

Teaching And Information Needs Of Learners With Disabilities On Covid 19 In Harare Province In Zimbabwe

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Abstract

Background: Coronaviruses are a family of viruses that can cause respiratory illness in humans. They are called corona because of crown-like spikes on the surface of the virus. Severe acute respiratory syndrome (SARS), Middle East respiratory syndrome (MERS) and common cold are examples of corona viruses that cause illness in humans. COVID-19 pandemic was first discovered in Wuhan, China in December 2019. On the 11th of March 2020, the World Health Organisation (WHO) declared the outbreak of COVID 19 a global pandemic, (World Health Organisation, 2020). The virus infected and effected enormous population globally including the African continents. COVID-19 is currently one of the leading death causes around the globe. According to (WHO, 2020) a total of 2 763 421 cases and 65 602 deaths were recorded in African countries by December 2020. The statistics reported in Africa were accounting for the 3.4 % of 82 312 150 cases and 3.6% of the total reported deaths of 1 798 944 worldwide

Materials and Methods: This study sought to explore the teaching and information needs of learners with disabilities on COVID 19 from one primary school and one secondary special school in Harare, Zimbabwe. The study participants comprised of learners, teachers and key informants. A total of 55 respondents participated in this study (40 learners with physical, visual and hearing impairments from one secondary Special School and one primary special school, 10 special needs teachers and 5 key informants comprised District Schools Inspector, schools heads, and Educational Psychologist from Harare Province Ministry of Education).

Results: Findings from participants indicated that information on COVID 19 is not easily accessible to the majority of learners with disabilities especially the hearing impaired the visually impaired and those with multiple challenges and that teachers manning special needs facilities are inadequately resourced. The research also revealed that the majority of learners with disabilities lack deeper understanding of COVID 19 issues as indicated by their prevention practices. The study recommends that the teaching and information needs of learners with disabilities should be considered in emergency preparedness and response plans through disability inclusive plans.

Conclusion: The study revealed that COVID 19 information was not readily available in braille, sign language, videos and enlarged print leading to the conclusion that COVID 19 information is inaccessible to the majority of learners with disabilities. They are no adequate resources to support the teaching and information needs of learners with disability on COVID 19 leaving the learners more vulnerable to the pandemic. If these learners remain vulnerable it simple means the whole nation is at risk as they may become super spreaders of the virus both at home, school and nation at larger.

Key Words: Disability; Coronavirus disease, teaching and learning, information needs

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I. Introduction

Coronaviruses are a family of viruses that can cause respiratory illness in humans. They are called corona because of crown-like spikes on the surface of the virus. Severe acute respiratory syndrome (SARS), Middle East respiratory syndrome (MERS) and common cold are examples of corona viruses that cause illness in humans. COVID-19 pandemic was first discovered in Wuhan, China in December 2019. On the 11th of March 2020, the World Health Organisation (WHO) declared the outbreak of COVID 19 a global pandemic, (World Health Organisation, 2020). The virus infected and effected enormous population globally including the African continents. COVID-19 is currently one of the leading death causes around the globe. According to (WHO, 2020) a total of 2 763 421 cases and 65 602 deaths were recorded in African countries by December 2020. The statistics reported in Africa were accounting for the 3.4 % of 82 312 150 cases and 3.6% of the total reported deaths of 1 798 944 worldwide. Currently, the world has not yet found cure for the pandemic and the best way to prevent infection is to take every day preventative actions such as correct wearing of mask indoors

and outdoors where physical distancing is not possible, avoiding crowds and poorly ventilated areas, get vaccinated and staying at home when not feeling well among others.

Zimbabwe recorded its first COVID 19 case on the 19th of March 2020 and from there the cases have been rising (Ministry of Health and Child Care Zimbabwe, 2020). On the 27th of March 2020, the government of Zimbabwe in response to the global pandemic declared COVID 19 a national disaster. This declaration was followed by a national lockdown which was guided by the World Health Organisation regulations. The pandemic has resulted in huge disruption of the education system and it has negatively impacted on the teaching and learning of all children worldwide including learners with disabilities. All institutions from pre-primary schools to tertiary institutions were affected by COVID 19. About 94% of learners globally were affected by the pandemic, representing 1.58 billion children and youths, (UNESCO, 2000a). COVID 19 has also resulted in limited learning time for all children including learners with disabilities. This has adversely impacted on learner performance by prohibiting face to face learning and switching on to virtual learning. In Africa, COVID-19's most consequential impacts on education have been identified as the widening of inequalities, increase in marginalisation, and the inability of the most disadvantaged students to pursue their studies and acquire knowledge and skills that support a healthy transition to adulthood (UN, 2020; UNDP, 2020; UNESCO IESALC, 2020). The most affected students include those whose foundational learning was not strong: girls, children and youth with disabilities, refugee, migrant and displaced children (Education Cannot Wait, 2020; Save the Children, 2020). The Ministry of Primary and Secondary Education in Zimbabwe, in response to this developed Education Sector COVID-19 response plan or strategy. In general, a phased educational response to COVID-19 has been adopted which ensure continuity of education through distance learning during the pandemic, re-open the schools and resume face-to-face teaching when the pandemic is over, and restructure the organisation of teaching and learning to benefit from the lessons learnt in the first phase, especially concerning quality of services and equity (UNESCO IESALC, 2020). In line with this phased approach, the Zimbabwe Education Cluster COVID-19 Preparedness and Response Strategy (2020) have the following objectives:

- Ensuring continuity of learning through the implementation of key activities aimed at quality of learning and well-being of teachers, learners and school communities during the COVID-19 emergence.
- To support teachers, learners and school communities to prevent the transmission and spread of COVID-19.
- To facilitate the safe return to quality learning for teachers, learners and school communities after the COVID-19 emergency (Zimbabwe Education Cluster, 2020, p. 3).

The strategies were done for all learners but targeting mainly the average learners and those elite schools with resources, the plan did not consider those with limited resources, marginalised, below average and those with special needs that are learners with disabilities. It is against this background that the research seeks to investigate the teaching and information needs of learners with disabilities on COVID 19. The pandemic has created a human crisis on an unprecedented scale, which has disproportionately impacted persons with disabilities. A report World Health Organisation, (2021) indicated that persons with disabilities are at higher risk of contracting COVID 19 virus, mainly due to environmental barriers that limit effective protection against infection. Some barriers include lack of timely and accessible public health information that can result either in not receiving the necessary messages or receiving them too late. It was also noted that few countries and public health organizations distributed guidelines in formats accessible to persons with disabilities, formats including the use of plain language, easy read formats, electronic screen readers, or captioning and sign language. It was also discovered by World Health Organisation that the current public health messaging often does not reach people who are institutionalized or those with mental health and substance use disorders who have limited personal resources and unstable housing conditions or homeless (WHO, 2021).

Disability is defined CDC (2019) as any condition of the body or mind that makes it difficult for the person with the condition to do certain activities (activity limitation) and interact with the world around them (participation restrictions. According to the Ministry of Primary and Secondary Education (2020), they are approximately 52 232 children with disabilities in Zimbabwe. UNICEF further highlighted that learners with disabilities are among the world's most vulnerable, stigmatised and marginalised groups of people either in the presence or absence of the pandemic. One of the major reasons that predispose people or learners with disabilities to greater risk of infections during various pandemics is lack of access to information, (UN, 2020).

Most learners with disabilities come from poor backgrounds, now that learning is being done online these learners has no or limited access to televisions, radios, gadgets and internet. Online learning is expensive and can be unaffordable to many learners including those with learning disabilities who are already disadvantaged. Considering the individualised instructional learning approach used for learners with disabilities, it is difficult for this to be done online. More so, most parents for these learners cannot interpret information for their children. Before COVID 19 era, teaching of learners with disabilities was mainly done at school through specialised teachers with specialised skills. Learners get most of their information through school including on aspects of daily life. Now that COVID 19 has resulted in disruption of teaching and learning through temporary closure of school and elimination of face to face learning, it has become difficult also for learners with

disabilities to acquire new information including COVID 19 education. This has also prompted the researcher to explore the teaching and information needs of learners with disabilities on COVID 19 pandemic. Early marriage impacts female teenagers emotionally, economically, physically, psychologically and socially (Ahmed, 2013; Banerjee et al., 2009; Girls Not Brides, 2015; Goli et al., 2015; Montazeri et al., 2016; Santhya, 2011). According to UN (2016), early marriages are not only disrespect to the dignity and well-being of individual girls/teenagers, but they also deprive nations of the social and economic benefits that derive from an educated and skilled female population. More bluntly, these marriages rob the female teenagers and short-change them of the contributions they could have made as women in their future life. In fact, UNICEF (2014) concludes that female teenager marriage is one of the most destructive demonstrations of inequality and power imbalance between women and men.

II. Materials and Methods

This was an explorative study on teaching and learning needs of learners with disabilities on COVID 19 was carried out in Harare Province, Zimbabwe. The study was conducted from October 2021 to January 2022. A total of 40 respondents within the age range 11 to 55 years were part of the study.

Research design: The study utilised a qualitative approach to explore the teaching and learning needs of learners with disabilities in Harare, Zimbabwe. Specifically an interpretive phenomenological approach was adopted wherein focus group discussions and interviews were used as data collection methods. The approach is appropriate for studies to identify phenomena as they are perceived by actors (Lester, 1999).

Study Location: The study was carried in Harare Province in Zimbabwe.

Study Duration: October 2021 to January 2022.

Sample size: 55 (40 learners, 10 special needs teachers and 5 key informants).

Subjects and selection method: Learners were purposively sampled by the teachers and then referred to the researcher. The final sample of learners included those with visual, physical and hearing impairment.

Procedure methodology

The researcher first obtained a letter of approval from Midlands State University to prove to the participants and ministry authorities that she was authorized to undertake the study. Approval was sought and obtained from the Ministry of Primary and Secondary Education to undertake the study in Harare Province. Thereafter the school authorities allowed the researcher to conduct the study at their schools. During the focus group discussions, the researcher made use of sign language interpreter since she was not well versed in sign language. The participants' names were withheld for the purposes of confidentiality; the researcher used pseudo names instead. Consent for learners to participate in the research was obtained from the school since they could not consent for themselves as minors. The key informants and specialist teachers verbally consented involvement in the study. The focus groups and interviews were scheduled for the time which was comfortable for the participants.

Data analysis

Content analysis was used to analysis and draw themes from the data. The aim was to attain a condensed and broad teaching and learning needs of learners with disability. This involved reading each in-depth interviews and focus group discussions to identify potential codes and creating a coding system and assigning it to relevant texts. An independent person was asked to check the coding system. Various theme and sub themes which emerged from in-depth interviews and focus group discussions are presented in the section which follows.

III. Results

The major themes that emerged from this research include availability and accessibility of information and resources, knowledge levels and prevention of COVID 19 among learners with disability. All these themes are to be discussed in the following paragraphs.

The study revealed that learners with disability have minimal knowledge and lacks deeper understanding of COVID 19 information as indicated findings from specialist teachers that the learners are sometimes found practicing risk behaviour such as greeting each other, sharing bottle drinks and not wearing masks. Learners have the basic knowledge on how the pandemic is contracted, spread and prevented. However learners with physical impairment and those with visual impairment indicated that despite their knowledge that there is need to maintain social distance, it is sometimes difficult to practice that because they need physical assistance which will in turn put them at greater risk of getting the infection. They always need someone to assist them with their day to day activities such as pushing their wheel chairs, going to the toilet and others with cerebral palsy they even need assistance with feeding. The findings on knowledge level of learners with disabilities are in line with health belief model concepts which state that people should be well informed for

them to make informed decisions, (Corner and Norman, 2015). Guided by the Health Belief Model learners with disabilities should be well informed about the pandemic, get a deeper understanding about the pandemic for them to make informed decisions towards protecting themselves and others from the corona virus disease

According to research findings, learners with disability have no access to information in various formats. Information about COVID 19 is only found in written formats and still the written books are very few. There is no information about COVID 19 in Braille, sign language, videos accompanied with words, enlarged prints as well as recorded information. Learners with hearing impairment, visual impairment and intellectually challenged are finding it difficult to access information on COVID 19 leaving them with no or little knowledge about the pandemic. These findings are in line with a study conducted by Juma, (2020) in Tanzania which established that there is no publicly available information on the COVID 19 pandemic for people with disabilities. Furthermore, research by Able Child Africa Partner Network in Africa in 2021 alluded that there is lack of disability inclusive information on COVID-19, including health updates, hygiene advice and social distancing guidance. Learners with disabilities are excluded from getting the COVID 19 information which is vital to them as a vulnerable group. A further analysis of these findings indicated that it is the society that is disabling people by failing to provide information and environments that are accessible to these learners with disability as pointed out by the Social Model of Disability. It is the society that is disabling people by creating communication and information barriers through failing to provide COVID 19 information to learners with disabilities in accessible formats such as braille and sign language. Providing COVID 19 information in those various formats will make learners with disabilities aware of COVID 19 information just like anyone else in this world but not providing is total exclusion thereby putting their health, life at risk

Findings from the research accentuated that teachers and special needs facilities are not adequately equipped to teach and support learners with disability during the current COVID 19 era. Teachers have no enough information and skills as educators. There are no resources such as IEC material in accessible formats, ICT gadgets such as television screens, recorders, and laptops with software to support the learning of learners with disabilities. More so, teachers indicated that they are not well resourced to disseminate information; they don't have data and access to free or affordable Wi-Fi which will in turn affect their knowledge banks as educators. If the teachers are not well resourced to teach learners with disability about COVID 19, then there is no information in the community. The scenario presented by learners with disability and specialist teachers fits well into the Community Education Model which views any problem as lack of education. The key components of this model are participation, empowerment, strengths, assets/ resources and capital. It also emphasized that the only way to mitigate disasters such as corona virus is through educating communities on disaster preparedness, Engelbrecht (2005). Therefore lack of resources to empower these learners with disabilities through education will result in risking their lives as they will not be able to protect themselves and others from the pandemic due to lack of information/ education about COVID 19

Findings from the focus group discussions and interviews with key informants exhibited that learners with disabilities are not able to protect themselves and others from covid 19 due to various reasons. Some of the reasons noted were that learners with disabilities have multiple disabilities and conditions such as difficult breathing, weak fine and gross motor skills, drooling which prohibit them from wearing masks and survive independently without assistance from care givers. Some learners with physical impairment or with cerebral palsy find it difficult to do their daily activities without assistance from caregivers such as pushing their wheelchairs, lifting them up from one place to another and feeding them. In such circumstances, social distancing and wearing of masks automatically becomes impossible leaving these people at risk. These findings are closely related to what was also found out by Able Child Africa Partner Network during their home visit in Malawi. They discovered that children with disabilities were shaking hands with non- family members during their visits whilst others were observing COVID 19 regulations, (Child Africa Partner Network, 2020). Furthermore, a report by World Health Organisation, (2021) indicated that persons with disabilities are at higher risk of contracting COVID-19 virus, mainly due to environmental barriers that limit effective protection against infection which is in line with the current research findings.

IV. Conclusion

The study revealed that COVID 19 information was not readily available in braille, sign language, videos and enlarged print leading to the conclusion that COVID 19 information is inaccessible to the majority of learners with disabilities. They are no adequate resources to support the teaching and information needs of learners with disability on COVID 19 leaving the learners more vulnerable to the pandemic. If these learners remain vulnerable it simple means the whole nation is at risk as they may become super spreaders of the virus both at home, school and nation at larger.

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