearing and the Deaf. It emerged from the teachers and the administrators that the deaf children and the deaf teacher used writing as an alternative communication system. The deaf children and teacher would even use social media for communication with the hearing teachers and administrators. The hearing people would also respond in writing when communication was directed to them in writing. Communication was aided by writing the information to be conveyed. For the deaf teacher,

communication through social media could not be a challenge because she could afford a social media enabled smartphone. Moreover, by standard, the deaf teacher was better placed in terms of reading and writing than the deaf children, hence, communication with the hearing people through writing was likely to be more effective for the deaf teacher than for the deaf children. This system of communication was a sign of acceptance of each other by the members concerned. This suggested that the hearing school community was not able to sign (Musengi et al., 2012; Thwala, 2015; Desalegn & Worku, 2016; Mamba & Mafumbate, 2019).

The administrators indicated that both specialist teachers were qualified to teach deaf children and could communicate proficiently with them. Contrarily, existing literature confirms that teachers, including specialist teachers, were not able to sign (CIET, 1999; Musengi & Chireshe, 2012; Musengi et al., 2012; Thwala, 2015; Desalegn & Worku, 2016; Mamba & Mafumbate, 2019; Ntinda, et al., 2019). In concurrence, teachers from FGDs, of which the hearing specialist teacher was part, revealed that mainstream teachers and hearing specialist teachers were not able to sign proficiently. The differences between the views of the administrators and those of deaf children and teachers from FGDs were perhaps because administrators considered the qualifications of the teachers at the expense of practical signing. Differences could also have arisen because administrators were not proficient in Sign language, hence, they could not notice that one of the specialist teachers was not quite proficient in signing, especially if she was better than them. The level of signing of the administrators referred to as proficient was probably not proficient to the native Sign language users. It emerged from the DRT that specialist teachers who did not specialise in Sign language were not able to sign proficiently. Indeed, during biodata collection, none of the teachers with Special Needs Education qualification indicated that they specialised in Sign language. The study found from the DRT that the teachers learnt Sign language from the deaf children. In line with this finding, the CIET, (1999), Musengi et al., (2012) and Thwala, (2015) revealed hearing teachers were not able to sign and they learnt Sign language from the very students they taught. It also emerged from the DRT that the only teacher in the district who was able to sign proficiently was the deaf teacher at the selected school. The DRT further revealed that the hearing teachers were using total communication to teach the deaf children. Contrarily, existing literature has shown that the use of total communication, or any other communication which was not Sign language, was not the ideal communication for deaf children in academic and social settings (Musengi & Chireshe, 2012; DZT, 2013; Gudyanga, et al., 2014). Teaching in any other

language which is not Sign language defeats the assertions of the SREOPD (1993); UNESCO (1994); the UN-CRPD (2006) and the; Constitution of Zimbabwe [Amendment No. 20] Act, (2013) that Sign language should be the language for the deaf and is by right their language of choice.

The study revealed that Sign language was taught as a subject. It emerged from the teachers that sign language was taught as a subject. In line with this, Alasim, (2018) found that there was need to introduce Sign language as a subject so that hearing children may also learn basic Sign language for communication purposes with deaf children in academic and social spheres. It was important to introduce Sign language to all children to increase the social and academic participation of deaf children in inclusion (Director's Circular No. 2, 2001; Alasim, 2018). It emerged from the teachers that although they taught Sign language at the school, in most cases they were being taught the language by the deaf children. In concurrence, existing literature has shown that specialist teachers were incompetent in sign language and learnt it from the deaf children they taught (Gezahegne & Yinebeb, 2010; Musengi, et al., 2012; Musengi & Chireshe, 2012; Thwala, 2015). In contrast to the finding that Sign language was taught as a subject, the administrators and the psychologists unanimously revealed that Sign language was not taught as a subject. It emerged from the participants that they were concerned with Sign language for communication purposes during the teaching and learning of deaf children as well as a tool for the deaf children to be functional in social set-ups rather than a subject like any other common language that was being taught. This, however, violets the constitutional right of deaf children to language of their choice (Constitution of Zimbabwe [Amendment No. 20] Act, 2013; DZT, 2013). Hence, Sign language should be given preference for the communication of deaf children in their families, community and schools with the provision of Sign language interpreters, where necessary (SREOPD, 1993; UNESCO, 1994; UN-CRPD, 2006). Contrary to existing literature, the administrators and psychologists viewed Sign language as a language of communication, a functional tool in social circles as well as in the teaching and learning situations, not a subject to be taught.

The resource units were composite classes. The study found from the administrators that the specialist teachers were teaching composite classes. This concurs with existing literature there were inadequate specialist teachers in schools (Musengi and Chireshe, 2012). In the case of the selected school, the specialist teachers had to bunch the deaf children of various grade levels to

form two composite classes which were however within the range of an ideal class for deaf children (Musengi & Chireshe, 2012; Thwala, 2015; Sibanda, 2018). It emerged from the administrators that composite classes were as a result of limited numbers of deaf children that the school could enrol as well as the limited facilities that were available for the teaching and learning of deaf children at the school. These facilities could imply the number and nature of the resource units, hearing aids, or the textbooks, including the availability of skilled personnel. The study found from the administrators that sixteen deaf children made two composite classes. These were manageable figures in terms of giving individual attention to these deaf children as compared to the fifty-eight or more pupils in each class in the regular classes where deaf children sometimes attended classes. The issue of composite classes for deaf children, however, may not be challenge since they already need to be taught as individuals (SREOPD, 1993; UNESCO, 1994; UNCRPD, 2006; Thwala, 2015; Mapepa & Magano, 2018). It also emerged from the administrators that the limited number of the deaf children they could enrol was the cause for exclusive sports. Having teams for deaf children alone defied the logic behind educating them in the school. The purpose of educating deaf children at the school should be holistic inclusion as much as possible. It however emerged from the administrators that although the deaf children could perform well in inclusive sports, no one was able to communicate with them, right from the coaches to the referees. The study found from the administrators that the games were played under rules and regulations which the deaf children could not follow as a result of communication barriers.

One of the findings was that deaf children considered the lack of resources as caused by negative attitudes towards their education considering that they borrowed resources from the mainstream classes. Attitudes were also shown through the crafting of legislation. In concurrence, existing literature has shown that the lack of resources and funding was a sign of lack of political will on the part of politicians and negative attitudes towards the education of deaf children on the part of policy implementers (UNESCO, 1994; Donohue & Bornman, 2014; Kaputa & Charema, 2017; Goh et al., 2018; Sibanda, 2018). Thus, the lack of resources and funding of the education of the deaf children were a sign of negative attitudes by the government.

Deaf children were excluded from school sports. It emerged from the deaf children that they were not pleased by the negative attitudes of the hearing people towards them as shown by their exclusion from school sports. Contrarily, Chireshe, (2013) revealed that negative attitudes towards

children with disabilities had changed, especially for those in inclusive primary schools. The variations in the findings could be due to the cultural views of the participants who were used in the studies. Participants in this study could have internalised negative attitudes towards the participation of deaf children in sports while those used in existing literature accepted deaf children in sports. The inconsistency could also be due to differences in signing capabilities. Perhaps the participants who were used in studies for existing literature were able to sign, hence, they had no challenges with including deaf children in sports. Participating in exclusive sports only for deaf children was a sign of negative attitudes towards deaf children. They loved participating in mainstream activities and possibly realised how much they fared against their mainstream peers. Contrarily, Kretzmann and McKnight, (1993) revealed that communities have members who are often excluded by the community or marginalised, deaf children in the case of this study, who should be part of community development, not onlookers, not clients or recipients of services but full participants in community development. Thus the deaf children were excluded or marginalised in school sports, yet they were not supposed to be onlookers while the hearing children participated. They were supposed to be mobilised so that they could effectively utilise their talents for the development of the school (*ibid*). The deaf children revealed that they felt unwanted by the hearing school community when they were left out of school teams or when the hearing people did not talk to them. Such attitudes were not in line with the cultural norms of the society in which the study was conducted. Chireshe, (2013) however revealed that schools and communities have moved from negative attitudes to accommodative ones. The variance between the findings and existing literature could be because of differences in study settings with participants of different cultural backgrounds and beliefs between them.

Negative attitudes of the teachers towards the Deaf were shown by their lack Sign language. Teachers were not able to sign despite capacitation programmes at the school. The administrators, however, confirmed that time allocated for Sign language capacitation programmes was not enough for meaningful learning of the language. In line with this, Mukhopadhyay, Nenty and Abosi, (2012), Musengi and Chireshe, (2012) and Chimhenga, (2016) revealed that there was lack of time for capacitation programmes and collaboration for Inclusive Education programmes in primary schools. Contrarily, Musengi and Chireshe (2012) revealed that specialist teachers conducted capacitation programmes with all mainstream teachers in attendance, as well as visiting classes which had deaf children. Similarly, existing literature has shown that specialist teachers

frequently held capacitation programmes with regular classroom teachers, although regular classroom teachers indicated that they easily forgot the Sign language and other skills that they learnt from specialist teachers (Musengi & Chireshe, 2012; Desalegn & Worku, 2016). Some studies have shown that although teachers could not sign, support staff could sign and communicate well with the deaf children (Musengi, et al., 2012). This could show that failure to sign by teachers was a sign of negative attitudes towards the deaf children and Sign language (Charema, 2010; Kaputa & Charema, 2017). However, the CIET, (1999) found out that specialist teachers learnt Sign language from their learners, yet they were said to be conducting capacitation programmes for mainstream teachers. This could mean that lack of Sign language by the teachers was not because of negative attitudes towards Sign language. It however emerged from the Deaf teacher that the attitudes of hearing people were positive. This is consistent with findings from Chireshe, (2011; 2013) that attitudes of hearing people towards people with disabilities have changed from negative to positive, especially for children in inclusive schools. Challenges only arose when they wanted to communicate. The deaf teacher revealed that communication was better for the literate ones as they could communicate through writing. In concurrence with the findings, existing literature has revealed that in Italy, the attitudes of teachers are either positive or mixed (Canevaro, D'Alonzo, Ianes and Caldina, 2011). Similarly, Chireshe's (2013) study found that people have developed positive attitudes towards children with disabilities in schools.

6.3 Limitations to the study

The study adopted a qualitative approach. The findings of a qualitative research may not be suitable for generalisation because of a small sample that is used. Furthermore, since findings of a qualitative research are not tested to verify if they are statistically significant or the findings were by chance, they may not be suitable for generalisation to other settings. There is need for further studies using mixed methods or quantitative research approaches that use larger samples to come up with generalisable results. The researcher encountered financial challenges during the research process. Hyperinflation that is currently affecting ordinary Zimbabweans made it impossible to raise forex for airfares. The sour exchange rates made the Zimbabwean dollar redundant to raise fare for flight to and from South Africa. Due to financial constraints, the researcher resorted to traveling by road, an option that needed three or days before reaching the supervisor. By the time the researcher got there, he was already an exhausted man. Fatigue crept in at the end of these

journeys but the researcher soldiered on. Social media calls in the form of video skype, Duo, WhatsApp, Zoom and emails were used for communication outside the journeys that were made to the supervisor, thereby reducing the number of visits. However, they were also limitations on the use of Wi-Fi. Sometimes it was weak such that there was no connectivity.

Furthermore, electricity was always off during the day due to power cuts and was available at night between eleven and four o'clock. This sometimes caused delays in the flow of communication since the use of Wi-Fi was limited to periods when power was available. This affected mostly calls. The researcher had to adjust his working timetable to suit the time when electricity was available yet at half past seven he was supposed to be at work. Money was also needed for accommodation and meals during the visits for consultation. Moreover, money was needed for travelling to the school and workplaces of other participants for data collection as well as for meals during days of data collection. The researcher resorted to preparing some packed lunches to reduce costs.

The emergence of COVID-19 was a severe threat to the completion of this study. Electricity and network were severely affected since attendants were restricted in terms of going to work. Lack of electricity and network for communication with the supervisor worsened and became the order of the period. Visits to the supervisor were stopped due to the closure of borders and restricted movements. The communication was restricted to mails, audio, and video calls when network permitted. Schedules for data collection were sometimes changed, especially for psychologists. Interviews that were scheduled for eight o'clock could be rescheduled to three o'clock in the afternoon. This would mean that the researcher had to wait for seven hours to conduct the rescheduled interview. The researcher was patient to wait and save money rather than to go and revisit another day.

6.4 Recommendations

After coming up with study findings, the study came up with the following recommendations:

The study found that MoPSE had universal policies on the provision of education to learners including deaf children. Although the policies were said to be inclusive in that they covered all learners, the study found that the 'inclusive policies' did not specify some provisions specific to

deaf children like early stimulation, identification and intervention programmes for the deaf children. The language policy provisions as provided by the psychologists meant that Sign language was used for teaching deaf infants and at junior level teachers switched to English. Such policies could have challenges in interpretation, for instance, what is called mother tongue may be misconstrued to mean mother tongue for the majority. The study recommends, therefore, that MoPSE should have a clear and specific policy to the education of the deaf children in primary schools.

The study found that the mainstream curriculum was used to teach the deaf children. The study also found that it was the duty of the specialist teacher to modify the curriculum which could result in complications when the specialist teacher lacked the expertise to modify it. The study also found that the skilled personnel in the field of Deaf Education were scarce and difficult to replace once they resigned or retired, making it difficult for the mainstream teachers to modify the curriculum. The study, therefore, recommends that MoPSE designs a universally or centrally modified curriculum for deaf children with particular attention on the language of instruction, specific teaching and learning resources, teaching strategies, timetable and class size for inclusive classes or resource units.

The study found that the school lacked resources specific to the education of the deaf children like projectors or computers for the resource units. The study also found that the resources units were borrowing resources from the mainstream classes and returning them after using them, a scenario that could mean that the resource units did not have ownership of the resources. The study, therefore, recommends that school administrators procure resources specific to the education of deaf children and they should equally distribute common resources to all the classes.

The resources units for the deaf children should be acoustically treated. The study found that the resource units were not acoustically treated and were, therefore, not accommodative for the teaching and learning of deaf children. The study, therefore, recommends that MoPSE constructs resource units that are acoustically treated to make them least restrictive in the teaching and learning of the deaf children so that they are compliant with the Disabled Persons Act (1992).

The study found that sign language was taught as a functional tool for the deaf children not as an examinable subject. As a result, the hearing people were not able to sign. The study, therefore, recommends that teachers teach sign language as an examinable subject like any other language rather than as a tool for the functionality of the deaf children only. Related to this was the finding that very little time was allocated to sign language capacitation programmes. The study, therefore, recommends that school administrators allocate more time for Sign language capacitation programmes to allow people to learn at least something from each programme.

The study found that the school practised exclusive sports. It emerged that the deaf children were excluded from school sports. They participated in the Danhiko Paralympic games where they brought trophies, an indication that they were good in sports. Related to this, the study found that the deaf children preferred to attend institutions because they were excluded from school sports implying that they loved sports. The study, therefore, recommends that school administrators and teachers include the deaf children in school sports rather than practising exclusive sports.

The study found that hearing people have negative attitudes towards deaf children as evidenced by their exclusion from sports, lack of resources for their teaching and learning and the borrowing of resources from the mainstream classes. The study, therefore, recommends that MoPSE, administrators and teachers advocate for the education of the deaf children in inclusive primary schools to reduce negative attitudes towards the deaf children by the hearing people.

6.5 Reflection to the study

The significance of this study in Psychology of education is that it sheds light on the academic experiences of deaf children in primary schools in Zimbabwe on the management and teaching methodologies. The study aimed at exploring and establishing the academic experiences of deaf children in Zimbabwe in terms of psychological and audiological assessments, placement, enrolment, resources, academic and psychosocial experiences or legislation. The study found that deaf children had psychological and audiological assessments before they were enrolled in primary schools. School only enrolled deaf children after they had had their assessments as well as after their academic interventions had been laid down by SPS. It is important, therefore, that all primary schools in Zimbabwe adopt the system of enrolling deaf child when they have had their psychological and audiological assessments which come as a package with academic interventions

from SPS. The academic interventions are accompanied by special teaching strategies from SPS. It was also important knowledge to find that the placement of deaf children in primary schools depended on the dominant disability and academic provisions were initially based on the dormant disability. It was after the dominant disability was managed that the deaf child was moved to the school or resource unit for deaf children. It was interesting to note that, apart from deafness, psychologists considered other disabilities in an effort to harness the impact of this deafness. It was important to note that deaf children were managed by specialist teachers in Intellectual challenges department if the dominant disability was Intellectual challenges. These teachers were not specialists in Deaf studies but in Intellectual challenges. It could serve deaf children if they were given services related to Deaf studies by specialist teacher for the Deaf during the time they were placed in other resource units basing on the dominant disability. It is important knowledge from this study, therefore, that in case of comorbidity, it is the dominant disability that is used for placement purposes.

It emerged that primary schools offered academic interventions basing on interventions suggested by SPS, thus, psychologists were indispensable in the successful education of deaf children. However, SPS was severely affected by the brain drain of skilled personnel, especially those related to Deaf studies. Deaf children were, therefore, enrolled without audiometric assessments. This study also unearthed that skilled personnel for Deaf Education had critical skills that were highly on demand in other sectors, hence, brain drain was high. It was, therefore, important for MoPSE to treat skilled personnel in Deaf studies with kid gloves so that they did not leave their critical post leaving the ministry without replacements.

The school lacked relevant resources and infrastructure for the education of deaf children, a challenge that the government and school administrators attributed to the lack of financial resources as well as the swelling numbers of deaf children in country. The resource units were not acoustically treated despite the existence of the Disabled Persons Act, (1992) which compels owners of infrastructure to adapt them to be accommodative. Deaf children were exposed to ordinary classrooms labelled 'resource units'. There is, therefore, need to reconsider the situation of deaf children in primary schools and come up with least restrictive infrastructure. Infrastructure should be modified to be least restrictive and accommodate the individual needs of deaf children in primary schools.

Primary schools had just shifted from the old to the new curriculum commonly called the Competence-Based Curriculum (CBC). The CBC differed from the old curriculum in that it focused on skills, attitudes and competencies which were assessed partly through observations in practical activities or in any language the candidate understands and partly on a written examination. The study found that this gave deaf children an advantage as compared to the old curriculum which was wholly a written examination. One of the major contributions of this study was that the school was implementing the CBC without a blueprint on how to implement assessment, hence, they were not pretty sure of how precisely assessment was supposed to be instituted. The CBC was operational but it would only be operational for public academic assessment in the year 2021. The school used the mainstream school CBC to teach deaf children but the curriculum was not centrally modified. The assumption was that specialist teachers modified it for their respective deaf children without taking cognisance of the availability, unavailability or capability of these personnel to modify the curriculum. It could be of benefit to the deaf children if the CBC had a blueprint on how they were supposed to be precisely assessed. The teacher would not assess the deaf children anyhow but according to the blueprint. Furthermore, the contribution of this study is that schools should have skilled personnel to modify or adjust the curriculum for deaf children.

Of importance were the communication experiences where teachers, the administrators and the hearing children were not able to sign while deaf children could not use oral language. The hearing specialist teachers were not able to sign proficiently. Only the deaf specialist teacher could sign proficiently. Another important finding was that specialist teachers who had studied SNE specialising in Deaf studies were not able to sign while those who specialised in Sign language were able to sign. The study further found that information filtered slowly to the deaf children and the Deaf in general due to language barriers. Most people who had information could not convey it to the Deaf due to language barriers. Deaf people, therefore, mostly lacked topical information. It is important, therefore, to have teachers who can sign proficiently in the education of deaf children in primary schools. Sign language capacitation programmes should also be accelerated to enable every member in the school to at least have basic Sign language, especially for the common language in the school.

It was also important to note that the school provided lighting for the deaf children so that, as visual learners, they could maximise the use of vision and other senses, what is called multisensory approach (Chireshe, 2011; Weber, 2016). It was also important to note that Sign language interpreters were availed to facilitate the signing of each question in the examinations regardless of differences in Sign language dialects that could exist between the interpreters and the deaf children. Deaf children were, however, treated as the same in terms of reasoning, thinking and writing speed since the interpreter would proceed to the next question when all the deaf children were through with the question. The good news, however, was that the issue of dialects was going to be a thing of the past since MoPSE provided schools with Sign language dictionaries to universalise Sign language in schools and eventually beyond the schools. It was, therefore, important, for teachers to accelerate the teaching of sign language using the provided Sign language dictionaries to universalise it in schools and eventually in communities. It is this study's contribution that Sign language should be universalised to do away with dialect differences. Sign language interpreters should consider individual differences during signing for examinations.

Most academic experiences of deaf children in primary schools in Zimbabwe stemmed from communication barriers. Psychosocial experiences, which could influence academic experiences, were also influenced by communication barriers between the deaf children and the hearing school community. Both the primary school and SPS offered deaf children psychosocial support mainly in the form of guidance and counselling. The social relationships between deaf and hearing children were sour mainly due to misconceptions that were caused by language barriers. The study was significant in that it found that deaf children developed defence mechanism from the ill-treatment they got from hearing children through dramatisation to show that they were humans like the hearing children. It is important knowledge to note that deaf children develop defence mechanisms that enable them to learn at the primary school. It may be important to develop the concept of defence mechanism in further researches.

Of importance to the study was that SPS had outreach programmes that educated parents on deafness and unearthing of the hidden deaf children in the homes by their parents. The parents were then advised to send their deaf children to school. This was lifesaving and could lead to the independence of the deaf children through education. The significance of the study also rests on finding that parents no longer hid their deaf children because they were sending them to the nearby

school which could enrol and teach deaf children. Schools should, therefore, continue to strive to have least restrict environments for deaf children for them to continue enrolling with them, thereby reducing the chances of parents hiding their deaf children.

6.6 Conclusions of the study

The study explored the academic experiences of deaf children in a primary school in Zimbabwe. The study found that the deaf children underwent psychological and audiological assessments for placement into the school that would best meet the needs of the learner. The deaf children were assessed by the psychologists for their intellectual capacity and comorbidity. The psychologists would then refer the deaf child to an audiologist who would then assess the hearing acuity of the child. The DRT would then monitor the progress of the deaf child in the school. In case of comorbidity, the psychologists would place the child according to the more dominant disability, leading to the conclusion that placement of deaf children in schools was based on the more dominant disability. The study further concluded that before deaf children were enrolled, they underwent psychological and audiological assessments. The study also concluded that the psychologists drew educational interventions for deaf children which were implemented by the teachers. The study also concluded that SPS monitored the progress of the deaf children in schools and reassesses them periodically. However, the study also concluded that some learners heard about the school's capacity to enrol and teach deaf children and they came on their own without going through SPS.

Schools offered the deaf children academic experiences in the form of placement and enrolment, academic intervention, inclusion experiences and accommodated curriculum. The study, therefore, concluded that schools offered deaf children academic services in the form of placement and enrolment, academic interventions, inclusion and curriculum. The study also concluded that deaf children were offered academic interventions which included the IEP, universalising Sign language, inclusions in mainstream classes and modified examinations.

Mainstream curriculum was used to teach the deaf children. It emerged that deaf children experienced the same curriculum as the mainstream children although theirs had adjusted language to meet their language needs. The teachers, however, refuted that the curriculum was modified and lamented that curriculum modification issues were still on the lips of MoPSE. It also emerged that

the unmodified mainstream curriculum was not suitable for the teaching and learning of the deaf children due to large class sizes and its time constraints since each lesson period was allocated thirty-minutes. The study also found that the school was using a new curriculum which was commonly referred to as the CBC which focused on the skills, attitudes and competencies unlike the old curriculum which was examination oriented. The study, therefore, concluded that the school used mainstream curriculum to teach deaf children. Although there were sentiments that the mainstream curriculum was modified to meet the needs of deaf, the study concluded that the school used unmodified mainstream school curriculum. The study also concluded that the CBC was used to teach deaf children.

It emerged from the study that each lesson period was allocated thirty minutes. This was the time allocated to each lesson in the mainstream curriculum and was extended to resources units since it was the same curriculum that was being used in the resource units. The study, however, concluded that the thirty minutes were not enough for the teachers to fully explain concepts to deaf children who also needed more time than the hearing children to understand concepts. The study concluded that both the teachers and the deaf children required more time in the teaching and learning situations with lamentations on the need for a modified curriculum specifying the amount of time that should be taken for a lesson for the deaf children.

A related finding was about the ideal class size for the successful education of the deaf children. The study found that although there were sentiments that sixteen deaf children in a resource unit was a reasonable number, the ideal class size for the deaf children in the resource unit ranged from a minimum of five to a maximum of ten deaf children. This was much lower than the class size of a mainstream class which had fifty-eight or so learners. The study concluded that the stipulated class size for deaf children was a manageable number that could allow teachers to attend to learners' individual needs. The study also concluded that teachers were not able to give deaf children individual attention due to large class sizes in a space of thirty minutes. In a related conclusion, teachers were racing with time to meet the set targets, hence it was difficult to spend time on individual attention.

The school lacked resources for the teaching and learning of deaf children. The resources included amplification devices, visual learning aids, accommodative resource units, skilled human

resources and modified textbooks. The study concluded that lack of these resources negatively affected the teaching and learning of deaf children. The study also concluded that human resources in the education of deaf children were a major problem and once they resigned or retired, they were difficult to replace. Furthermore, the study concluded that deaf children had special needs that required specialist personnel from other disciplines in the form of speech therapists, occupational therapists, nurses or doctors.

Deaf children participated in the Danhiko Paralympic games. It emerged that the school allowed all the deaf children to attend the games even if they did not participate. The study concluded that deaf children were excluded from mainstream sports, hence, they participated in exclusive sports. Moreover, the study concluded that deaf children were offered guidance and counselling support services by both the school and SPS. The study concluded that deaf children needed guidance and counselling which was being offered by both the school and SPS.

After receiving deaf children from SPS, the school placed them in the resource units where there were specialist teachers for the deaf children, syllabi, textbooks and stationery. The study concluded that mainly learnt in the resource units with available provisions, mainly specialist teachers. The study concluded that the resource rooms were well lit to enable the maximum use of the sense of sight and multisensory approach. A related conclusion was that although the school wanted to offer the deaf children enough academic support, they had financial limitations to procure the necessary resources.

The study found that the deaf children got financial support from their parents and personal donors who paid for their school fees. The study found that deaf children also got financial support from the government in the form of BEAM. It emerged, however, that the BEAM facility was not confined to the deaf children but was for all the children who required it. The deaf children had to meet the criterion of vulnerability that was used to select the beneficiaries. Although it emerged that the deaf children got financial support from the government in the form of BEAM, the study concluded that the government was far from meeting the financial and other needs of the deaf children. The study concluded that the parents of deaf children took responsibility for the education of their children in one way or the other.

It was interesting to find that parents, administrators, teachers and the hearing children accepted the deaf children in the school. They were comfortable with the enrolment of the deaf children in the school although there were sentiments from one of the administrators that the ideal situation was to educate the deaf children in exclusive schools. It emerged that the school had taught the children to accept each other. However, the study concluded that there were conflicts between the hearing and deaf children and mainstream teachers could not resolve them on their own due to communication barriers. The specialist teachers had to come in to resolve the conflicts. The study concluded that the relationships between the deaf and the hearing children were strained due to misconceptions caused by communication challenges. The deaf children could sign but could not speak while the hearing children could speak but not sign, hence, misconceptions were bound to happen. The study also concluded that the deaf children did not socialise with the hearing children due to language barriers. Furthermore, the study concluded that due to strained relationships, there was a lot of backbiting going on between the deaf and hearing children even in the presence of the victim basing on communication barriers.

On social roles and responsibilities, the study found that the deaf children had duties and responsibilities. The study found that there were two prefects who were deaf. The study also found that there were class monitors and team captains among the deaf children. The deaf children also performed others duties in the school like sweeping the classroom, picking papers or doing gardening. The study, therefore, concluded that the deaf children were important assets of the school who took part in every activity that hearing children participated in. it was, therefore, necessary for the teachers and administrators to meet the special needs of deaf children for them to fully participate in their learning and other school activities

There were benefits in having the deaf children in the school. The scenario benefitted both the deaf children and the hearing school community. On the one hand, the deaf children learnt to socialise with the hearing peers and learnt the cultural norms and values of the hearing people and got news of what was happening around them in the process. It emerged that the deaf children were living in societies with hearing people, hence, they were learning to appreciate the lives of the hearing people and learning to accept biculturalism and multiculturalism. The study found that the hearing school community also benefitted from having the deaf children in the school. The hearing people learnt the cultural life of the deaf people and also appreciated how they lived and living with them.

The study, therefore, concluded that there was a symbiotic relationship between deaf children and the hearing school members in terms of cultural exchanges.

On successes, the study found that there were successes in the education of deaf children in the school. The study found that the deaf children learnt to socialise in the school and they were extending this beyond the school community. The study found that some deaf children were gifted in Mathematics, hence, they excelled in the subject. It emerged that the deaf children excelled in Mathematics because the concepts were mostly presented in concrete terms unlike other subjects which were mostly presented in abstract terms. The study also found that some deaf children excelled in sports while others were good at drama and drawing. The study, therefore, concluded that deaf children had their different areas of giftedness. Some were gifted in Mathematics while some were gifted in drawing or drama. Another important finding was that parents were no longer hiding their children as a result of enrolling their deaf children in mainstream schools with neighbours not noticing that their children were deaf. It emerged that deafness was a silent disability. The study concluded that the parents were hiding their deaf children to evade cultural explanations of the causes of deafness. It emerged that not all parents hid their deaf children for cultural reasons.

The education of the deaf children was influenced by legislation and policy. The study found that the Constitution of Zimbabwe recognised sign language as an official language for the Deaf in social and academic circles. The study found MoPSE's policy formulation holistic. The study concluded that policy issues were not addressing a particular category of learners, deaf children's needs were not fully provided for. Policies were addressing the needs of all learners and were described as inclusive in the sense that they addressed all learners regardless of disability.

The study found that early identification and intervention reduced the impact of disability on deaf children. The study also found that if the deaf children were not identified they were likely to be illiterate and lack in independence. The study found that deaf children were enrolled at the same age as the hearing children starting at ECD A at the age of four and progressing to grade seven. Their enrolment was determined by the policies which treated learners holistically. The study concluded that although the schools and SPS wanted to implement early identification and intervention programmes at the critical ages of development for the deaf children, most of them

were hidden only to be identified as late as twenty-two years when they were supposed to be out of primary school.

There were challenges in the education of the deaf children. It emerged that one of the challenges was lack of resources for the teaching and learning of the deaf children. The study concluded that the school lacked resources for the education of deaf children. The study also found that the resource units were not accommodative because they had not been acoustically treated. Another finding related to challenges was on communication. The study found that communication was the major challenge in the education of the deaf children at the school. The study concluded that mainstream teachers were not able to sign, hence, there were challenges in that the teachers could only speak while the deaf children could only sign. The teachers had elementary sign which could not go beyond greetings. It emerged that the hearing specialist teacher sometimes consulted the Sign language dictionary during communication or used writing as an alternative to signing especially on signs she was not sure of. The study, however, found that both specialist teachers were qualified to teach deaf children. The study also found that only those teachers who specialised in Sign language, or were deaf, were able to sign proficiently. The study concluded that the learning environment for the deaf children in the school was not least restrictive. Several needs of deaf children were not met. The study also concluded that Sign language was taught as a subject to be used as a tool for communication and instruction. The study further found that the deaf children as well as the Deaf teacher sometimes wrote on the ground what they wanted to say if they realised that the hearing people did not understand their signs. The study, therefore, concluded that there alternative communication modes between the hearing and the deaf people

Deaf children experienced attitudinal challenges in the school. They were left out of school teams, they had no teaching and learning resources and the teachers and the hearing children did not talk to them. It emerged that the deaf children preferred attending institutions to this school because of these negative attitudes. However, the study found from the Deaf teacher that the attitudes of the hearing people were generally friendly although there were challenges in communication which were fewer for those who could read and write. The study, therefore, concluded that deaf children wanted to attend institutions due to the negative attitudes hearing people hold towards them.

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APPENDICES

Appendix 1: Ethical Clearance



GENERAL/HUMAN RESEARCH ETHICS COMMITTEE (GHREC)

03-Nov-2019

Dear Mr Maizere, James J

Application Approved

Research Project Title:

Exploring academic experiences of deaf children in a primary school in Zimbabwe

Ethical Clearance number:

UFS-HSD2019/1103

We are pleased to inform you that your application for ethical clearance has been approved. Your ethical clearance is valid for twelve (12) months from the date of issue. We request that any changes that may take place during the course of your study/research project be submitted to the ethics office to ensure ethical transparency. Furthermore, you are requested to submit the final report of your study/research project to the ethics office. Should you require more time to complete this research, please apply for an extension. Thank you for submitting your proposal for ethical clearance; we wish you the best of luck and success with your research.

Yours sincerely

Prof Derek Litthauer

Chairperson: General/Human Research Ethics Committee

Digitally signed

by Derek

Litthauer

Date: 2019.11.12

21:15:49 +02'00'

205 Nelson Mandela
Drive
Park West
Bloemfontein 9301
South Africa

P.O. Box 339
Bloemfontein 9300
Tel. 051 401 9398 /
7619 / 3682
RIMS@UFS.ac.za
www.ufs.ac.za



The aim of the study is to explore the experiences of deaf children inclusion in a primary school in Zimbabwe. I am carrying out this study to establish and explore academic experiences of deaf children in inclusion so as to suggest recommendations for the improvement of Inclusive Education for deaf children

WHO IS DOING THE RESEARCH?

I am Maizere James, a PhD student with the University of the Free State (UFS). I work for the Ministry of Higher and Tertiary Education, Science and Technology Development (Zimbabwe) as a lecturer in Inclusive Education at Seke Teachers College. I am carrying out this study to explore the experiences of deaf children in inclusion so as to suggest recommendations that may improve the experiences of deaf children in Inclusive Education

HAS THE STUDY RECEIVED ETHICAL APPROVAL?

This study has received approval from the Research Ethics Committee of UFS. A copy of the approval letter can be obtained from the researcher.

Approval number: UFS-HSD2019/1103

WHY ARE YOUR INSTITUTION/ORGANISATION/COMPANY INVITED TO TAKE PART IN THIS RESEARCH PROJECT?

I chose deaf learners so that they express to me their experiences. I chose teachers and administrators because they teach and deal with deaf children in their learning experiences. I also chose Psychologists to give me information on psychosocial issues on deaf children. I went to supervise my students at Glenview 7 Primary School and realized that there were deaf children. I purposively chose the participants and came up with two school administrators, eighteen teachers for three focused group discussions, five deaf children and four Psychologists

WHAT IS THE NATURE OF PARTICIPATION IN THIS STUDY?

Participants' role will be to provide rich information in relation to the questions asked. The study involves audio and video taping, focus groups and semi-structured interviews. Thirty forty-five will be allocated to interview each participant making it a total of eight hours fifteen minutes for interviews and one hour for each focused group discussion totalling three hours for focus group discussion. The whole process of data collection will take eleven hours fifteen minutes. Open ended questions will asked to give participants room to tell their stories freely. Deaf children will be reminded that they should inform their parents if they are not feeling well to participate on any particular day.

WHAT ARE THE POTENTIAL BENEFITS OF TAKING PART IN THIS STUDY?

Participation of deaf learners will benefit them when their give their experiences as they live them. These may be used to make recommendations for the improvement of their education. Teachers, administrators and Psychologists will benefit through giving deaf children's experiences which may be improved when recommendations are made. Information obtained from these participants will be kept confidential while information about them will only be given to the sponsor of this study.

WHAT IS THE POTENTIAL RISKS TAKING PART IN THIS STUDY?

Participants are likely to be inconvenienced in terms of time they will take in participating in this study. They will leave their core duties and participate in the study. Members who may not be participating may regard participants as wasting time they should use for their core duties.

WILL THE INFORMATION BE KEPT CONFIDENTIAL?

Your participation in this study will be kept confidential. Your name will not be recorded anywhere and no one will be able to connect you to the answers you give. Your answers will be given a fictitious code number or a pseudonym and you will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings. The transcriber and the external coder will get access to your information. These will maintain your confidentiality by signing a confidentiality agreement. Your answers may be reviewed by people responsible for making sure that research is done properly, including the transcriber, external coder, and members of the Research Ethics Committee. Otherwise, records that identify you will be available only to people working on the study, unless you give permission for other people to see the records. Create a sentence to inform participants that their anonymous data may be used

for other purposes, e.g. the data you will provide will be used for research report, journal articles or conference presentation. A report of the study may be submitted for publication, but individual participants will not be identifiable in such a report. While every effort will be made by the researcher to ensure that you will not be connected to the information that you share during the focus group, I cannot guarantee that other participants in the focus group will treat information confidentially. I shall, however, encourage all participants to do so. For this reason I advise you not to disclose personally sensitive information in the focus group. You may decide not to participate even if your parents have agreed to your participation. You may as well decide to withdraw from participation at any time without getting in trouble.

HOW WILL THE INFORMATION BE STORED AND ULTIMATELY DESTROYED?

Hard copies of your answers will be stored by the researcher for a period of five years in a locked cupboard/filing cabinet (where?) for future research or academic purposes; electronic information will be stored on a password protected computer. Future use of the stored data will be subject to further Research Ethics Review and approval if applicable. After five years, information on hard copies will be burnt while information on soft copies will be deleted. Participants may be inconvenienced in terms of their time to carry out their normal daily duties. They may be seen as responsible for the outcomes of the study.

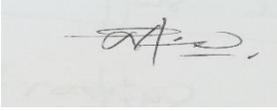
WILL THERE BE PAYMENT OR ANY INCENTIVES FOR PARTICIPATING IN THIS STUDY?

Participants will not be paid, neither will they get any reward for their participation in this study. They will willingly participate in this study. No costs are expected to be incurred by the participants since the researcher will travel to their school on the days they will be available. They will only be inconvenienced in terms of time for which they will be occupied with the study. No physical harm is anticipated.

HOW WILL THE INSTITUTION / ORGANISATION / COMPANY BE INFORMED OF THE FINDINGS / RESULTS OF THE STUDY?

If you would like to be informed of the final research findings, please contact Maizere James on +263732446339 or mail to maijamez@gmail.com. The findings are accessible for one year. Please do not use home telephone numbers. Departmental and/or mobile phone numbers are acceptable. Should you require any further information or want to contact the researcher about any aspect of this study, please contact +263732446339/+263772446339 or mail to maijamez@gmail.com. Should you have concerns about the way in which the research has been conducted, you may contact Dr Mukuna on +27810451473 or mail to MukunaKR@ufs.ac.za participants may have network inconvenience in terms of network and bundles when they want to contact the researcher or the supervisor of the researcher. This will also take their precious time.

Yours sincerely



Maizere James

Appendix 3: Letter to the Permanent Secretary

Seke teachers college

Box SK41

Seke

19 September 2019

The Permanent Secretary

Ministry of Primary and Secondary Education

P O Box CY121

Causeway

Harare

Dear Sir/Madam

RE: Seeking Permission to Carry out an Educational Research in Harare Metropolitan Province-High/Glen District at Glenview 7 Primary School and Schools Psychological Services

My research topic is: *Exploring academic experiences of deaf children in a primary school in Zimbabwe.*

The above matter refers;

I am a student at the University of the Free State seeking permission to carry out a research at the school mentioned above in High/Glen District and Schools Psychological Services/Special Needs Education.

The final research will be submitted on 15 December 2019. I promise to submit a copy of the research findings to the Ministry of Primary and Secondary Education.

I have attached proof of registration, my national identity card, student identity card, title registration letter and research instruments.

Yours Faithfully

Maizere James (0715888379)

Appendix 4: Gate keeper Letter

All communications should be addressed to
The Secretary for Primary and Secondary
Education
Telephone: 794895/796211
Telegraphic address: "EDUCATION"
Fax: 794505



Reference: C/426/3 Hre
Ministry of Primary and
Secondary Education
P.O Box CY 121
Causeway
HARARE

11 November 2019

Maizere James
Seke Teachers College
Box SK41
Seke

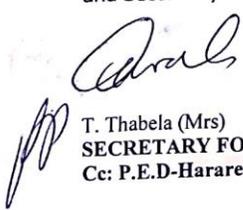
Re: PERMISSION TO VISIT SCHOOLS IN HARARE METROPOLITAN PROVINCE FOR RESEARCH PURPOSES HIGH/GLEN DISTRICT: GLEN VIEW PRIMARY SCHOOL AND SCHOOLS PSYCHOLOGICAL SERVICES.

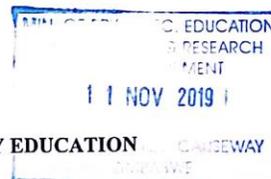
Reference is made to your application to visit schools to collect data for research purposes at the above-mentioned school in Harare Province on the research titled:

"EXPLORING ACADEMIC EXPERIENCES OF DEAF CHILDREN IN A PRIMARY SCHOOL IN ZIMBABWE."

Permission is hereby granted. However, you are required to liaise with the Provincial Education Director Harare Metropolitan Province, who is responsible for the schools which you want to involve in your research. You should ensure that your research work does not disrupt the normal operations of the schools. Where students are involved, parental consent is required.

You are also required to provide a copy of your final report to the Secretary for Primary and Secondary Education.


T. Thabela (Mrs)
SECRETARY FOR PRIMARY AND SECONDARY EDUCATION
Cc: P.E.D-Harare Province



Appendix 5: Letter to Provincial Education Director

Seke teachers college

Box SK41

Seke

19 September 2019

The Provincial Education Director

Ministry of Primary and Secondary Education

P O Box CY121

Causeway

Harare

Dear Sir/Madam

**RE: SEEKING PERMISSION TO CARRY OUT AN EDUCATIONAL RESEARCH IN
HARARE METROPOLITAN PROVINCE-HIGH/GLEN DISTRICT AT GLEN
VIEW 7 PRIMARY SCHOOL AND SCHOOLS PSYCHOLOGICAL SERVICES**

My research topic is: *Exploring academic experiences of deaf children in a primary school in Zimbabwe.*

The above matter refers;

I am a student at the University of the Free State seeking permission to carry out a research at the school mentioned above in High/Glen District and Schools Psychological Services/Special Needs Education.

The final research will be submitted on 15 December 2019. I promise to submit a copy of the research findings to the Ministry of Primary and Secondary Education.

I have attached proof of registration, my national identity card, student identity card, title registration letter and research instruments.

Yours Faithfully

Maizere James (+263732446339)

Appendix 6:

All communications should be addressed to
"The Provincial Education Director"

Telephone :339334
 E-mail :
 hararemetropolitanprovince@gmail.com



ZIMBABWE

Ministry of Primary and Secondary Education
 Harare Provincial Education Office
 P. O. Box CY 1343
 Causeway
 Zimbabwe

21 November 2019

Maizere James
 Seke Teachers College
 Box SK 41
 Seke

RE: PERMISSION TO CARRY OUT RESEARCH IN HARARE
 METROPOLITAN PROVINCE: HIGH-GLEN DISTRICT:
 GLEN-VIEW 7 PRIMARY SCHOOL AND SCHOOLS
 PSYCHOLOGICAL SERVICES

Reference is made to a letter dated 11-11-2019 from the Secretary for Ministry of Primary and Secondary Education granting you permission to carry out research in Harare Metropolitan Province on the research title:

EXPLORING ACADEMIC EXPERIENCES OF DEAF CHILDREN IN A PRIMARY SCHOOL IN ZIMBABWE

Please be advised that the Provincial Education Director grants you authority to carry out your research on the above topic. You are required to supply Provincial Office with a copy of your research findings.

Mubanga
 MIN. OF PRY. & SEC. EDUCATION
 DISCIPLINE SECTION
 HARARE PROVINCE
 21 NOV 2019
 FOR: PROVINCIAL EDUCATION DIRECTOR
 HARARE METROPOLITAN PROVINCE
 ZIM. TEL: 04-792671/7798146

Ministry Of Primary And Secondary Education
 Glen View / Mufakose District
 21 NOV 2019
 INSPECTOR
 P.O. Box GV 63 Glen View Harare

THE DEPUTY HEAD
 GLEN VIEW (7)
 COUNCIL PRIMARY SCHOOL
 21 OCT 2019
 BOX GV 47 HARARE
 TEL 04792671
 Email

Appendix 7:

Seke teachers college
Box SK41
Seke

19 September 2019

The District Schools Inspector
Ministry of Primary and Secondary Education
P O Box CY121
Causeway
Harare

Dear Sir/Madam

**RE: SEEKING PERMISSION TO CARRY OUT AN EDUCATIONAL RESEARCH IN
HARARE METROPOLITAN PROVINCE-HIGH/GLEN DISTRICT AT GLEN
VIEW 7 PRIMARY SCHOOL AND SCHOOLS PSYCHOLOGICAL SERVICES**

My research topic is: *Exploring academic experiences of deaf children in a primary school in
Zimbabwe.*

The above matter refers;

I am a student at the University of the Free State seeking permission to carry out a research at
the school mentioned above in High/Glen District and Schools Psychological Services/Special
Needs Education.

The final research will be submitted on 15 December 2019. I promise to submit a copy of the
research findings to the Ministry of Primary and Secondary Education.

I have attached proof of registration, my national identity card, student identity card, title
registration letter and research instruments.

Yours Faithfully



Maizere James (0715888379)



WHO IS DOING THE RESEARCH?

I am Maizere James, a PhD student with the University of the Free State (UFS). I work for the Ministry of Higher and Tertiary Education, Science and Technology Development (Zimbabwe) as a lecturer in Inclusive Education at Seke Teachers College. I am carrying out this study to explore the experiences of deaf children in inclusion so as to suggest recommendations that may improve the experiences of deaf children in Inclusive Education in Zimbabwe

HAS THE STUDY RECEIVED ETHICAL APPROVAL?

This study has received approval from the Research Ethics Committee of UFS. A copy of the approval letter can be obtained from the researcher.

Approval number: *USF-HSD2019/1103*

WHY ARE YOU INVITED TO TAKE PART IN THIS RESEARCH PROJECT?

I chose these people to be my participants because they are rich in information related to the topic. Deaf children will provide me with their rich lived academic experiences. Since teachers teach and administrators deal with these deaf children on every single school day, they are likely to be have experiences in teaching deaf children as well as being knowledgeable on deaf children's academic experiences. Psychologists were chosen because they deal with children's psychosocial issues, hence, they were likely to provide relevant information on deaf children's psychosocial issues. I came to know them, only as teachers of deaf children, when I visited my students who were on teaching practice at this school.

WHAT IS THE NATURE OF PARTICIPATION IN THIS STUDY?

I chose deaf learners so that they express to me their academic experiences. I chose teachers and administrators so that they teach and deal with deaf children in their learning experiences. I also chose Psychologists to give me provide me with information on deaf children's academic experiences and the resources they experience. I chose Psychologists to give information on psychosocial issues of deaf children. The study involves audio and video taping, focus group discussions for teachers and semi-structured interviews for deaf children administrators and

Psychologists. Open-ended questions will be asked to give participants room to tell their lived stories. Each interview will last forty-five minutes to give a total of eight hours fifteen minutes, while each focus group discussion will take one hour each, lasting for a total of three hours for focus group discussions. The whole process of data collection will take eleven hours fifteen minutes. No physical harm is anticipated throughout this study process.

CAN THE PARTICIPANT WITHDRAW FROM THE STUDY?

Your participation is voluntary and there is no penalty or loss of benefit for non-participation. Being in this study is voluntary and you are under no obligation to consent to participation. If you do decide to take part, you will be given this information sheet to keep and be asked to sign a written consent form. You are free to withdraw at any time and without giving a reason. Withdrawal may be done before the interview process is completed.

WHAT ARE THE POTENTIAL BENEFITS OF TAKING PART IN THIS STUDY?

Participation of deaf learners will benefit them when they give their academic experiences as they live them. These may be used to make recommendations for the improvement of their education. Teachers, administrators and Psychologists will benefit through giving deaf children's experiences which may be improved when recommendations are made. Information obtained from these participants will be kept confidential while information about them will only be given to the sponsor of this study.

WHAT IS THE ANTICIPATED INCONVENIENCE OF TAKING PART IN THIS STUDY?

Participants are likely to be inconvenienced in terms of time they will take in participating in this study. They will leave their core duties and participate in the study. Members who may not be participating may regard participants as wasting time they should use for their core duties.

WILL WHAT I SAY BE KEPT CONFIDENTIAL?

Your name will not be recorded anywhere and no one will be able to connect you to the answers you give. Your answers will be given a fictitious code number or a pseudonym and you will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings. Your answers may be reviewed by people responsible for making sure that research is done properly, including the transcriber, external coder, and members of the Research Ethics Committee. These individuals will maintain confidentiality by signing a

confidentiality agreement. Otherwise, records that identify you will be available only to people working on the study, unless you give permission for other people to see the records. A report of the study may be submitted for publication, but individual participants will not be identifiable in such a report. While every effort will be made by the researcher to ensure that you will not be connected to the information that you share during the focus group, I cannot guarantee that other participants in the focus group will treat information confidentially. I, however, encourage all participants to do so. For this reason, I advise you not to disclose personally sensitive information in the focus group. You can refuse to take part even if your parents have agreed to your participation. You can stop being in the study at any time without getting in trouble as long as you do it before the study process is completed.

HOW WILL THE INFORMATION BE STORED AND ULTIMATELY DESTROYED?

Hard copies of your answers will be stored by the researcher for a period of five years in a locked filing cabinet in his office for future research or academic purposes; electronic information will be stored on a password protected computer. Future use of the stored data will be subject to further Research Ethics Review and approval if applicable. Information on hard copies will be burnt after five years while information on soft copies will be deleted. Participants may be inconvenienced in terms of time to perform their everyday duties otherwise no physical injuries are anticipated

WILL I RECEIVE PAYMENT OR ANY INCENTIVES FOR PARTICIPATING IN THIS STUDY?

Participants will not be paid, neither will they get any reward for their participation in this study. They will willingly participate in this study. No costs are expected to be incurred by the participants since the researcher will travel to their school on the days they will be available. They will only be inconvenienced in terms of time for which they will be occupied with the study. No physical harm is anticipated.

HOW WILL THE PARTICIPANT BE INFORMED OF THE FINDINGS / RESULTS OF THE STUDY?

If you would like to be informed of the final research findings, please contact Maizere James on +263732446339 or mail to maijamez@gmail.com. The findings are accessible for one year. Should you require any further information or want to contact the researcher about any aspect of this study, please contact +263732446339/+263772446339 or mail to maijamez@gmail.com. Should you have concerns about the way in which the research has been conducted, you may

contact Dr Mukuna on +27810451473 or mail to MukunaKR@ufs.ac.za participants may have network inconvenience in terms of network and bundles when they want to contact the researcher or the supervisor of the researcher. This will also take their precious time.

Thank you for taking time to read this information sheet and for participating in this study.

CONSENT TO PARTICIPATE IN THIS STUDY

I, _____ (participant name), confirm that the person asking my consent to take part in this research has told me about the nature, procedure, potential benefits and anticipated inconvenience of participation.

I have read (or had explained to me) and understood the study as explained in the information sheet. I have had sufficient opportunity to ask questions and am prepared to participate in the study. I understand that my participation is voluntary and that I am free to withdraw at any time without penalty (if applicable). I am aware that the findings of this study will be anonymously processed into a research report, journal publications and/or conference proceedings.

I agree to the recording of the *insert specific data collection method*.

I have received a signed copy of the informed consent agreement.

Full Name of Participant:

Signature of Participant: _____ Date:

Full Name(s) of Researcher(s):

Signature of Researcher: _____ Date:

Appendix 9: PARTICIPANT INFORMATION LEAFLET AND ASSENT FORM



TITLE OF THE RESEARCH PROJECT: Exploring academic experiences of deaf children in a primary school in Zimbabwe.

RESEARCHERS NAME(S): Maizere James

ADDRESS: Seke Teachers College, Box SK41, Seke, Chitungwiza, Harare, Zimbabwe

CONTACT NUMBER: +263732446339

What is RESEARCH?

Research is something we do to find new knowledge about the way things (and people) work. We use research projects or studies to help us find out more about phenomena. Research also helps us to find better ways of dealing with phenomena like education, contemporary issues or Inclusive Education.

What is this research project all about?

The study deals with your experiences in learning in mainstream classes. I am carrying out this study about your academic experiences in mainstream classes so that improvements may be made to your education. Your honesty participation in this study may improve your education

Why have I been invited to take part in this research project?

You have been selected to participate in this study because, as a deaf child, you are rich in deaf children's lived academic experiences in mainstream classes.

Who is doing the research?

I am Maizere James. I work for the Ministry of Higher and Tertiary Education, Science and Technology Development. I am carrying out this study to explore the lived academic experiences of deaf children in inclusion so as to make recommendations that may improve their academic experiences in Inclusive Education

What will happen to me in this study?

I chose deaf learners so that they express to me their lived academic experiences during learning in mainstream classes. I purposively chose them to participate in this study.

Can anything bad happen to me?

Your duty will be to answer questions that are related to your learning experiences. You should tell your parents if you happen not to be feeling well during data collection process. You should answer the questions freely and honestly. No physical harm on you is anticipated.

Can anything good happen to me?

The benefits you are going to get are related to your Inclusive Education. The teaching/learning process may improve in line with the recommendations this study may make. Teaching/learning resources may improve in terms of availability, quantity and quality. Language of instruction preference may also be adopted. Participation of deaf children in learning may also improve.

Will anyone know I am in the study?

Your participation will be kept confidential. The information s/he will give in the study will be kept confidential as well, but information about you will be given to the study sponsor.



Who can I talk to about the study?

Should you require any information or want to contact the researcher about any aspect of this study, please contact him on +263732446339/+263772446339 or mail to maijamez@gmail.com. Should you have concerns about the way in which the research has been conducted, you may contact Dr Mukuna on +27810451473 or mail to MukunaKR@ufs.ac.za.

What if I do not want to do this?

You can decide not to participate in this study even if your parents have consented. You may as well decide to withdraw from participating at any time without getting in trouble as long as the process has not been completed.

Do you understand this research study and are you willing to take part in it?

YES

NO

Has the researcher answered all your questions?

YES

NO

Do you understand that you can pull out of the study at any time?

YES

NO

Signature of Child

Date

PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM

TITLE OF THE RESEARCH PROJECT: Exploring academic experiences of deaf children in a primary school in Zimbabwe

REFERENCE NUMBER:

PRINCIPAL INVESTIGATOR: Maizere James

ADDRESS: Seke Teachers College, Box SK41, Seke, Chitungwiza, Harare, Zimbabwe

CONTACT NUMBER: +263732446339

You are being invited to take part in a research project. Please take some time to read the information presented here, which will explain the details of this project. Please ask the study staff or doctor any questions about any part of this project that you do not fully understand. It is very important that you are fully satisfied that you clearly understand what this research entails and how you could be involved. Also, your participation is entirely voluntary, and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part.

This study has been approved by the Research Ethics Committee at the University of the Free State and will be conducted according to the ethical guidelines and principles of the international Declaration of Helsinki, South African Guidelines for Good Clinical Practice and the Medical Research Council (MRC) Ethical Guidelines for Research.

What is this research study all about?

The study deals with your experiences in learning in mainstream classes. I am carrying out this study about your academic experiences in mainstream classes so that improvements may be made to your education. Your honesty participation in this study may improve your education

Why have you been invited to participate?

You have been selected to participate in this study because, as a deaf child, you are rich in deaf children's lived academic experiences in mainstream classes.

What will your responsibilities be?

Your duty will be to answer questions that are related to your learning experiences. You should tell your parents if you happen not to be feeling well during data collection process. You should answer the questions freely and honestly. No physical harm on you is anticipated.

Will you benefit from taking part in this research?

The benefits you are going to get are related to your Inclusive Education. The teaching/learning process may improve in line with the recommendations this study may make. Teaching/learning resources may improve in terms of availability, quantity and quality. Language of instruction preference may also be adopted. Participation of deaf children in learning may also improve.

Are there in risks involved in your taking part in this research?

No risks are anticipated in your taking part in the study. Your participation will be kept confidential. The information s/he will give in the study will be kept confidential as well, but information about you will be given to the study sponsor.

If you do not agree to take part, what alternatives do you have?

You can decide not to participate in this study even if your parents have consented. You may as well decide to withdraw from participating at any time without getting in trouble as long as the process has not been completed.

Who will have access to your medical records?

Your participation will be kept confidential. The information s/he will give in the study will be kept confidential as well, but information about you will be given to the study sponsor. Your identity remains anonymous even in the case of publication of this research study

What will happen in the unlikely event of some form of injury occurring as a direct result of your taking part in this research study?

No harm of or injury is anticipated to directly occur as a result of participating in interviews and focus group discussions in this study.

Will you be paid to take part in this study and are there any costs involved?

No, you will not be paid to take part in the study, unless you will be inconvenienced in terms transport and meals. There will be no costs involved for you if you do take part.

Is there anything else that you should know or do?

You should inform your family practitioner or usual doctor that you are taking part in a research study. (Include if applicable)

You should also notify your medical insurance company that you are participating in a research study. (Include if applicable)

You can contact Dr *Kananga Mukuna Robert* at tell +27810451473 if you have any further queries or encounter any problems.

You can contact the Research Ethics Office at 051 4019398 if you have any concerns or complaints that have not been adequately addressed by your study doctor.

You will receive a copy of this information and consent form for your records.

Declaration by participant

By signing below, I agree to take part in a research study entitled (*insert title of study*).

I declare that:

I have read or had read to me this information and consent form, and it is written in a language with which I am fluent and comfortable.

I have had a chance to ask questions, and all my questions have been adequately answered.

I understand that taking part in this study is voluntary and I have not been pressurized to take part.

I may choose to leave the study at any time and will not be penalized or prejudiced in any way.

I may be asked to leave the study before it has finished if the study doctor or researcher feels it is in my best interests, or if I do not follow the study plan, as agreed to.

Signed at (*place*) on (*date*) 2019.

Signature of Participant

Signature of witness

Declaration by investigator

I, Maizere James, declare that:

I explained the information in this document to

I encouraged him/her to ask questions and took adequate time to answer them.

I am satisfied that he/she adequately understands all aspects of the research, as discussed above

I did/did not use an interpreter. (*If an interpreter is used then the interpreter must sign the declaration below.*)

Signed at (*place*) on (*date*) 2019.

Signature of investigator Signature of witness

Declaration by interpreter

I (*name*) declare that:

I assisted the investigator (*name*) to explain the information in this document to (*name of participant*) Using the language medium of Sign language.

We encouraged him/her to ask questions and took adequate time to answer them.

I conveyed a factually correct version of what was related to me.

I am satisfied that the participant fully understands the content of this informed consent document and has had all his/her question satisfactorily answered.

Signed at (*place*) on (*date*)

Signature of interpreter Signature of witness

CONSENT FORM FOR CASE REPORTS¹

For a participant consent to the publication of information about them in a journal or thesis

Name of person described in article or shown in photograph: _____

Subject matter of photograph or article: _____

Title of article: _____

Medical practitioner or corresponding author: _____

I _____ [insert full name] give my consent for this information about MYSELF OR MY CHILD OR WARD/MY RELATIVE [insert full name]: _____, relating to the subject matter above (“the Information”) to appear in a journal article, or to be used for the purpose of a thesis or presentation.

I understand the following:

1. The Information will be published without my name/child’s name/relatives name attached, and every attempt will be made to ensure anonymity. I understand, however, that complete anonymity cannot be guaranteed. It is possible that somebody somewhere - perhaps, for example, somebody who looked after me/my child/relative, if I was in hospital, or a relative - may identify me.
2. The Information may be published in a journal which is read worldwide or an online journal. Journals are aimed mainly at health care professionals but may be seen by many non-doctors, including journalists.
3. Information may be placed on a website.
4. I can withdraw my consent at any time before online publication, but once the Information has been committed to publication it will not be possible to withdraw the consent.

Signed: _____ Date: _____

Signature of requesting medical practitioner/health care worker:

¹ Adapted from *BMJ Case Reports* consent form & Stellenbosch University Ethics Templates

_____ Date: _____

Appendix 10

RESEARCH STUDY INFORMATION LEAFLET AND PARENTAL CONSENT FORM

DATE

01/09/2019

TITLE OF THE RESEARCH PROJECT

Exploring academic experiences of deaf children in a primary school in Zimbabwe

RESEARCHERS NAME(S) AND CONTACT NUMBER:

Maizere James

2017265667

+263732446339

FACULTY AND DEPARTMENT:

Education

Higher Education Studies

STUDYLEADER(S) NAME AND CONTACT NUMBER:

Dr Kananga Mukuna Robert

+27810451473

WHAT IS THIS RESEARCH PROJECT ALL ABOUT?

The study deals with your experiences in learning in mainstream classes. I am carrying out this study about your academic experiences in mainstream classes so that improvements may be made to your education. Your honesty participation in this study may improve your education

WHY HAVE YOUR CHILD BEEN INVITED TO TAKE PART IN THIS RESEARCH PROJECT?

You have been selected to participate in this study because, as a deaf child, you are rich in deaf children's lived academic experiences in mainstream classes.

WHO IS DOING THE RESEARCH?

I am Maizere James. I work for the Ministry of Higher and Tertiary Education, Science and Technology Development. I am carrying out this study to explore the lived academic experiences of deaf children in inclusion so as to make recommendations that may improve their academic experiences in Inclusive Education

HAS THE STUDY RECEIVED ETHICAL APPROVAL?

This study has received approval from the Research Ethics Committee of UFS. A copy of the approval letter can be obtained from the researcher.

Approval number: *UFS-HSD2019/1103*

WHAT WILL HAPPEN TO YOUR CHILD IN THIS STUDY?

I chose deaf learners so that they express to me their lived academic experiences during learning in mainstream classes. I purposively chose them to participate in this study.

CAN ANYTHING BAD HAPPEN TO YOUR CHILD?

Your duty will be to answer questions that are related to your learning experiences. You should tell your parents if you happen not to be feeling well during data collection process. You should answer the questions freely and honestly. No physical harm on you is anticipated.

CAN ANYTHING GOOD HAPPEN TO YOUR CHILD?

The benefits you are going to get are related to your Inclusive Education. The teaching/learning process may improve in line with the recommendations this study may make. Teaching/learning resources may improve in terms of availability, quantity and quality. Language of instruction preference may also be adopted. Participation of deaf children in learning may also improve.

WILL ANYONE KNOW YOUR CHILD IS PART OF THE STUDY?

Your participation will be kept confidential. The information s/he will give in the study will be kept confidential as well, but information about you will be given to the study sponsor.

WHO CAN YOU TALK TO ABOUT THE STUDY?

Should you require any information or want to contact the researcher about any aspect of this study, please contact him on +263732446339/+263772446339 or mail to maijamez@gmail.com. Should you have concerns about the way in which the research has been conducted, you may contact Dr Mukuna on +27810451473 or mail to MukunaKR@ufs.ac.za.

WHAT IF YOU DO NOT WANT YOUR CHILD TO DO THIS?

You can decide not to participate in this study even if your parents have consented. You may as well decide to withdraw from participating at any time without getting in trouble as long as the process has not been completed.

PLEASE RETURN

Name of child: _____

Name of Parent: _____

- Do you understand this research study and are you willing to let your child take part in it? Yes No
- Has the researcher answered all your questions? Yes No
- Do you understand that you can withdraw from the study at any time? Yes No
- I give the researcher permission to make use of the data gathered from my child's participation Yes No

Signature of Parent

Date

Appendix 11

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and your feelings.

Focus group discussions 1

N=6

- 1) Bio data (sex, qualification, experience, hearing status)
- 2) Who pays school fees for deaf children? Any external support?
- 3) How do they access educational needs? (Stationery, fees, uniforms). Any external support?
- 4) What are the resource/academic/psychosocial experiences of deaf children at this school?
(Discuss resources-material including technological/financial (payment of fees, stationery, uniforms, attendance/transport)/human, psychosocial/self-esteem)
- 5) How does the current state of resources affect your teaching? (Human, material, financial, technological)
- 6) What are your experiences in teaching deaf learners at this school? (Discuss challenges & successes (Curriculum, ratios, Time allocation, resources, attitudes).
- 7) Does the School have enough required resources in teaching deaf children? (Discuss teachers (qualifications, hearing status), interpreters, physiotherapists, speech therapists, Doctors/ENTs, audiologists)

- 8) What are deaf children's curriculum experiences? (Discuss modification, language, transition programmes, instruction, time for task completion and instruction, ratios, individual differences)
- 9) Do deaf children socialise with hearing children? If yes, which language do deaf/hearing children in their socialisation process
- 10) Do you allocate social roles and duties to deaf children? (If not, why?)
- 11) What are the benefits of teaching deaf children in a regular school? (To deaf/hearing children, school staff, community)

Appendix 12

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and your feelings.

Focus group discussion 2: N=6

- 1) Bio data (sex, qualification, experience)
- 2) How do you enrol your deaf children? (Placement? Just enrol like hearing?)
- 3) Are you comfortable with enrolling deaf children at this school? (If not, why?)
- 4) What are your experiences in teaching deaf learners in a mainstream school?
- 5) Are you able to sign?
- 6) Which language do deaf learners use for teaching/learning purposes?
- 7) Which language do you use to teach deaf learners?
- 8) Is the language you use to teach them the language they understand and prefer for communication/teaching/learning?
- 9) Are you competent in this language?
- 10) Which languages do you teach at this school?
- 11) Which language do deaf children use to communicate with hearing peers? (In participation socially)
- 12) What are deaf children's experiences in learning in a mainstream school?
Curriculum/psychosocial, esteem/language/participation
- 13) What are the benefits of teaching deaf children in a regular school? Unhu/Ubuntu/cultural issues/bilingualism

- 14) How are you capacitated in teaching/communicating deaf children? (Staff development, workshops, in-service, research). If any capacitation, how often?
- 15) Do you work with other staff members/schools to enrich yourselves in terms of Deaf Education? Collaboration.
- 16) What are your training needs to improve your skills in the teaching/learning of deaf children?

Appendix 13

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and your feelings.

Interview for Deaf children: N=5

- 1) Which teaching/learning resources are available for your teaching/learning?
- 2) Do you have friends who are hearing?
- 3) Which language do you use when talking to your friends who are not deaf? (Can school staff members and hearing peers use this language proficiently)
- 4) Which language is used to teach you?
- 5) Are you proficient in this language?
- 6) Is this the best language for you in communication with friends or in learning?
- 7) What are your experiences in learning at this school? (Challenges, good this/benefits, resources, acceptance, psychosocial, esteem, curriculum-language, time allocation, individual attention)
- 8) Given the option, would you choose to learn at this school or special school? (Discuss reasons)
- 9) Do teachers talk to you about your problems at school? (If yes, do you find your discussions helpful?)
- 10) What is your best mark in the subjects you learn?
- 11) What issues do you think are a challenge to your academic successes?

12) Are given duties to carry out at school? (Discuss sending, duties carried out by hearing peers, prefects, captains)

13) Do you take part in sporting activities?

Appendix 14

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and feelings.

Interview for Psychologists: N=4

- 1) Who constitute Schools Psychological Services (SPS)? (Discuss qualifications)
- 2) What is the role of SPS in the education of deaf children (Discuss assessment, placement, psychological services, academic services, resources provision)
- 3) Do you have schools that you recommend deaf learners to attend? (Justify stance)
- 4) What experiences do you encounter as you play this role?
- 5) Which resources do your schools have for the education of deaf children? (Human, material, financial or technological-Discuss availability/adequacy/state). (What plans are in place for these resources? (Replenish or stock))
- 6) Do you have a policy/legislation on the education of deaf children? (Discuss provisions in terms of Inclusion, Language of instruction/communication, interpreters, early identification/early intervention, funding *etc*)
- 7) Do you recommend the teaching of Sign language as a language in primary schools? (Discuss availability of syllabus, Whether examinable)
- 8) What academic experiences do deaf children have in mainstream schools?
- 9) What psychosocial experiences do deaf children encounter in mainstream schools?
- 10) Does the education system involve parents in the psychosocial and academic welfare of deaf children? (Discuss the issue-relevance/irrelevance)

11) Do you hold public awareness campaigns on deaf academic and psychosocial issues?

(Discuss the issue in terms of resources and benefits to deaf children, parents of deaf children and communities as well as the relevance/irrelevance of the issue)

12) Do deaf learners sit the same examinations as hearing learners? (Discuss provisions-

language of questioning (same as language of instruction), additional time, marking)

Appendix 15

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of the study and will not be shown or used for any other purpose. Your identity will remain anonymous. Feel free to express your views, sentiments and your feelings.

Interview for school administrators: N=2

- 1) What is your qualification in relation to deaf studies? (qualifications, statuses (deaf, hearing), experience)
- 2) What is your view on deaf children learning in mainstream schools?
- 3) What do deaf children benefit from learning in mainstream schools?
- 4) What academic support/psychosocial services do you offer to deaf learners? (counselling, teaching, audiometric assessment or sport)
- 5) Which resources does the school have for the education of deaf children? (Material, human, financial, technological) Are they enough?
- 6) How do you procure for the teaching/learning of deaf learners at this school? (Human, material, technological, discuss challenges/successes in procurement). Do you have some external assistance? (Donors, individual parents, well-wishers, *etc*)
- 7) Who places deaf learners at this school? (Discuss participant's influence in placement)
- 8) Does the school and community welcome the idea of deaf children learning in mainstream education system? (Parents of hearing children/deaf children)
- 9) How long is each lesson period? Do you think this is the ideal time allocation for teaching/learning of deaf children?

- 10) Which subjects do deaf children learn? (How are they performing in each of these subjects)? Which language is used to teach deaf children/communicate with deaf children in the school?
- 11) Is this the language deaf learners prefer to use when participating socially or academically?
- 12) How do you assess deaf children, both in internal and terminal examinations? (Language (mode of language of questioning), Time, interpreters).
- 13) Are there any programmes for teaching teachers Sign language?
- 14) Do you supervise teachers who teach deaf learners? (If yes, what are your experiences in supervising these children?)
- 15) What are your experiences (From observation as teachers teach/deaf children learn) in teaching/learning of deaf children?
- 16) Who pays for deaf children's school fees? (Are they up to date in terms of payment? If not, how you treat them?)
- 17) How does the school keep abreast with inclusive Education issues and its dynamic nature? (Discuss Research, staff development, workshops, in-service, Training needs)

Appendix 16

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and your feelings.

Interview schedule for the deaf teacher

- 1) What is deaf culture?
- 2) What are the values of the Deaf culture?
- 3) What is the difference between 'deaf' lowercase and 'Deaf' uppercase?"
- 4) Which type school do deaf children prefer to attend?
- 5) Do deaf children want socialise with hearing children?
- 6) Which language do deaf children prefer to use during learning and in social circles?
- 7) Are the teachers able to use this language?
- 8) Which language mode do children of deaf parents use?
- 9) Which teaching and learning resources are available for the education of deaf children?
- 10) Do deaf children have the same sports as the hearing children?
- 11) How do deaf children access information in a hearing community

Appendix 7

Seke teachers college
Box SK41
Seke

19 September 2019

The District Schools Inspector
Ministry of Primary and Secondary Education
P O Box CY121
Causeway
Harare

Dear Sir/Madam

**RE: SEEKING PERMISSION TO CARRY OUT AN EDUCATIONAL RESEARCH IN
HARARE METROPOLITAN PROVINCE-HIGH/GLEN DISTRICT AT GLEN
VIEW 7 PRIMARY SCHOOL AND SCHOOLS PSYCHOLOGICAL SERVICES**

My research topic is: *Exploring academic experiences of deaf children in a primary school in
Zimbabwe.*

The above matter refers;

I am a student at the University of the Free State seeking permission to carry out a research at the school mentioned above in High/Glen District and Schools Psychological Services/Special Needs Education.

The final research will be submitted on 15 December 2019. I promise to submit a copy of the research findings to the Ministry of Primary and Secondary Education.

I have attached proof of registration, my national identity card, student identity card, title registration letter and research instruments.

Yours Faithfully



Maizere James (0715888379)



Approval number: USF-HSD2019/1103

WHY ARE YOU INVITED TO TAKE PART IN THIS RESEARCH PROJECT?

I chose these people to be my participants because they are rich in information related to the topic. Deaf children will provide me with their rich lived academic experiences. Since teachers teach and administrators deal with these deaf children on every single school day, they are likely to have experiences in teaching deaf children as well as being knowledgeable on deaf children's academic experiences. Psychologists were chosen because they deal with children's psychosocial issues, hence, they were likely to provide relevant information on deaf children's psychosocial issues. I came to know them, only as teachers of deaf children, when I visited my students who were on teaching practice at this school.

WHAT IS THE NATURE OF PARTICIPATION IN THIS STUDY?

I chose deaf learners so that they express to me their academic experiences. I chose teachers and administrators so that they teach and deal with deaf children in their learning experiences. I also chose Psychologists to give me provide me with information on deaf children's academic experiences and the resources they experience. I chose Psychologists to give information on psychosocial issues of deaf children. The study involves audio and video taping, focus group discussions for teachers and semi-structured interviews for deaf children administrators and Psychologists. Open-ended questions will be asked to give participants room to tell their lived stories. Each interview will last forty-five minutes to give a total of eight hours fifteen minutes, while each focus group discussion will take one hour each, lasting for a total of three hours for focus group discussions. The whole process of data collection will take eleven hours fifteen minutes. No physical harm is anticipated throughout this study process.

CAN THE PARTICIPANT WITHDRAW FROM THE STUDY?

Your participation is voluntary and there is no penalty or loss of benefit for non-participation. Being in this study is voluntary and you are under no obligation to consent to participation. If you do decide to take part, you will be given this information sheet to keep and be asked to sign a written consent form. You are free to withdraw at any time and without giving a reason. Withdrawal may be done before the interview process is completed.

WHAT ARE THE POTENTIAL BENEFITS OF TAKING PART IN THIS STUDY?

Participation of deaf learners will benefit them when they give their academic experiences as they live them. These may be used to make recommendations for the improvement of their education. Teachers, administrators and Psychologists will benefit through giving deaf children's experiences which may be improved when recommendations are made. Information obtained from these participants will be kept confidential while information about them will only be given to the sponsor of this study.

WHAT IS THE ANTICIPATED INCONVENIENCE OF TAKING PART IN THIS STUDY?

Participants are likely to be inconvenienced in terms of time they will take in participating in this study. They will leave their core duties and participate in the study. Members who may not be participating may regard participants as wasting time they should use for their core duties.

WILL WHAT I SAY BE KEPT CONFIDENTIAL?

Your name will not be recorded anywhere and no one will be able to connect you to the answers you give. Your answers will be given a fictitious code number or a pseudonym and you will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings. Your answers may be reviewed by people responsible for making sure that research is done properly, including the transcriber, external coder, and members of the Research Ethics Committee. These individuals will maintain confidentiality by signing a confidentiality agreement. Otherwise, records that identify you will be available only to people working on the study, unless you give permission for other people to see the records. A report of the study may be submitted for publication, but individual participants will not be identifiable in such a report. While every effort will be made by the researcher to ensure that you will not be connected to the information that you share during the focus group, I cannot guarantee that other participants in the focus group will treat information confidentially. I, however, encourage all participants to do so. For this reason, I advise you not to disclose personally sensitive information in the focus group. You can refuse to take part even if your parents have agreed to your participation. You can stop being in the study at any time without getting in trouble as long as you do it before the study process is completed.

HOW WILL THE INFORMATION BE STORED AND ULTIMATELY DESTROYED?

Hard copies of your answers will be stored by the researcher for a period of five years in a locked filing cabinet in his office for future research or academic purposes; electronic information will be stored on a password protected computer. Future use of the stored data will be subject to further Research Ethics Review and approval if applicable. Information on hard copies will be burnt after five years while information on soft copies will be deleted. Participants may be inconvenienced in terms of time to perform their everyday duties otherwise no physical injuries are anticipated

WILL I RECEIVE PAYMENT OR ANY INCENTIVES FOR PARTICIPATING IN THIS STUDY?

Participants will not be paid, neither will they get any reward for their participation in this study. They will willingly participate in this study. No costs are expected to be incurred by the participants since the researcher will travel to their school on the days they will be available. They will only be inconvenienced in terms of time for which they will be occupied with the study. No physical harm is anticipated.

HOW WILL THE PARTICIPANT BE INFORMED OF THE FINDINGS / RESULTS OF THE STUDY?

If you would like to be informed of the final research findings, please contact Maizere James on +263732446339 or mail to maijamez@gmail.com. The findings are accessible for one year. Should you require any further information or want to contact the researcher about any aspect of this study, please contact +263732446339/+263772446339 or mail to maijamez@gmail.com. Should you have concerns about the way in which the research has been conducted, you may contact Dr Mukuna on +27810451473 or mail to MukunaKR@ufs.ac.za participants may have network inconvenience in terms of network and bundles when they want to contact the researcher or the supervisor of the researcher. This will also take their precious time.

Thank you for taking time to read this information sheet and for participating in this study.

CONSENT TO PARTICIPATE IN THIS STUDY

I, _____ (participant name), confirm that the person asking my consent to take part in this research has told me about the nature, procedure, potential benefits and anticipated inconvenience of participation.

I have read (or had explained to me) and understood the study as explained in the information sheet. I have had sufficient opportunity to ask questions and am prepared to participate in the study. I understand that my participation is voluntary and that I am free to withdraw at any time without penalty (if applicable). I am aware that the findings of this study will be anonymously processed into a research report, journal publications and/or conference proceedings.

I agree to the recording of the *insert specific data collection method*.

I have received a signed copy of the informed consent agreement.

Full Name of Participant:

Signature of Participant: _____ Date: _____

Full Name(s) of Researcher(s):

Signature of Researcher: _____ Date:

Appendix 9



PARTICIPANT INFORMATION LEAFLET AND ASSENT FORM



TITLE OF THE RESEARCH PROJECT: Exploring academic experiences of deaf children in a primary school in Zimbabwe.

RESEARCHERS NAME(S): Maizere James

ADDRESS: Seke Teachers College, Box SK41, Seke, Chitungwiza, Harare, Zimbabwe

CONTACT NUMBER: +263732446339

What is RESEARCH?

Research is something we do to find new knowledge about the way things (and people) work. We use research projects or studies to help us find out more about phenomena. Research also helps us to find better ways of dealing with phenomena like education, contemporary issues or Inclusive Education.

What is this research project all about?

The study deals with your experiences in learning in mainstream classes. I am carrying out this study about your academic experiences in mainstream classes so that improvements may be made to your education. Your honesty participation in this study may improve your education

Why have I been invited to take part in this research project?

You have been selected to participate in this study because, as a deaf child, you are rich in deaf children's lived academic experiences in mainstream classes.

Who is doing the research?

I am Maizere James. I work for the Ministry of Higher and Tertiary Education, Science and Technology Development. I am carrying out this study to explore the lived academic experiences of deaf children in inclusion so as to make recommendations that may improve their academic experiences in Inclusive Education

What will happen to me in this study?

I chose deaf learners so that they express to me their lived academic experiences during learning in mainstream classes. I purposively chose them to participate in this study.

Can anything bad happen to me?

Your duty will be to answer questions that are related to your learning experiences. You should tell your parents if you happen not to be feeling well during data collection process. You should answer the questions freely and honestly. No physical harm on you is anticipated.

Can anything good happen to me?

The benefits you are going to get are related to your Inclusive Education. The teaching/learning process may improve in line with the recommendations this study may make. Teaching/learning resources may improve in terms of availability, quantity and quality. Language of instruction preference may also be adopted. Participation of deaf children in learning may also improve.

Will anyone know I am in the study?

Your participation will be kept confidential. The information s/he will give in the study will be kept confidential as well, but information about you will be given to the study sponsor.



Who can I talk to about the study?

Should you require any information or want to contact the researcher about any aspect of this study, please contact him on +263732446339/+263772446339 or mail to maijamez@gmail.com. Should you have concerns about the way in which the research has been conducted, you may contact Dr Mukuna on +27810451473 or mail to MukunaKR@ufs.ac.za.

What if I do not want to do this?

You can decide not to participate in this study even if your parents have consented. You may as well decide to withdraw from participating at any time without getting in trouble as long as the process has not been completed.

Do you understand this research study and are you willing to take part in it?

YES	NO
-----	----

Has the researcher answered all your questions?

YES	NO
-----	----

Do you understand that you can pull out of the study at any time?

YES

NO

Signature of Child

Date

PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM

TITLE OF THE RESEARCH PROJECT: Exploring academic experiences of deaf children in a primary school in Zimbabwe

REFERENCE NUMBER:

PRINCIPAL INVESTIGATOR: Maizere James

ADDRESS: Seke Teachers College, Box SK41, Seke, Chitungwiza, Harare, Zimbabwe

CONTACT NUMBER: +263732446339

You are being invited to take part in a research project. Please take some time to read the information presented here, which will explain the details of this project. Please ask the study staff or doctor any questions about any part of this project that you do not fully understand. It is very important that you are fully satisfied that you clearly understand what this research entails and how you could be involved. Also, your participation is **entirely voluntary**, and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part.

This study has been approved by the Research Ethics Committee at the University of the Free State and will be conducted according to the ethical guidelines and principles of the international Declaration of Helsinki, South African Guidelines for Good Clinical Practice and the Medical Research Council (MRC) Ethical Guidelines for Research.

What is this research study all about?

The study deals with your experiences in learning in mainstream classes. I am carrying out this study about your academic experiences in mainstream classes so that improvements may be made to your education. Your honest participation in this study may improve your education

Why have you been invited to participate?

You have been selected to participate in this study because, as a deaf child, you are rich in deaf children's lived academic experiences in mainstream classes.

What will your responsibilities be?

Your duty will be to answer questions that are related to your learning experiences. You should tell your parents if you happen not to be feeling well during data collection process. You should answer the questions freely and honestly. No physical harm on you is anticipated.

Will you benefit from taking part in this research?

The benefits you are going to get are related to your Inclusive Education. The teaching/learning process may improve in line with the recommendations this study may make. Teaching/learning resources may improve in terms of availability, quantity and quality. Language of instruction preference may also be adopted. Participation of deaf children in learning may also improve.

Are there in risks involved in your taking part in this research?

No risks are anticipated in your taking part in the study. *Your participation will be kept confidential. The information s/he will give in the study will be kept confidential as well, but information about you will be given to the study sponsor.*

If you do not agree to take part, what alternatives do you have?

You can decide not to participate in this study even if your parents have consented. You may as well decide to withdraw from participating at any time without getting in trouble as long as the process has not been completed.

Who will have access to your medical records?

Your participation will be kept confidential. The information s/he will give in the study will be kept confidential as well, but information about you will be given to the study sponsor. Your identity remains anonymous even in the case of publication of this research study

What will happen in the unlikely event of some form of injury occurring as a direct result of your taking part in this research study?

No harm of or injury is anticipated to directly occur as a result of participating in interviews and focus group discussions in this study.

Will you be paid to take part in this study and are there any costs involved?

No, you will not be paid to take part in the study, unless you will be inconvenienced in terms transport and meals. There will be no costs involved for you if you do take part.

Is there anything else that you should know or do?

You should inform your family practitioner or usual doctor that you are taking part in a research study. (Include if applicable)

- **You should also notify your medical insurance company that you are participating in a research study. (Include if applicable)**

You can contact Dr Kananga Mukuna Robert at tel +27810451473 if you have any further queries or encounter any problems.

- **You can contact the Research Ethics Office at 051 4019398 if you have any concerns or complaints that have not been adequately addressed by your study doctor.**
- **You will receive a copy of this information and consent form for your records.**

Declaration by participant

By signing below, I agree to take part in a research study entitled (*insert title of study*).

I declare that:

I have read or had read to me this information and consent form, and it is written in a language with which I am fluent and comfortable.

I have had a chance to ask questions, and all my questions have been adequately answered.

I understand that taking part in this study is **voluntary** and I have not been pressurized to take part.

I may choose to leave the study at any time and will not be penalized or prejudiced in any way.

I may be asked to leave the study before it has finished if the study doctor or researcher feels it is in my best interests, or if I do not follow the study plan, as agreed to.

Signed at (*place*) on (*date*) 2019.

Signature of Participant

Signature of witness

Declaration by investigator

I, Maizere James, declare that:

I explained the information in this document to

I encouraged him/her to ask questions and took adequate time to answer them.

I am satisfied that he/she adequately understands all aspects of the research, as discussed above

I did/did not use an interpreter. (*If an interpreter is used then the interpreter must sign the declaration below.*)

Signed at (*place*) on (*date*) 2019.

Signature of investigator

Signature of witness

Declaration by interpreter

I (*name*) declare that:

I assisted the investigator (*name*) to explain the information in this document to (*name of participant*)
Using the language medium of Sign language.

We encouraged him/her to ask questions and took adequate time to answer them.

I conveyed a factually correct version of what was related to me.

I am satisfied that the participant fully understands the content of this informed consent document and has had all his/her question satisfactorily answered.

Signed at (*place*) on (*date*)

Signature of interpreter

Signature of witness

CONSENT FORM FOR CASE REPORTS²

For a participant consent to the publication of information about them in a journal or thesis

Name of person described in article or shown in photograph: _____

Subject matter of photograph or article: _____

Title of article: _____

Medical practitioner or corresponding author: _____

I _____ [insert full name] give my consent for this information about MYSELF OR MY CHILD OR WARD/MY RELATIVE [insert full name]: _____, relating to the subject matter above (“the Information”) to appear in a journal article, or to be used for the purpose of a thesis or presentation.

I understand the following:

5. The Information will be published without my name/child’s name/relatives name attached, and every attempt will be made to ensure anonymity. I understand, however, that complete anonymity cannot be guaranteed. It is possible that somebody somewhere - perhaps, for example, somebody who looked after me/my child/relative, if I was in hospital, or a relative - may identify me.
6. The Information may be published in a journal which is read worldwide or an online journal. Journals are aimed mainly at health care professionals but may be seen by many non-doctors, including journalists.
7. Information may be placed on a website.
8. I can withdraw my consent at any time before online publication, but once the Information has been committed to publication it will not be possible to withdraw the consent.

Signed: _____ Date: _____

Signature of requesting medical practitioner/health care worker:

_____ Date: _____

Appendix 10

RESEARCH STUDY INFORMATION LEAFLET AND PARENTAL CONSENT FORM

DATE

01/09/2019

² Adapted from *BMJ Case Reports* consent form & Stellenbosch University Ethics Templates

Approval number: UFS-HSD2019/1103

WHAT WILL HAPPEN TO YOUR CHILD IN THIS STUDY?

I chose deaf learners so that they express to me their lived academic experiences during learning in mainstream classes. I purposively chose them to participate in this study.

CAN ANYTHING BAD HAPPEN TO YOUR CHILD?

Your duty will be to answer questions that are related to your learning experiences. You should tell your parents if you happen not to be feeling well during data collection process. You should answer the questions freely and honestly. No physical harm on you is anticipated.

CAN ANYTHING GOOD HAPPEN TO YOUR CHILD?

The benefits you are going to get are related to your Inclusive Education. The teaching/learning process may improve in line with the recommendations this study may make. Teaching/learning resources may improve in terms of availability, quantity and quality. Language of instruction preference may also be adopted. Participation of deaf children in learning may also improve.

WILL ANYONE KNOW YOUR CHILD IS PART OF THE STUDY?

Your participation will be kept confidential. The information s/he will give in the study will be kept confidential as well, but information about you will be given to the study sponsor.

WHO CAN YOU TALK TO ABOUT THE STUDY?

Should you require any information or want to contact the researcher about any aspect of this study, please contact him on +263732446339/+263772446339 or mail to maijamez@gmail.com. Should you have concerns about the way in which the research has been conducted, you may contact Dr Mukuna on +27810451473 or mail to MukunaKR@ufs.ac.za.

WHAT IF YOU DO NOT WANT YOUR CHILD TO DO THIS?

You can decide not to participate in this study even if your parents have consented. You may as well decide to withdraw from participating at any time without getting in trouble as long as the process has not been completed.

PLEASE RETURN

Name of child: _____

Name of Parent: _____

- Do you understand this research study and are you willing to let your child take part in it? Yes No
- Has the researcher answered all your questions? Yes No
- Do you understand that you can withdraw from the study at any time? Yes No
- I give the researcher permission to make use of the data gathered from my child's participation Yes No

Signature of Parent

Date

Appendix 9:

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and your feelings.

Focus group discussions 1

N=6

- 1) Bio data (sex, qualification, experience, hearing status)
- 2) Who pays school fees for deaf children? Any external support?
- 3) How do they access educational needs? (Stationery, fees, uniforms). Any external support?
- 4) What are the resource/academic/psychosocial experiences of deaf children at this school?
(Discuss resources-material including technological/financial (payment of fees, stationery, uniforms, attendance/transport)/human, psychosocial/self-esteem)
- 5) How does the current state of resources affect your teaching? (Human, material, financial, technological)
- 6) What are your experiences in teaching deaf learners at this school? (Discuss challenges & successes (Curriculum, ratios, Time allocation, resources, attitudes).
- 7) Does the School have enough required resources in teaching deaf children? (Discuss teachers (qualifications, hearing status), interpreters, physiotherapists, speech therapists, Doctors/ENTs, audiologists)
- 8) What are deaf children's curriculum experiences? (Discuss modification, language, transition programmes, instruction, time for task completion and instruction, ratios, individual differences)

- 9) Do deaf children socialise with hearing children? If yes, which language do deaf/hearing children in their socialisation process
- 10) Do you allocate social roles and duties to deaf children? (If not, why?)
- 11) What are the benefits of teaching deaf children in a regular school? (To deaf/hearing children, school staff, community)

Appendix 10

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and your feelings.

Focus group discussion 2: N=6

- 1) Bio data (sex, qualification, experience)
- 2) How do you enrol your deaf children? (Placement? Just enrol like hearing?)
- 3) Are you comfortable with enrolling deaf children at this school? (If not, why?)
- 4) What are your experiences in teaching deaf learners in a mainstream school?
- 5) Are you able to sign?
- 6) Which language do deaf learners use for teaching/learning purposes?
- 7) Which language do you use to teach deaf learners?
- 8) Is the language you use to teach them the language they understand and prefer for communication/teaching/learning?
- 9) Are you competent in this language?
- 10) Which languages do you teach at this school?
- 11) Which language do deaf children use to communicate with hearing peers? (In participation socially)
- 12) What are deaf children's experiences in learning in a mainstream school?
Curriculum/psychosocial, esteem/language/participation
- 13) What are the benefits of teaching deaf children in a regular school? Unhu/Ubuntu/cultural issues/bilingualism

- 14) How are you capacitated in teaching/communicating deaf children? (Staff development, workshops, in-service, research). If any capacitation, how often?
- 15) Do you work with other staff members/schools to enrich yourselves in terms of Deaf Education? Collaboration.
- 16) What are your training needs to improve your skills in the teaching/learning of deaf children?

Appendix 11

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and your feelings.

Interview for Deaf children: N=5

- 1) Which teaching/learning resources are available for your teaching/learning?
- 2) Do you have friends who are hearing?
- 3) Which language do you use when talking to your friends who are not deaf? (Can school staff members and hearing peers use this language proficiently)
- 4) Which language is used to teach you?
- 5) Are you proficient in this language?
- 6) Is this the best language for you in communication with friends or in learning?
- 7) What are your experiences in learning at this school? (Challenges, good this/benefits, resources, acceptance, psychosocial, esteem, curriculum-language, time allocation, individual attention)
- 8) Given the option, would you choose to learn at this school or special school? (Discuss reasons)
- 9) Do teachers talk to you about your problems at school? (If yes, do you find your discussions helpful?)
- 10) What is your best mark in the subjects you learn?
- 11) What issues do you think are a challenge to your academic successes?

12) Are given duties to carry out at school? (Discuss sending, duties carried out by hearing peers, prefects, captains)

13) Do you take part in sporting activities?

Appendix 12

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and feelings.

Interview for Psychologists: N=4

- 1) Who constitute Schools Psychological Services (SPS)? (Discuss qualifications)
- 2) What is the role of SPS in the education of deaf children (Discuss assessment, placement, psychological services, academic services, resources provision)
- 3) Do you have schools that you recommend deaf learners to attend? (Justify stance)
- 4) What experiences do you encounter as you play this role?
- 5) Which resources do your schools have for the education of deaf children? (Human, material, financial or technological-Discuss availability/adequacy/state). (What plans are in place for these resources? (Replenish or stock))
- 6) Do you have a policy/legislation on the education of deaf children? (Discuss provisions in terms of Inclusion, Language of instruction/communication, interpreters, early identification/early intervention, funding *etc*)
- 7) Do you recommend the teaching of Sign language as a language in primary schools? (Discuss availability of syllabus, Whether examinable)
- 8) What academic experiences do deaf children have in mainstream schools?
- 9) What psychosocial experiences do deaf children encounter in mainstream schools?
- 10) Does the education system involve parents in the psychosocial and academic welfare of deaf children? (Discuss the issue-relevance/irrelevance)

11) Do you hold public awareness campaigns on deaf academic and psychosocial issues?

(Discuss the issue in terms of resources and benefits to deaf children, parents of deaf children and communities as well as the relevance/irrelevance of the issue)

12) Do deaf learners sit the same examinations as hearing learners? (Discuss provisions-

language of questioning (same as language of instruction), additional time, marking)

Appendix 13

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of the study and will not be shown or used for any other purpose. Your identity will remain anonymous. Feel free to express your views, sentiments and your feelings.

Interview for school administrators: N=2

- 1) What is your qualification in relation to deaf studies? (qualifications, statuses (deaf, hearing), experience)
- 2) What is your view on deaf children learning in mainstream schools?
- 3) What do deaf children benefit from learning in mainstream schools?
- 4) What academic support/psychosocial services do you offer to deaf learners? (counselling, teaching, audiometric assessment or sport)
- 5) Which resources does the school have for the education of deaf children? (Material, human, financial, technological) Are they enough?
- 6) How do you procure for the teaching/learning of deaf learners at this school? (Human, material, technological, discuss challenges/successes in procurement). Do you have some external assistance? (Donors, individual parents, well-wishers, *etc*)
- 7) Who places deaf learners at this school? (Discuss participant's influence in placement)
- 8) Does the school and community welcome the idea of deaf children learning in mainstream education system? (Parents of hearing children/deaf children)
- 9) How long is each lesson period? Do you think this is the ideal time allocation for teaching/learning of deaf children?

- 10) Which subjects do deaf children learn? (How are they performing in each of these subjects)? Which language is used to teach deaf children/communicate with deaf children in the school?
- 11) Is this the language deaf learners prefer to use when participating socially or academically?
- 12) How do you assess deaf children, both in internal and terminal examinations? (Language (mode of language of questioning), Time, interpreters).
- 13) Are there any programmes for teaching teachers Sign language?
- 14) Do you supervise teachers who teach deaf learners? (If yes, what are your experiences in supervising these children?)
- 15) What are your experiences (From observation as teachers teach/deaf children learn) in teaching/learning of deaf children?
- 16) Who pays for deaf children's school fees? (Are they up to date in terms of payment? If not, how you treat them?)
- 17) How does the school keep abreast with inclusive Education issues and its dynamic nature? (Discuss Research, staff development, workshops, in-service, Training needs)

Appendix 14

I am Maizere James, a student with the University of the Free State. I am carrying out a study on the title '*Exploring academic experiences of deaf children in a primary school in Zimbabwe*'. The data I am collecting from you will be used strictly for the purpose of this study. Your identity will remain anonymous. Feel free to express your views or sentiments and your feelings.

Interview schedule for the deaf teacher

- 1) What is deaf culture?
- 2) What are the values of the Deaf culture?
- 3) What is the difference between 'deaf' lowercase and 'Deaf' uppercase?"
- 4) Which type school do deaf children prefer to attend?
- 5) Do deaf children want socialise with hearing children?
- 6) Which language do deaf children prefer to use during learning and in social circles?
- 7) Are the teachers able to use this language?
- 8) Which language mode do children of deaf parents use?
- 9) Which teaching and learning resources are available for the education of deaf children?
- 10) Do deaf children have the same sports as the hearing children?
- 11) How do deaf children access information in a hearing community

Appendix 15: Turnitin report

Turnitin report

Feedback Studio - Google Chrome
ev.turnitin.com/app/carta/en_us/?o=1363635043&u=1089450916&lang=en_us&session-id=24631487f29e475a88fadef6753dc883&s=3

feedback studio | PhD 3 | /100

Match Overview

11%

Match	Source	Similarity
1	Submitted to Midlands ... Student Paper	1%
2	uir.unisa.ac.za Internet Source	1%
3	Submitted to University... Student Paper	1%
4	hdl.handle.net Internet Source	<1%
5	Submitted to Zimbabw... Student Paper	<1%
6	Submitted to University... Student Paper	<1%
7	Submitted to University... Student Paper	<1%

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Appendix 16: Editor's letter

University of KwaZulu-Natal
Office Number IX06 TB Davies Ext, MTB
Howard College Campus
Durban 4041
South Africa

Main Email Address: kemishumba@gmail.com

Alternative Email Address: shumbak@ukzn.ac.za

Mobile Number: +27 78 315 6186

01 July 2020

To Whom It May Concern,

Re: Editor's Letter

The letter serves to outline the scope of activities that were done during editing of a PhD thesis titled:

EXPLORING ACADEMIC EXPERIENCES OF DEAF CHILDREN IN A PRIMARY SCHOOL IN ZIMBABWE

The following activities were done;

- Grammar check
- Sentence construction
- Spelling check
- Punctuation
- In-text referencing

As a professional editor, I pledge that the above aspects of the manuscript were, to the best of my knowledge, meticulously and correctly done at the time the work was sent to the student. I am not responsible for any corrections that were made after the editing process.

Faithfully,

Kemist Shumba (Ph. D)