CATERING FOR CHILDREN WITH SPECIAL EDUCATION NEEDS IN THE PROVISION OF EARLY CHILDHOOD DEVELOPMENT PROGRAMME IN ZIMBABWE: TOWARDS A HOLISTIC AND INCLUSIVE FRAMEWORK

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SUPERVISOR: PROFESSOR S. REMBE
JANUARY 2016
Declaration

I hereby solemnly declare that, to the best of my knowledge and belief, this thesis entitled “Catering for children with special education needs in the provision of Early Childhood Development programme in Zimbabwe: towards a holistic and inclusive framework” is my original work. It has not been submitted to any other institution of higher learning for the award of any degree or qualification. Where I have used information from the published or unpublished work of other scholars, I have acknowledged such sources both in the text and in the list of references.

Chinhara, Henry January 2016

Signed Date: 24th January 2016
Abstract

The study investigated how primary schools in Chiredzi District in Zimbabwe, cater for ECD “A” and “B” children with special education needs. A mixed method design located in the pragmatism paradigm was used to carry out the study. Post-positivist is an interactive process which produced in-depth, detailed, rich data from personal perspectives and experiences that resulted in realistic understanding of phenomenon, interpreted through the social and cultural context of respondents’ lives. By adopting quantitative and qualitative approaches, the researcher was able to ensure a high level of reliability in the collected data, at the same time obtaining comprehensive information on how primary schools attaching preschool classes in Chiredzi district cater for ECD “A” and “B” children with special education needs. Purposive sampling and cluster sampling procedures were used to solicit information from ECD teachers, school heads, parents, the District Education Team, NGOs and critical government ministries through semi-structured questionnaires, face-to-face interviews, focus group discussions, observations and document analysis.

The study established that, while the government carries out its mandate of providing social services to learners with special education needs, they are incapacitated due to lack of resources. The majority of schools are not providing adequate health facilities for learners with special education needs. Furthermore, most schools are not providing nutritional supplementation to vulnerable learners, situations which deprive the learners with the much needed opportunity to grow and develop to the anticipated potential. In addition, the study noted that, ECD “A” and “B” children with special education needs enrolled in classes attached to primary schools do not access Basic Education Assistance Module (BEAM) or Cash Transfers to alleviate the children that are in need. It came out that such a situation impacts on learners’ attendance and subsequently their learning outcomes.

Regardless of the stipulations by international treaties on the nature of inclusive education, the study established that, the education system has not yet modified curriculum to accommodate learners with diversified forms of special education needs. The situation is made worse by the fact that, heads of schools, and teachers are not adequately trained to handle learners with special education needs in early childhood development programmes. In addition, schools face the challenge of scarcity of learning resources that support ECD learners with special education
needs which seriously impact on the growth and development of young learners at this critical stage of their development. Regardless of the essence of continuous professional development programs, in schools whose purpose is to redress the professional gap in schools, the study found that the CPD are doing very little to transform the mind-set of teachers. The study concluded that learners with special education needs are not benefiting from the current inclusive education programme. The study recommends that following:

- Stakeholders work together to promote the health and nutritional needs including other social services of ECD learners in classes attached to primary schools.
- There be a national teacher in-service programme for those teachers deployed in schools, to equip them with the desired skills, and knowledge to handle learners with special education needs, especially at this critical stage of their development.
- Teachers’ Colleges redesign their curriculum to address inclusive education in schools.
- Teachers’ Colleges need to empower new graduates with skills and knowledge to handle children with special education needs in schools.
- Policy makers to advocate for redesigning the curriculum to include children with special education needs to ensure availability of resources in inclusive schools to alleviate the challenges faced by these children.
- Those policy makers should advocate for a way to ensure that all children with special education be enrolled in mainstream schools. Thus, the study proposed an alternative, holistic, and inclusive education model for schools attaching ECD “A” and “B”
Declaration on Plagiarism

I Henry Chinhara student number 201316592 hereby declare that I am fully aware of the University of Fort Hare’s policy on plagiarism and I have taken every precaution to comply with the regulations.

Signature  Chinhara  Date: 24th January 2016
Declaration on research Ethics Clearance

I Henry Chinhara, student number 201316592 hereby declare that I am fully aware of the University of Fort Hare’s policy on research ethics and I have taken every precaution to comply with the regulations. I have obtained an ethical clearance certificate from the University of Fort Hare’ Research Committee and my reference number is: REM-0151SCHI01.

Signature Date: 24th January 2016
Dedication

This study is dedicated to my children, Tafara, Tsungirirai, Talent, Ester and Jacob; my wife Evelyne my mother and my late father whose vision was a source of inspiration on how good it is to continue studying. These have been pillars of strength throughout the course of this study.
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Acronyms

ADEA: Individuals with Disabilities Education Act
AIDS: Acquired Immuno-Deficiency Syndrome
AMTOS: Assisted Medical Treatment Orders
APEC: Anhui Provincial Education Commission
BEAM: Basic Education Assistance Module
Bed: Bachelor of Education
CBO: Community-based organizations
CCT: Conditional Cash Transfer
CRC: Convention on the Rights of the Child
CRC: Convention on the Rights of the Child
CRPD: Convention on the Rights of Persons with Disabilities
DE Psych: District Education Psychologist/ Remedial Tutor
DECDT: District Early Childhood Education Trainer
DEECED: Department of Education and Early Childhood
DEO: District Education Officer
DFID: Department for International Development
DI: District Education Inspectors
DoE: Department of Education
DSO: District Staffing Officer
EADSEN: Early Childhood Development Special Education Needs
ECD: Early Childhood Development
ECDT: Early Childhood Education Trainer
ECDTIC: Early Childhood Development Teacher in Charge
EFA: Education for All
EHT: Environmental Health Technicians
CHAPTER ONE

1 BACKGROUND TO THE STUDY

1.1 Introduction

Early Childhood Development (ECD) was conceptualised at the Jomtien Conference when member states agreed to support Education For All (EFA) goals based on the idea that “learning begins at birth” (UNESCO, 1990: 28). Similarly, The Dakar World Education Forum Framework for Action (2000) was a follow-up to the Jomtien Conference, where delegates agreed that early childhood development programme is crucial in achieving education for all goals (UNICEF, 2006; UNESCO, 2000). Governments were tasked to develop ECD policies which were to become pillars in achieving targets of Millennium Development Goal number one, whose main focus is to achieve universal education by 2015 (Siraj-Blatchford & Woodhead, 2009; UNESCO, 2008). The aim was for governments to give young children (aged 0 – 8 years) best beginning in life, building a strong foundation for their growth, development, and education as articulated in the Conventional Children’s Rights (UNESCO, 1990).

Early childhood development refers to the development of health, learning, and behaviour from prenatal period through the transition phase to primary schooling (UNICEF, 2010). It is a period starting from conception to when a child is eight years of age. Programmes for ECD refer to a broad range of support for young children and families which include health, early learning and education, family support and social protection (e.g. poverty reduction) and child welfare (Britto, Yoshikawa & Bollar, 2011: 3). Evidence shows that health, nutrition and psychological support interact to affect survival and development in the early years of life. The result of interaction of the nurturing and environmental process, shape the child’s readiness for school (UNICEF, 2005b). The entire early childhood development period requires that ECD intervention programmes and services are integrated across health and nutrition, child protection and welfare and education, as well as attention to the economic well-being of parents and caregivers (social protection) (Wall, 2011).
Consequently, ECD programmes are supposed to be inclusive and reaching all children including those with special education needs. In the study, special educational needs (SEN) are any difficulties that a child experiences that require additional or different educational provision (Dunlap, 2009). Achieving the “Education for All” targets and Millennium Development Goals is impossible without improving access to and quality of education for all children including those with special needs education (Webster, 2013). The United Nations Convention on the Rights of Persons with Disability, Article 24 item 2a states that State Parties should recognise that persons with special needs education should be included in the general education system because of disability (United Nations). Also addressed in the Article, in item 2b, is that persons with disability are encouraged to access inclusive, quality and free primary and secondary education on an equal basis with others in the communities.

The philosophy of inclusion is enshrined in the right to education as stipulated in Article 26 of the 1948 Universal Declaration of Human Rights (UNESCO, 2011/2013). Since then, a number of treaties and conventions have reaffirmed this right. The UNESCO 1960 Convention against Discrimination in Education stipulates that state parties have an obligation to expand educational opportunities to all who remain deprived of primary education. The 1966 International Covenant on Economic, Social, and Cultural Rights reaffirms the right to education for all, and highlights the principle of free compulsory education. The Convention on the Rights of the Child, the most widely ratified human rights treaty, spells out the right of all children not to be discriminated against (UNESCO, 2011/2013; USAID, 2010; UNESCO, 2005). Governments ratified the 1994 Salamanca Statement and Framework for Action promising appropriate responses for children with special education needs (UNESCO, 2005). The frameworks articulate the goals for equity, quality and the rights of all learners to access educational opportunities.

Inclusive Early Childhood Development programmes therefore, incorporate a series of sector programmes all of which aim at maximising the growth, development and educational opportunities of all those children with diverse learning needs, and encouraging institutions to offer equitable opportunities for children and families to thrive to their full potential, in stimulating learning environments (European
Commission, 2013). These sector programmes include health and nutrition, child protection, social protection and education and they aim at targeting both families and children. However, implementing all the sector programmes across early childhood development stage is the ultimate goal for early childhood development.

An effective Early Childhood Development (ECD) programme encompasses three distinct sub-stages, each of which presents particular developmental and caring needs to the children. Stakeholders are sensitised through policies and advocacy to appreciate children’s developmental and educational differences to enable the adult world target and assist children who are in risk and severe circumstances of deprivation, such as poverty, disease and exposure to domestic violence (Britto, Yoshikawa & Boller, 2011). However, in spite of the abundant literature on the importance of the sector programmes to the growth, development and early stimulation for children with special education needs, schools and communities are known to struggle to assist those children that need services the most.

The majority of children with special needs who are supposed to benefit from early childhood programmes to reach their maximum potential are not accessing these social services because of poverty or structural barriers (UNESCO, 2007). In most schools, there is poor infrastructure, inadequate health facilities for children with special education needs, and insensitive learning facilities that are not responsive to the need of these learners (UNICEF, 2010). With inappropriate facilities to cater for children with special education needs, these children continue to suffer from social discrimination and low self-esteem (UNICEF, 2011). Hence, it is important for stakeholders to appreciate the different capacities of ECD learners if they are to offer relevant social services that promote the growth, development, and early stimulation needs for diverse learners, especially at this foundation phase of their development and education.

According to Britto et al., (2011) a number of factors are important to achieve ECD programmes and if not well articulated may affect the development trajectory of the children. The inter-related factors that influence growth and development of young children often include the condition of the child, the family status and other important and critical provisions, such as health and nutrition, education, protection and other
support services. Thus, Britto et al. (2011) urge stakeholders to channel their attention on developing the potential of ECD age groups, through harnessing of all the factors. The ideal inclusive ECD programme encompasses three distinct sub-stages, each of which presents particular developmental and caring needs: the first stage is the 0 to 3 years, which focuses on toddler and nursery education, then 3 to 6 years, which focuses on parent and pre-school education. The last phase is the 6 to 8 years, which focuses on transition to formal education and improved early primary schooling (Britto et al., 2011; Atine, 2015). For each phase, there are specific ECD programmes offered.

For the ages 0 to 3 years, emphasis is on: (i) health, nutrition, and promotion of breastfeeding, including, integrated management of childhood illness (IMCI). In addition, Britto et al. (2011) emphasise on care for development, nutrition supplementation, and expanded programme for immunisation, health clinics, and home visiting. (ii) Child protection – which includes birth registration, programmes to reduce abuse and neglect and programmes for children with disabilities, orphans and vulnerable children; (iii) social protection and welfare consists of cash transfer, poverty alleviation programmes etc.; and (iv) education, which comprises parenting programmes and early stimulation programmes for children. In this phase, there should be more prominence on health and nutrition (Britto et al, 2011; Bennett, 2011).

Britto et al. (2011) further add the dominant sector programme for the 3 – to 6 – year olds: (i) health and nutrition that emphasise on nutrition supplementation; IMCI care for development; health clinics and home visiting. (ii) Child protection programmes that focus on reduction of abuse and neglect of children with disabilities, orphans and vulnerable children; (iii) there must also be social protection and welfare programmes; and finally programmes should include: (iv) education which consists of centre-based ECD programmes, community-based learning programmes, pre-school and kindergarten and pre-primary. It also includes some parenting programmes (Black, Nelson, Huffman & Rich, 2011).

Finally, Britto et al. (2011) note that the dominant sector programmes for children aged 6 – 8 years are, (i) health and nutrition that emphasise on nutrition
supplementation, IMCI care for development, and health clinics. (ii) Child protection programmes that are intended to reduce abuse and neglect, programmes for children with disabilities, orphans, and vulnerable children; (iii) social protection and welfare; and finally (iv) education of children at nursery, kindergarten and primary level. He also advances that at the age of 6 – 8 years; there is prominence of education and decrease in health and nutrition programmes. He further states that early childhood development programmes should focus on educating both parents and children. The other emphasis of ECD is that it should not simply focus on children or parents who enrol in ECD institutions but should also raise awareness to parents whose children are not in early childhood programmes. Furthermore, attention is given to children who are not be enrolled in ECD settings as these children may be exposed to worse vulnerability risks. Figure 1 is a diagrammatic representation on the sector programmes.
It is evident from the above programmes that ECD should be holistic, inclusive and properly coordinated (UNESCO, 2007). The major focus of ECD programme should be to develop all children’s physical, social, emotional, linguistic, and creative aspects that in turn will help the children to demonstrate all round skills when they enter formal schooling (UNICEF, 2010; UNESCO, 2008). As a foundation stage of education, ECD programmes help children towards achievement of competencies in education which will allow them to develop to their potential (Maggi, Irwin, Siddiqui, Hertzman and Hertzman, 2005). Vermeersch and Kremer (2004), view quality ECD
programmes as critical in reducing dropout rate in later primary schooling as the children become ready to learn by the time they begin formal school.

In addressing the issue of inclusivity, ECD institutions should take note of the physical environment and caregiver/teacher competencies (UNICEF, 2011). Each of these should be responsive to the needs of all the learners. All young children need learning environments in which they can initiate their ideas, solve problems in the processes, and experience positive adult interaction (Armstrong & Armstrong, 2010). These are essential to child and skill development (UNICEF, 2011). The implication is all children require quality experiences in child-friendly, safe, and healthy environments, which allow them to develop to their maximum potential meeting the needs of each child (Bennett, 2011; Tout, Zaslow, & Berry, 2005).

Research shows young children learn best through playing in stimulating environments with lots of developmentally (age) appropriate materials (Bredekamp, 1987). Active participatory learning, where the teacher and children are co-constructors of knowledge, is the best learning experience for young learners (Reggio Children, 2008). A study conducted by Fried (1998) showed that when children with special needs are included in inclusive classrooms, the teachers are required to provide individualised instruction for these children. Campell et al. (2008) point out that effective early childhood education is not only about equity and access to early stimulation activities, but also about the quality of the education and care offered to all the children. The implication is that high quality early childhood development programmes are critical for the development of young childhood experiences.

In implementing programmes for young children with special education needs, the learners’ cognitive level, their capacity to comprehend the activities is significant for teachers. Hence, the role of the ECD teachers is greatly important in not only facilitating the way children learn and receive knowledge and skills, but also on the nature of activities that support growth and development of these children with diverse learning capabilities.
Furthermore, the nature of delivering in inclusive ECD classes implies, the ECD teacher has skills to scaffold every learner in his/her class for children receive knowledge and skills that benefit their development (Klibthong, Fridani, Ikegami and Agbenyega, 2014). Empirical studies show that an active learning environment is highly important in inclusive early childhood development classes, where emphasis is on active exploration of the learning environment, which involves creative manipulation and experimentation with different learning materials. This implies that inclusive ECD learning environments should have plenty of space for individual learners to play, learn and experiment alone and if necessary be with others (National Council for Curriculum and Assessment (NCCA, 2008).

In supporting the importance of positive relationship in inclusive early childhood development programmes, Winter, (2010) postulates that an effective ECD curriculum should allow children to develop a network of community whereby they develop positive relationships that necessitate physical, social, emotional, creative and cognitive development through teacher-child, child-child, parent-child and teacher-parent relationship (Winter, 2010). As provided by Allen and Cowdery (2012), the most critical relationship in inclusive ECD institutions involves partnership with families, as this allows parents and teachers to share important information regarding ways they can improve children's early stimulation activities as well as their development. The implication is that inclusive early childhood development programmes should support children’s well-being by ensuring that the children receive maximum support for their unique developmental needs.

Studies established that supplementary feeding programmes are critical in promoting the growth and holistic of children’s development (Alur, and Bach, 2009; Albino and Berry 2013). Most national and international policies direct ECD institutions to offer supplementary feeding to children, given that some children come from poverty-stricken families whose vulnerabilities originate from hunger. Hence, provision of supplementary feeding is crucial to children with special education needs as it allows them to be energetic enough to partake in educational activities.

Inclusive early childhood education advocates value teacher qualification and their training is critical to influence delivery of services in programmes of young children
with special education needs (Spodek and Sarach, 2006). Teachers operating in ECD classes play an important role in making sure that all children benefit from inclusive setting regardless of their unique needs. According to Berry (2005), teachers’ qualifications, experience, and professional development are critical to improve services for teachers in inclusive institutions. Hence, globally, there is the need for teachers to be properly qualified. Adequate training is important for early childhood development teachers to maximise organisational capacities to benefit all children under their care (UNICEF, 2006). Therefore, this study looks at how stakeholders cater for children with special education in the delivery of ECD programmes in Zimbabwe.

1.2 Early childhood development programme in Zimbabwe

One of the basic principles of the government of Zimbabwe after attaining independence in 1980 was to offer meaningful education opportunities to all its citizens including those at ECD level (Nherera, 2006; Government of Zimbabwe, 1987). The government aimed to extend ECD facilities to children with special education needs, especially to those from disadvantaged communities. Organised provision for ECD programmes particularly for children with special education needs are in the Education Act of 1987, which was amended in 2002 (Zimbabwe Education Act, 2002). The Education Act aimed at (Government of Zimbabwe, 1987):

- Increasing access to early childhood development facilities for children in disadvantaged communities
- Incorporation of ECD classes to formal schools
- Provision of equal education opportunities for children with disabilities and to make them feel part of the society through inclusivity
- Improving children’s potential to learn through the provision of quality nutrition, sanitation, water supplies, and health facilities at school and in community.

Overall, the policy emphasised holistic provision of ECD sector programmes, namely, health and nutrition, child protection, social protection and welfare and education as discussed in earlier sections and stipulated internationally (Government of Zimbabwe, 1987).
The Education Act was reviewed in 2002 following recommendations from the 1999 Commission of Inquiry into Education and Training that proposed institutionalisation of ECD programme for the 3- to 6-year olds (Makokoro Banda, Chiguvare and Kangai, 2012). These recommendations became guiding principles for the new National ECD Policy (Government of Zimbabwe National Report, 2004). The policy proclaimed access to quality ECD to all 3- to 6-year-old children including those with special education needs especially those from poor socio-economic backgrounds (Makokoro et al, 2012; Government of Zimbabwe, ECD Circular Number 12 of 2007). There was an addendum to guide the implementation of the National Early Childhood Development policy, ensuring inclusion of children with special education needs and other vulnerable children (Government of Zimbabwe, 2007). Of note is the fact that the Circular was in line with Education Director's Circular Minute No.20 of 2001 that lists sign language as one of the subjects that can be taught at both primary and secondary levels (Mpofu, Kasayira, Mhaka, Chireshe and Maunganidze in Engelbrecht and Green, 2007). In the same context, the policy was in line with the Education Secretary's Policy Circular No. 36 of 1990, which requires that children with significant disabilities to attend school in general education classrooms as far as possible. The same policy document recognises the existence and need for special schools for students who are severely disadvantaged to fit in the regular school or classroom environment (Government of Zimbabwe, 1990). Hence, the government is supportive to the fact that ECD becomes inclusive through compulsory participation, accessibility and non-discrimination in order to assist other children who may be isolated and invisible because of impairments (Chataika, 2013).

The early childhood development programmes on inclusiveness are in line with the national policy on Inclusive Education, which directs schools to enrol all learners regardless of diverse needs (Government of Zimbabwe, 1987; Education Secretary’s Policy Circular No. 36 of 1990; Mpofu, Kasayira, Mhaka in Engelbrecht and Green, 2007). The policy puts emphasis on modification of content, teaching approaches and strategies with a common vision which covers all children aged between 3 and 6 years old (Government of Zimbabwe, 2007). Just like Circular No. 20 of 2001, the ECD Circular stresses that special needs education is the responsibility of the whole school, so, every teacher has to enrol any child regardless of disability. Hence, the government directed mainstream schools to restructure their infrastructure and
curriculum in order to respond positively to learners including parents. Inclusivity of children with special education needs would also necessitate early detection of various developmental delays that have potential to hinder future holistic development of the child (Storberk and Moodley, 2010).

Moreover, the national ECD policy directed all primary schools to create two types of ECD classes for children aged between 3 and 6 years old. It also required all private pre-schools to affiliate to primary schools, to register, and to necessitate management and supervision of the learning processes in centres by school heads (Government of Zimbabwe, 2004; Dyanda, et al., 2005; Mugweni and Dakwa, 2013).

The Ministry of Primary and Secondary Education communicated the implementation plan to other government departments in 2004, after a national review of the education system that had taken place in 1999. It reaffirmed the position researched that, primary schools should integrate ECD “A” and “B” classes (Makokoro, et al., 2012). At the time, the ECD programme in Zimbabwe was expected to accommodate about 958,094 children aged 3 – 6 years including those with diverse learning needs or with special needs (Dyanda, et al., 2005). The programme was estimated to require about 12,500 trained ECD teachers for its full implementation; yet, there were only 5,500 para-professional teachers running the existing ECD centres (Dyanda, 2005).

The para-professional teachers lacked the necessary skills to handle inclusive classes (UNICEF, 2002; UNESCO, 2005; Government of Zimbabwe, 2005). Therefore, training of ECD teachers was imperative in the wake of the new policy initiative (Dyanda and Dozva, 2010), who needed knowledge and skills to enable them (teachers) to deliver in ECD “A” and “B” programmes. Skills to communicate with parents and learners, especially those learners with special needs were necessary for the inclusive classes. Furthermore, teachers needed to be equipped with innovative skills to construct play materials and design play equipment, and to manage health and nutrition as well as early learning programmes. As pointed by Murundu, Okwara, & Odongo (2014), skills organise teaching activities are crucial as they enable practitioners to establish and manage ECD “A” and “B” programmes taking into account the integration of the relevant ECD sector programmes.
In an effort to achieve provision of ECD as stipulated in UNESCO (1990), a multi-sectorial approach was necessary to meet children’s basic needs. Many partners were to collaborate with the Ministry of Primary and Secondary Education (MOPSE). These include the Ministry of Labour and Social Welfare (MoLSW), The Ministry of Health and Child Care, the Ministry of Local Government and Non-Governmental Organisations (Mugweni and Dakwa, 2013). The Ministry of Education, Sport and Culture, through its administration structures, from Head office right through the provincial offices, the district offices down to the schools was the major player regarding the implementation of the policy (Zvobgo, 2004), coordinating most ECD activities. School heads, their deputies and early childhood development education teachers in charge (ECD TICs), were to supervise and manage the ECD programmes at school and community level, making sure that the curriculum was age appropriate (Government of Zimbabwe, 2005).

The District early childhood development trainer was to be responsible for assisting school administrators on young children’s learning processes in ECD environments (communication with Dzinotyiwei, ECD trainer, 2010). They would also collect enrolment figures and furnish the province with information on needs and challenges in ECD settings through district education offices. The district psychological service tutor was responsible for assisting schools to identify children with special education needs and to advise teachers and parents on placement of such children with special education needs (communication with Mudumi, SPS tutor on 21, August 2013). In the same vein, parents had the responsibility of paying allowances for para-professional teachers and to provide appropriate nutrition to all ECD learners at centres (Moyo, Wadesango and Kurebwa, 2012; Government of Zimbabwe, 2007).

1.3 Early childhood development programme delivery in Zimbabwe

Guidelines on the implementation of the ECD programme were provided through Director’s Circular number 12 of 2005 and Statutory Instrument 106 of 2005 (Government of Zimbabwe 2005). The major thrust of the circulars was to attach two ECD classes for the 3 – 6 year olds at every primary school. Circular No. 12 of 2005, in particular, highlighted the establishment of ECD classes at primary schools was to be done in two phases lasting 10 years. During Phase 1 (2006 to 2010), every
primary school was required to establish at least an ECD “B” class for the 4 – 5 year olds. Phase 2 (2011 to 2015) was intended to establish ECD “A” class for the 3 – 4 year olds (Government of Zimbabwe, 2005).

All ECD centres had to meet registration criteria, which include (Government of Zimbabwe, 2005 and 2007):

- Learning and playing space of 2.25m$^2$ for each child
- An additional teacher for every seven children with identified disabilities at each centre
- Sanitation and other health facilities.

Consequently, all private ECD centres were required to register with the Ministry of Primary and Secondary Education through their nearest schools for effective implementation of the ECD programme. All ECD centres were required to have a planned feeding scheme, organised by the local community who should provide food and feeding for the young learners (Government of Zimbabwe 2007). Director’s Circular, Number 48 of 2007 emphasised that it was the task of communities to mobilise resources for ECD programme in schools, including the payment for para-professional teachers (Government of Zimbabwe, 2007). This would further universalise access and equity of ECD learning opportunities and was in line with Item 7 of the Jomtien Conference (Mugweni and Dakwa, 2013).

Education officers, ECD district trainers and district education officers were to assist communities to establish quality ECD programmes and to monitor the centres (Government of Zimbabwe, 2007) by supervising activities at centres attached to the schools.

The Circular spells out the roles of school heads in the delivery of ECD programme as (Government of Zimbabwe, 2007: 8):

- Ensuring that centres use a holistic approach in developing children
- Close monitoring of the ECD centres around the school and providing necessary professional and administrative advice and support
- Assisting ECD centres in meeting registration criteria and facilitate registration of the centres
• Ensuring that centre supervisors maintain up-to-date records on children’s daily attendance, progress, and health cards, teachers’ records and community involvement at the centres

• Assisting centres with appropriate and adequate resources.

The circular stresses that teaching sessions in ECD classes should be between three and five hours per day. It also directed curriculum and learning activities to be explored through the play method without formal teaching of concepts. Therefore, these methods used to facilitate ECD activities are poems, rhymes, role-plays picture reading, storytelling, and other child/learner-focused methods (Government of Zimbabwe, 2007). The circular encourages ECD centres to use locally produced teaching and learning materials, including use of a national ECD syllabus (Government of Zimbabwe, 2007). Meanwhile, para-professional teachers were to operate in ECD classes, while qualified teachers were being trained (Government of Zimbabwe, 2007).

The Ministry of Higher and Tertiary Education introduced a Diploma in Early Childhood Development in 10 primary teachers’ colleges, to train the ECD teachers (Government of Zimbabwe, Education Report, 2004; Dyanda and Dozva, 2010). The diploma holders were to be the main drivers of the ECD teacher development programmes including adult education (Dyanda and Dozva, 2010). However, it was not clear whether ECD teachers would be equipped with skills to operate in inclusive education settings, as well as understanding health, and nutrition needs of the learners (Mafa, 2013; Voob, 2014; Mugweni and Dakwa, 2013; Chireshe, 2011).

However, according to the Zimbabwe Education Act (Zimbabwe Education Act 1996), the Disabled Persons Act (Disabled Persons Act, 1996) and various education circulars (Education Secretary’s Policy Circular No.P36,1990) require all learners, regardless of race, religion, gender, creed, and disability, to have access to basic education from pre-school to Grade 7 (Mutepfa, Mpofu and Chataika, 2007). The Zimbabwe School Psychological Services’ (SPS) and Special Education (SE) Department in the Ministry of Primary and Secondary Education would support schools in their inclusive education practices (Mpofu, Mutepfa, Chireshe and Kasaira, 2007). The schools’ psychological services was also tasked to provide in-
service training and support in handling learners with disabilities. In addition, the SPS and SE personnel provide a wide range of counselling services to children with special education needs including parents (Mpofu and Nyanungo, 1998). Thus, in early childhood development settings, the school psychological services enable teachers to identify children with special education needs. They also assist teachers on how to handle these children in mainstream classes (Government of Zimbabwe, 2007).

From 2000, non-governmental organisations have been active in ECD programme delivery issues. For instance, UNICEF and Save the Children have been involved in the training of para-professional teachers and provision of learning materials (UNICEF, 2010; Save the Children, 2009). There are non-governmental organisations (Voob 2014) supporting teachers’ colleges to organise sensitisation workshops in schools. One such example is the Flemish Organisation for Technical Support (VVOB) (Government of Zimbabwe, 2010).

However, despite integrating ECD “A” and “B” programme in all primary schools in Zimbabwe, there are concerns that not all benefit, as stipulated in the national ECD policy (UNICEF, 2013; The Zimbabwe Herald, 24 May 2013). Parents have raised complaints that teachers in the ECD centres lack the necessary skills and experiences to handle children with special education needs (Chireshe, 2013). Furthermore, stakeholders show children with special education needs are discriminated and labelled by teachers and caregivers in the ECD centres. Stakeholders raised issues vulnerable children in various platforms that discuss inclusive education (Mutepfa et al., 2007; Deluca, Tramontano and Kett, 2014).

Consequently, NGOs have also raised concerns informally that teachers are failing to adapt their teaching styles and materials to meet developmentally appropriate practices (DAP) in accordance with ECD guidelines. It is reported that Zimbabwean institutions, especially ECD ones, lack adequate and appropriate infrastructure that afford learners the opportunity to fully utilise access to information especially with learners who have impairments such as those with hearing, language, sight mental and mobility (Chataika, 2013; Mugweni and Dakwa, 2013). There are more than 31 000 children with special education needs who are supposed to be in the
mainstream ECD centres as stipulated in the national ECD policy and implementation plans but are not attending (UNICEF-Zimbabwe, 2013). In informal discussions with school heads and parents, there were concerns that some children with special education needs often drop out of ECD centres before completion because of ill-treatment by teachers and the distance from home to school (Smith, Chiroro and Musker, 2012).

Accordingly, Nyagura (2013) notes that despite policies on inclusive education, people have not yet translated policy into practice as most of the vulnerable young children are discriminated. Even though the government commits itself to provision of holistic ECD sector programmes, it is not clear whether this is happening because concerns have been raised by a number of stakeholders through the media that delivery of ECD programmes is piecemeal and haphazard (The Herald, 24 May 2013; Sachiti, 17 June 2013). Much concern on access to responsive learning environments, which promote education for all, including those with impairments, is still unfounded in most ECD institutions (Nyagura, 2013; UNICEF, 2002 in Engelbrecht and Green, 2007).

Given the above concerns and observations, it is not clear how stakeholders deliver ECD “A” and “B” programmes especially where there are learners with special education needs. In other words, given the concerns and complaints raised by different stakeholders, what is really taking place in terms of delivery of ECD programme is unknown. Hence, the study seeks to find out delivery of ECD programme in Zimbabwe with specific reference to children with special education needs. The study aims to come up with a holistic and inclusive model of delivering ECD “A” and “B” programmes in Zimbabwe.
1.4 Statement of the research problem

As outlined in the background of the study, the government of Zimbabwe developed the ECD national programme and specified how it should be implemented in line with international guidelines (2004; Dyanda, et al., 2005; Mugweni and Dakwa, 2013; Makokoro et al., 2012; Government of Zimbabwe, 2007).

However, it is not clear how it is being delivered because different stakeholders and the media have raised concerns that many children between the ages of 3 and 6, particularly those with special education needs, are not benefiting from the programme (Sachiti, The Herald, 17 June 2013). It is also not clear how delivery of the programme is coordinated and whether learners access all ECD sector programmes (health and nutrition; social protection and education) as stipulated in international developmental perspective and country plans (The Herald, 24 May 2013; Sachiti, The Herald 17 June 2013; UNICEF, 2013; Mugweni and Dakwa, 2013). Hence, the study sought to examine the delivery of ECD “A” and “B” programmes in Chiredzi District, Zimbabwe with specific reference to children with special education needs. The study came-up with a holistic and inclusive model of delivering ECD “A” and “B” programmes in Zimbabwe.

1.5 Research questions/objectives of the research questions

1.5.1 Research questions

This study sought to answer the following research questions:

1.5.1.1 Major Research Questions

How is early childhood development programme delivered in Zimbabwe to cater for learners with special education needs?

1.5.1.2 Sub-research questions

- What early childhood development sector programmes are provided to children with special education needs for the 3- to 6-year-olds?
• What strategies are adopted by teachers and other providers in the delivery of early childhood development sector programmes to ensure inclusion of children with special education needs?
• What support and monitoring is provided to teachers by education officials and other support services to enable them to cater for all children in ECD programmes?
• What inclusive and holistic framework or model can be put in place to deliver ECD programme to children with special education needs in Zimbabwe?

1.6 Purpose of the study

The study aimed to investigate how ECD programmes were delivered to children with special education needs in Zimbabwe. Regardless of the existing policies, and studies on the rights of children to social services, reports and personal experience showed that the majority of young children with special education needs were discriminated in primary schools as learning structures were not modified to accommodate those children. Given the fact that, early childhood development programmes is a critical period for both growth and development of skills, it was prudent that the researcher investigated what primary schools were doing to accommodate young learners with special education needs, especially regarding access to quality social services. The intention was that the results of the study were critical in coming-up with a holistic and inclusive model of implementation.

1.7 Objectives of the study

The research was guided by the following research objectives:
• To explore early childhood development sector programmes that caters for 3-to 6-year-old children with special education needs
• To find out strategies adopted by teachers and other providers in the delivery of early childhood development sector programmes to ensure inclusion of children with special education needs
• To establish support and monitoring mechanisms provided to teachers by education officials and other support services to enable them to cater for all children in ECD programmes
• To come up with a holistic and inclusive framework or model for delivering ECD to children with special education needs.

1.8 Significance of the study

Early childhood development programmes are still at their infancy across the globe and ways to improve their services are heavily debated, since the 1990s (Jomtien Conference on Education for All, the 2000 Dakar Educational Forum for Action, and International and Regional Fora). Issues regarding childcare, access and quality education, health and nutrition have touched the attention of many researchers, as can be witnessed by international organisations studies such as UNICEF, UNESCO, and UNDP. However, implementation of holistic ECD policies in developing countries continue to face challenges ranging from non-government support, poor stakeholder support and lack of monitoring strategies (World bank 2010; Woodhead, 2006).

Despite the fact that Zimbabwe is a signatory of many international and regional conventions on children’s rights, vulnerable children with special education needs (slow learners, hard of hearing, language, visually, physically and mentally challenged) who are enrolled in early childhood development institutions, are excluded from quality early education programmes (Charema, 2005). The causes of segregation from quality learning, for ECD “A” and “B” children despite the relevant policies, has not been researched adequately in Zimbabwe, raising fears that the situation can continue to disadvantage such children’s future education sector if not adequately dealt with.

Thus, the study will benefit early childhood development practitioners on effective ways to establish, monitor, evaluate and advice appropriately the education sector, on ways of implementing inclusive and holistic education programmes for 3- to 6-year-olds. Given the dearth of research on early childhood development policy implementation in Zimbabwe focusing on the 3- to 6-year-old children with special education needs, this study will be a source of reference on implementation of the ECD “A” and “B” programmes to many scholars in Zimbabwe on how to accommodate individual needs of learners in ECD programmes.
The study will serve as a valuable source of inspiration to Zimbabwean teachers, Teachers’ college lecturers, University lecturers and other stakeholders interested in implementation of inclusive and holistic early childhood development programmes. Thus, the study will prompt further research in the area of holistic and inclusive early childhood education.

1.9 Delimitation of study

The researcher conducted the study in Chiredzi District, in South Eastern Zimbabwe. The focus was on how early childhood development settings implement the 2004 ECD national policy. Specifically, the study focused on how stakeholders cater for learners with special education needs as articulated in Circular Number 12 of 2007. Participants came from primary schools with ECD “A” and “B” classes and other ECD stakeholders in Chiredzi District. The participants included the district education team made up of the district education officer, district education inspectors, school psychologist tutors, ECD trainers, school heads, and ECD teachers. Also included in the study were non-governmental organisation representatives (NGOs), the Ministry of Local Government and Housing representative, the Ministry of Labour, and Public Service and Social Welfare representative, the Ministry of Health and Child Care representative and parents whose children had special education needs.

1.10 Definition of key terms

The following are the definitions of operational terms as used in this study:

1.10.1 Early childhood development (ECD)

Early childhood development (ECD) is the development of health, learning, and behaviour from prenatal period through the transition phase to primary schooling (UNICEF, 2010; Britto et.al, 2011). The period starts from the mother’s conception to when the child is eight years. Early childhood development programmes refer to a broad range of support services for young children and their families which include health, early learning and education, family support and social protection (e.g. poverty reduction) and child welfare (Britto et al., 2011: 3). According to Heckman (2006), Early Childhood Development programmes offer a foundation for human capital, given that healthy and socially adjusted children are more likely to grow into
economically productive adults. During the early childhood years, parents and other caregivers play a crucial role in shaping children’s chances for survival and development, as they empower children to be architects of their lives (UNICEF, 2013). In settings where there are children with special education needs, quality early childhood programme requires integration of ECD intervention services across health and nutrition, child protection and welfare including education (social protection) (Carpenter, 2005 in Wall, 2011).

1.10.2 Developmental delays

“Children who are at risk of developing delays and disabilities include those with poor birth outcomes, biological or genetic risks, or whose parents live in poverty, have low levels of formal education, or suffer from domestic violence, substance abuse, violent conflicts, famine, diseases, poor sanitation or other negative situations. A child is considered to have a developmental delay if he or she is assessed to have atypical behaviour or does not meet expected normal development for actual or adjusted age in one or more of the following areas: perceptual, fine or gross motor, social or emotional, adaptive, language and communication, or cognitive development. The delay may be mild, moderate, or severe. Poor birth outcomes, inadequate stimulation and nurturing care from birth onward, organic problems, psychological and familial situations, or environmental factors can cause delays” (Vargas-Baron and Janson, 2009: 8).

1.10.3 Student(s) with special needs

A student, who has a disability of an intellectual, physical, sensory, emotional, or behavioural nature, has a learning disability or has special gifts or talents (Manual of Policies, Procedures, and Guidelines, Section E British Columbia Government, 2013). Such children have special education needs, which may require special skills. The government of New Zealand (2009 – 2010) categorises children with special education needs as those who include children with physical or intellectual difficulties, or both; hearing or vision difficulties; children who struggle with learning, communicating or getting along with others; and those who have an emotional or behavioural difficulty. Hence, such children require special education attention.
1.10.4 Special education needs

Special needs education is educational intervention and support designed to address special educational needs (SEN). The concept of SEN extends beyond those who may be included in handicapped categories to cover those who are failing in schools for a wide range of other reasons, known to impede a child’s optimal progress. This broadly defined group of children is in need of additional support depending on the extent to which the school can adapt the curriculum, teaching, and organisation or can provide additional human or material resources to stimulate efficient and effective learning for those pupils (International Standard Classification of Education Needs, 2011). For the purposes of this study, a pre-school child has special education needs if he/she has developmental delays (intellectual, physical, sensory, emotional, behavioural problems or health problems in the case of children with chronic diseases) that cause him/her not to make effective use of educational facilities intended for the purposes of learning. It also includes children from broken families that do not afford decent meals, because of household poverty.

1.10.5 Individual education plan (IEP)

An individual education plan (IEP) is for each student who has unique learning hindrances to allow him/her meet his/her special education needs. These documents set short- and long-term learning targets for pupils with SEN. The individual education plan enables teachers to consider how to manage and adapt curriculum to meet the needs of the children with special education needs (European Commission, 2013). The Government of the British Colombia (2013) summaries the role of individual education plans as,

- a list of adapted support services that are designed to meet the needs of such learners;
- a list of adapted materials, instruction or assessment procedures that meet the needs of special needs, and may include alternate formats (e.g., braille, books-on-tape); they can be instructional strategies (e.g., use of interpreters, visual aids cues and assessment criteria (e.g., oral examinations, additional time, assistive technologies etc.) and;
- Arrangement designed to meet modifications of learning outcomes that are different from those of the regular curriculum, and these should meet the needs
of the student with special education needs (Government of the British Columbia, 2013).

The European Commission (2013) adds that IEP can serve as a contract between teachers, parents and other professionals. The implication is that IEP should be a basic document in all effective inclusive settings that serve children with special education needs.

1.10.6 Implementation

Literally, implementation means carrying out, accomplishing, fulfilling, producing, or completing a given task. Pressman and Wildavsky (1973) define implementation in terms of a relationship to policy as laid down in official documents. Implementation is a process of putting the idea, programmes, or set of activities new to the people attempting or expected to change.

Thus, implementation is a process that involves interaction between the setting of goals and actions geared to achieve these goals. In this study, policy implementation is the carrying out of basic policy decisions, incorporated in statutes, and taking the form of important executive orders (Sabatiar, 2005). It also refers to putting the ECD policy into action to accommodate learners with special needs. This gains support from Brynard (2005) who notes that policy implementation is service delivery, and is accomplishment of the programme. Specifically, the focus is on investigating how primary schools implement the 2004 and 2007 early childhood development (ECD “A” and “B”) policies.
CHAPTER TWO

2. THEORETICAL FRAMEWORK

2.1 Introduction

This chapter presents theoretical frameworks, which informed the study. According to Oliver (2004), new studies should not be isolated, but exist within academic traditions, guided by similar studies. Based on the above context, this study on catering for ECD “A” and “B” children with special education needs in inclusive early childhood development institutions was underpinned by three theoretical frameworks, which are as follows:

1. Bronfenbrenner’s ecological systems theory
2. Political approach or the bottom-up approach to policy implementation
3. The Rights-based approach

2.2 The ecological systems theory

This section explores an ecosystemic framework of Bronfenbrenner whose thinking forms the basis for inclusive education paradigm shift. The basis of the ecological systems theory is that the environment affects every person's development. Thus, the child's environment in this case, is in five different levels: the microsystem, the mesosystem, the exosystem, the macrosystem and the chronosystem.

Bronfenbrenner’s ecological systems framework conceptualises special needs education as being associated with multiple ecological levels that include parents, friends, the child’s characteristics, and the wide community. The concerns about children with special needs among stakeholders moved from the medical model in which society see them as disabled, has shifted to a systemic approach where they face different kinds of barriers to social life including early learning experiences. The ecological theoretical framework focuses on the aerology and experiences of all children including those with special needs, maintaining that no single factor is solely responsible for influencing the outcome of such children (Kruger, Burden, Dednam,
Levtiz, and Landsberg, 2002). Applying the ecological systems theory will enable the researcher to investigate the collaboration between the school, the home, the health centre and other ecosystemic layers in their effort to support children with special education needs. In the same way, Swick and Williams (2006) explain that the ecological systems theory seeks to provide a platform to explore the situation of children with special education in relation to the different socio-economic and cultural factors. This is because children’s characteristics heavily depend on their disability aspects as well as on elements of the broader environment in which they (together with their families) live and function (Koutrouba, 2006; Vamvakari and Steliou, 2006).

The above explanation is compatible with the purpose of this study which seeks to investigate how early childhood development settings cater for children with special education needs in Chiredzi District, hoping to come-up with a model that would be instrumental in promoting inclusive education. Employing the ecological systems model as one of the leading theoretical frameworks in this study seeks to explore inclusive education practices in pre-school settings as well as beyond the education system into the wider society was critical for this study. It is clear that children with special education needs experience discrimination at different levels of their ecology; hence, it was necessary to investigate strategies employed by stakeholders in the ecological layers interacting to reduce/ eliminate or at the worst to eliminate the challenges on children’s lives.

Evidence shows that children with special needs are mostly affected by culture, socio-economic challenges and poverty (Herman, Merril, Reinke and Tucker, 2004). A study conducted by Herman, Merril, Reinke and Tucker (2004) on causes of depression indicate what communities think and say about these children in the context of their socio-cultural beliefs that affect development and education. The implication is that in classrooms, problems of special education needs learners are not solved exclusively by factors that are inherently on individuals but by targeting what caregivers and peers say to them.

Therefore, the ecological systems theory was appropriate to investigate various streams that influence young children aged 0 – 8 years and specifically when such children have special needs. As stipulated in Bronfenbrenner’s ecological theory,
children aged 3- to 5-year-old’s socio-emotional wellbeing and cognitive capacities is strongly influenced by the distal community values, as well as the proximal influences of the individual, peers, family factors and institutions which must offer the child psycho-social support. The ecological systems framework was used to investigate various systems relating to individual children with special education needs, to their families, educational institutions, government institutions and non-governmental organisations as they all influence the way children with special education needs experience his/her life.

Figure 2: Representation of the microsystem’s interaction

Source: Adapted from Bronfenbrenner (1998)
According to Bronfenbrenner (2004), it is what happens within the child’s settings such as the family, playground, the peers, service institutions and the larger community that influences his/her development and education (Bronfenbrenner, 2005). The ecological systems framework acknowledges that a child affects in as much as the ecological layers also affect his/her development, if these layers fail to improve the child’s living conditions (Bronfenbrenner, 1998). The researcher used Bronfenbrenner’s theory to understand the roles and responsibilities of various early childhood development stakeholders in their efforts to improve the experiences of young children enrolled in pre-school programmes attached to public primary schools. Thus, the study employed Bronfenbrenner’s model to investigate barriers and opportunities provided by different role players to support inclusive early childhood development institutions providing education to 3- to 6-year-old children in Chiredzi District.

Accordingly, the ecological systems theory what is experienced in the microsystem, where she/he spends most of his/her time influences the child’s development. The pre-school child with special needs, requires psychosocial, emotional and encouragement from the proximal systems. This kind of support should go a long way towards supporting children’s growth, development, and early stimulation experiences. If children’s socio-economic and cultural support is negative, the possibility is high that it would minimise the child’s chances of growth and development. If support from the ecological layers is positive, it also enhances the child’s development.

Implementing an intervention programme for the 3- to 5-year-olds at grassroots level, targeting the family or school benefits the children (Herman et al., 2004). If stakeholders assist children with special education needs with provisions that promote growth at school, more children will enrol and improve their early stimulation through pre-school education. According to Hook, Watts and Cockcroft (2002), Bronfenbrenner’s theory accounts for how the individual perceives and experiences in the environment. In this context, teachers’ attitudes, skills, behaviour and the individual learners’ feeling about the teacher may influence the outcome of the child’s early education. Moreover, the theory attaches teachers’ attitudes to their work more than the quality of the teachers’ training in managing inclusive education.
classes. Hence, the researcher was investigating the holistic provision of services that the microsystemic level offers to children with special education needs in inclusive settings.

On this note, Bronfenbrenner urges caregivers (parents, child minders, teachers), and other persons working with young children, to ask themselves questions regarding the nature of experiences that they offer to children with special needs. Questions that stakeholders ought to address may include “Is someone showing the child appropriate ways to behave? Is someone talking and reading with her? Is someone providing materials for her to play with? Does the child have appropriate health and nutritional care?” Hence, in this study, the researcher focused on answers to the above questions, in his/her effort to understand the experiences children with special education needs undergo in inclusive ECD institutions. In this study the ecological systems framework was employed to implore relationships of caregivers and children with special education needs in inclusive ECD “A: and “B” institutions. The researcher was investigating the capacity of the caregivers to be responsive to the unique needs of children. For instance, the researcher was keen to find out the capacity of caregivers’ concern in ensuring that children with special education needs had adequate and purposeful learning materials to promote the development of necessary skills. Bronfenbrenner (1998: 997) claims, “Settings are primary engines of human development.”

The ecological systems framework also stresses the importance of protective and preventive processes in environments for young children with special needs. Bronfenbrenner (1998) sees protective and preventive processes as those things that keep the child away from physical and psychological harm. In the case of children with special education needs, they need protection from all sorts of environmental harm. A caring environmental is therefore necessary, especially for children with special education needs (Kelly, 2006). Taking care of every child in the setting and giving him/her the psychosocial support as and when need arises, is critical. The ecological theory stresses that the child should access assistance to achieve holistic development for the child all the time, regardless of whether the child is in the home or in the childcare centre. The theory stresses that the child should get effective encouragement on the skills he/she has to develop. Nelson and
Prilleltensky (2005) proffer that the ecological systems theory emphasises the idea that children are not isolated, but are always persons in context. In this regard, the role of the ECD teacher in developing the skills of the learners is critical. Hence the teacher or the caregiver should be qualified enough to develop the needed skills.

The next level of ecological systems theory is the mesosystem. The mesosystem consists of the interactions between the different parts of a child’s microsystem. At the mesosystem, the child’s individual microsystem does not function freely, but is interconnected and asserts influence upon one another. However, these interactions have an indirect impact on the development and acquisition of the individual’s skills.

For instance, one aspect of all children’s learning in the mesosystem is about the relationship between families and their teachers. If the children’s families take an active role in children’s schoolwork, such as attending parent/teacher conferences and volunteering in classroom work, it has a positive impact on children’s development because the different elements of his microsystem are working together. However, children’s development is in a negative way if the different elements of the microsystem are working against one another.

The theory also stresses that the number and quality of interactions in settings (ECD “A” and “B”) in which pre-school children with special education needs spend most of the time (e.g. his family, and the pre-school settings, peers, clinic, health care centres), have critical implications for the child’s growth, development and learning. Bronfenbrenner chooses to call this interaction the mesosystem. Given the importance of this interaction, it was important to investigate the interaction patterns that take place between the different microsystemic levels to ensure that these are assisting the growth, development, and stimulation opportunities of children with special education needs.

As provided by the theory, communication between families of children with special education needs and pre-school teachers, centre directors, or children’s peers aim at improving the understanding of the child’s development and his/her ability to master skills. In a pre-school environment, this means improvement of learning opportunities with regard to skills, knowledge, and development. For positive development of the
child, the pre-school staff and the parents should share common expectations about how the child ought to grow, develop, and learn. Bronfenbrenner (1998) also looks at the transitional phase that happens when the ECD “A” and “B” (pre-school) child leaves the home to join other settings, such as the playground, the pre-school centre, or the church. These institutions pose threats or opportunities to children depending on the degree of involvement of the stakeholders on the child. In the case of children with special education needs, such transition should focus on whether these new experiences are enabling the child to discover his/her potential through maximisation of experiences. In most cases and if caregivers are not empowered, experiences during the transition phase often limit the development of the pre-school child who has special needs. Therefore, the study looked at the quality of assistance given to children with special education needs by different groups of stakeholders in ECD settings.

Thus, the study interrogated parents and teachers to find out how the interactions of these microsystemic levels were supporting holistic growth, development, and acquisition of skills for children with special education needs in inclusive institutions. Figure 3 shows a complete relationship of the ecological system.

![Figure 3: Representation of Bronfenbrenner's ecology systems theory](source: Adapted from Bronfenbrenner (2008))
The ecological systems theory further identifies the ecosystems as the next level that impact on the development of the child. The ecosystems refer to setting that do not directly engage the children as active participants, but still affect them. For instance, there are certain decisions that have bearing on the children, but which do not come from their direct participation in the decision-making process. For example in the current Zimbabwean scenario, where parents are losing jobs, this naturally affects a child’s development; consequently, this may influence the attainment of his educational skills. In the case of children with special education needs, it might mean change from a caring school environment to one where there are no resources. It might also imply transferring to the school environments where the child is to ill-treated, by teachers, peers and the neighbourhood. Hence, the current researcher investigated the role of the exosystemic environments such as the families’ workplace and the responsible authority’s roles to improve the experiences of children with special education needs in ECD settings attached to primary schools. For instance, the researcher also examined whether the services the local, responsible authority, the legal policies from government and non-governmental organisations were providing to children with special education needs in inclusive settings were supporting the holistic development of the children.

For instance, there are certain events that might happen at the parent’s workplace that may have positive or negative influence on children’s development. Availability or none availability of social policies from individuals, government or non-governmental organisations may have far reaching consequences on how children with special education needs learn in inclusive settings (The World Bank, 2013). If the exosystemic layer does not provide assistive devices to children with special education needs, it is not possible for them to benefit from inclusive early childhood education programmes. Given the nature of the Chiredzi District, vulnerable children are not accessing supplementary feeding or free health care services. Hence, there is a possibility that these children do not develop good health and this affects the way they learn and develop the skills. In the study, the current researcher focused on strategies and supportive and monitoring responsibilities of the exosystemic layers in providing assistance to enhance holistic development of children with special education needs in ECD settings.
The next layer, which Bronfenbrenner’s ecological systemic theory examined, is the macrosystemic level. At the macrosystemic level, Bronfenbrenner identified all the various subsystems and the general beliefs and values of the culture, made up of written and unwritten principles that regulate everybody’s behaviour. These principles, whether legal, economic, political, religious, or educational, seek to improve the welfare of children with special education needs. In addition, they also seek to control the nature and scope of the interactions between the various ecological systemic levels of the total social system. Given that the above systems have the potential to improve or affect the development and stimulation opportunities of vulnerable children, the researcher investigated the systems in place that promote the attainment of the required skills of these vulnerable children. Bronfenbrenner (1998) supports this view by saying that the theory seeks to consider what the community does to ensure all children have best experiences they need in the microsystem settings. In the context of the ecological systems’ fourth layer, the current researcher investigated the impact of the community’s economic, political, cultural, and educational opportunities in promoting the enrolment of children with special education needs in inclusive ECD classes attached to primary schools.

The fifth ecological level Bronfenbrenner focused on is the chronosystem, made up of other levels. According to the ecological systems theory, the chronosystemic level refers to the way the each level has an influence on the one before and after it in a back and forth motion. It also implies to the historical context relating to the time the child is reared. For instance, hunger and poverty may have an impact on the development trajectory of children with special education needs. In the context of this study, the political and economic slump experienced in Zimbabwe, largely affect children with special education needs and the way these children are valued.

The ecological systems theory is about relationships as much as about discrete programmes and factors, such as that of the early childhood development programme. An important task of the teacher faced with children with special education needs is to aim at developing connections between these kinds of influences to create a true environmental system that is responsive to the needs of all young pre-school children. The ecological model invites stakeholders to ensure that all children have needed experiences (Iwrmarylou, 2005). All concerned
stakeholders interested in early childhood development programmes need to identify whether child day care centres are of high quality to allow every child to develop to his/her full potential in order to meet the needs of development (Iwrmarylou, 2005). However, the ecological systems theory encourages stakeholders to go beyond the ECD learning centres, especially when looking at children with special education needs, as other children might be in their homes and not at learning centres. Thus, Iwrmarylou (2005) notes that the ecological theory calls for pre-school programmes to maintain quality, responding to the needs of all pre-school children, thinking about all children’s experiences throughout each day.

The ecological systems model is child-centred because it begins with a focus on the proximal development experiences his or her environment. The ecological model sees the child’s environment as “the engines of development”. It emphasises that the quality of relationships between different settings are critical because they influence what the young pre-school child with special education needs experiences (Chan Lee and Choy, 2009). Bronfenbrenner notes that in the child’s environment, there are cultural values and beliefs that may have negative impact on growth, development, and early stimulation opportunities education of children with special education needs (Chan Lee and Choy, 2009; Winter, 2010). Stakeholders should target these environments so that they become supportive to the needs of ECD children, allowing them to belong, and become engaging citizens of their society. The next section discusses the political model used as the second theoretical framework of the study.

2.3 The political approach to policy implementation

The second theoretical framework that informed the study is the political approach to policy implementation. The basic principles of the bottom-up approach are that individuals at the subordinate level are an active role in implementing the policy and they may have discretion to reshape objectives of the policy and change the way it operates. Furthermore, the bottom uppers see street level implementers as the people with the capacity to understand policy implementation. In addition, the bottom-up approach sees policy implementation as an interactive process involving policy makers, implementers from various levels of government, non-governmental
organisations including the private sector and other actors (Wanna, Brother, and Freyens, 2010). In the same context, Ball (1987; 1997) contends that the basis of the political framework is that policy meanings conditions on the ground as well as the willingness and commitment of the street level implementers influence the policy implementation. Given the active role of the street level implementers, bottom-uppers believe they can change the implementation process, if equipped to work with the policy.

The political framework contradicts the rationalist approach to the policy-making process and acknowledges the contested nature of policy design and implementation (Barret and Fudge, 1981). The political approach is critical to the fact that “implementation is a matter of following a fixed policy text and putting legislation into practice” (Bowe and Ball, 1992: 2). This framework does not recognise the interaction between policy text and the implementation in practice.

2.3.1 The bottom-up model to policy implementation

The bottom-top model opposes the top-down approach (Berman 1980). Hull and Hjern (1987) argue that the policy implementation is effective only when the street level bureaucrats accommodate it on the ground. According to Matland (1995:148), bottom-uppers contend that if street level implementers are not allowed discretion in the implementation process with respect to local conditions, then the policy will "likely fail". The bottom-up model starts by mapping the network of actors in the actual field where implementation is to take place and discusses with these implementers about goals, strategies, activities and contact persons on what they want to practice (Matland, 1995). Policy implementers argue that evaluation based on the street level bureaucrats, is the best in carrying successful programmes (Matland, 1995).

DeLeon and DeLeon (2001) proffer that the bottom-up implementation model associates first with the target groups and service deliverers, noting that the target groups are the actual actors in policy implementers. Although the bottom-up model is a challenge to administration, due to the reality of delegated authority, it does not dismiss the notion that different agents are delegated responsibilities. However, Deleon and Deleon (2001) further argue that the bottom-up model is more reflective
to the needs of community unlike the top-down that imposes policy on small groups of citizens (Matland, 1995). According to Tinajero, and Sinati (2011), discretion of the street level implementers is the underlying premise of the bottom-up approach. The approach provides an opportunity for moving from the actors at the bottom to policy makers at the top, through the provision of necessary feedback in the context of this study; these are the teachers and the schools heads.

In the bottom-up approach, one size does not fit all cases, and so discretion enables implementers to activate more useful practices and in critical incidences to ignore policy that hamper achievement of the goal of the programme (Matland, 1995: 148). In the context of this study, the policies focus on the overall range of young children, including those with special education needs and their service providers.

The proponents of the bottom-up approach argue that evaluation based upon street-level bureaucrats gives the best practice (Matland, 1995). Research findings by Hjern and Porter (1981) reveal that central initiatives poorly adapts to local conditions and has often failed and sometimes progress is slow, while their success depends on the local implementers’ ability to adapt to local needs. Similarly, Elder (2011) emphasises that discretion of agents is the underlying premise of the bottom-up approach; therefore, those who implement the programme are crucial for its success. In this view, discretion is a good thing, especially when the process of implementation uses the expertise of personnel who will bring the success to the programme. In this study, people who are central to the success of early childhood programmes for children with special needs are the teachers through their administrators in partnership with parents and other stakeholders. In the bottom-up model, one size does not fit all, and so discretion may enable implementers to adapt to practices that are more useful or to ignore policies that hamper the goal of the program. Taking into consideration the focus of this research, children with special education needs are diverse. Hence, the researcher pursued these aspects in the study.

Although the bottom-up model is a challenge to administration, due to the reality of delegated authority, it does not dismiss the notion that subordinates should be delegated responsibilities by their superiors, but point out that they should be
knowledgeable of what they do. The implication is in implementing ECD policy on inclusive education, school heads and class teachers play a critical role to implement the government’s delegated responsibility. Deleon and Deleon (2001) argue that the bottom-up model is more reflective to the needs of community, unlike the top down, which is likely to impose policy focusing on small groups of citizens. Deleon and Deleon (2001) thus conclude that the model is “more realistic and practical” and much more “democratic” than the top-down model. They argue that if the policy coerces people’s behaviour, then the bottom-up approach may go beyond informing people of the proposed legislative action. From such a point of view, it would appear the bottom-up approach is people-oriented and is likely to garner the consent of the targeted population that could then give their maximum support to the policy before their representatives’ vote for the law. Thus, success of implementing inclusive early childhood development programmes for children with special needs depends largely on the support base from street-level implementers together with parents, as these understand the real needs of the learners.

As articulated by Deleon and Deleon (2001), the bottom-uppers align with participatory democracy than the top-downers, chiefly because local officials must be responsive to their constituents; hence, they can instruct bureaucrats on implementation processes. Thus, Deleon and Deleon (2001:488) contend, “Implementation should follow democratic processes (preferably in the most direct democracy practices) unless prior experiences demonstrate that another mode (e.g., a top-down command implementation) is superior.” In terms of the implementation of policy for children with special education needs, this study will utilise information from local officials who are the ECD teachers, ECD TICs, and school heads. These participants have the most up-to-date and reliable information on the implementation of a new policy, as they are the people at the centre of the implementation process.

The bottom-up approach enables local leaders such as school heads to engage in the implementation process through active involvement of stakeholders in the programme, to achieve the policy goals (Deleon and Deleon, 2001). However, Matland (1995) argues that the majority of institutions that believe in top-downers have challenges in understanding the language written from those who formulate policies. As a result, most policy implementers change many things during policy
implementation process. In the context of this study, the current researcher also observed that school heads and teachers’ failure to implement an effective ECD programme is in a way their failure to interpret the language of those who have designed the policy. This study therefore implored knowledge and skills of street-level policy implementers on policy goals, which encourage inclusive education.

According to one of the key proponents of the bottom-up model, Elmore (1980), *backward mapping* is an alternative to *forward mapping*. Elmore (1980) challenges the visibility of the top-bottom approach, arguing it does not reflect what happens in the real life of policy implementation processes. Berman (1980) dismiss the illusions of central control, arguing that a more realistic understanding of policy implementation is to look at the policy from the view of target implementers and service providers. In the case of this study, implementers are teachers and school heads, while service providers are the district psychological officers, DEOs, EOs, ECD trainers, and parents. These have knowledge about the goals of the programme for successful implementation. Successful implementation depends more on the skills, competency, knowledge, and commitment of street-level implementers rather than on efforts from the central government officials. Therefore, it follows that successful implementation of the ECD programme for children with special education needs requires properly trained teachers who have the skills to handle children in this category. At the same time, the school heads and ECD teachers need to know how to identify learners with special needs. School heads must know what to monitor and how to assist teachers to handle and assess children’s learning needs. However, this still seems like a mirage in most schools.

According to the bottom-up, as a theoretical framework, *at the macro-implementation level, local organizations react to the macro-level plans, develop their own programme, and implement them* (Matland, 1995: 148). This suggestion implies that early childhood development stakeholders should have skills, knowledge, and a strong partnership support from the global community to implement effective special education needs programmes in ECD settings that are supportive of the needs of diverse learners. According to Sabatier (2005: 24), the bottom-up approach “needs to be related via an explicit theory to social, economic, and legal factors, which structures the perceptions, resources, and participation of those actors”.

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The implication is that the policy gives direction to what stakeholders do to shape the socio-economic needs of the vulnerable learners. However, the importance of the street-level implementers is emphasised. Thus, this study investigated collaboration of stakeholders; to assist street level implementers to support learners with special education needs to benefit from inclusive education programme.

As noted by Matland (1995) in a democratic process, central actors mandate comes from their accountability to their electors to exercise policy control. Fataar (2006) sees policy formulation and implementation as an interactive process. However, policy implementation is successful in situations where actors have skills and resources to implement the programme. Those who do not ascribe to the bottom-up approach argue that institutions that employ the bottom-up approach have difficulties of separating the influences of individuals and different departments of government on policy decisions. Hence, bureaucratic accountability is always necessary for effective implementation of policies. However, the bottom-up approach argues that a relationship between principal (those who define policy) and agents (those who implement policy) is very critical for effective implementation of the policy. The most critical issue in the bottom-up approach is the amount of discretion of the implementers and the complexity of the principal-agent relationship (Jenkin et al.). Successful policy implementation therefore, should incorporate both the bottom-up and the top-to-bottom approaches. A hybrid of policy is likely to provide direction to agency of programme implementation where street-level bureaucrats follow properly laid down policy from the central government. The study investigated capacity of street level implementers (teachers, school heads, and service providers; ECD trainers, psychologist tutors, DEOs, EOs and parents) to implement the ECD policy.

2.4 Rights-based approach

The rights-based approach to disability support acknowledges the inability of vulnerable learners to participate fully in communities as not attributed solely to the limitation of their function because of their impairments but that society plays a major role (UNICEF, 2011). Proponents of the rights-based approach claim that disability is a notion created by societal factors to exclude children living with disabilities from enjoying social services. In the education settings, exclusion would be in terms of
designing learning environments, curriculum and the structure and operation of organisations, including the hostile treatments of individuals towards children with disabilities and their families. On this view, then, laws should tackle the disabling, exclusionary barriers, and policies as they lie outside the individual.

The rights-based approach stresses on the inalienability nature of each individual, as written in United Nations instruments, and on governments’ obligation to fulfil and respect those internationally defined rights. The implication to this is young children with special education needs have the same rights like all the other children as enshrined in international treaties. UNESCO (2003) sees the rights-based approach as an attempt to try to integrate the norms, standards, and principles of the international rights systems into plans, strategies, and policies on development programmes. The framework aims to support and empower individuals and communities globally, in their effort to claim and exercise their rights (UNICEF, 2011; UNESCO, 2003a). A rights-based approach requires a high degree of participation by the targeted beneficiaries, including local communities, civil society, minorities, indigenous peoples, women, and others. The approach demands the creation of strategies that ensure that the current government system is accessible to all children under the age of 18, especially the most marginalised (UNICEF, 2007).

The goal of a rights-based approach in education means stakeholders must pay specific attention to the protection and realisation of their rights. The approach further ensues that every child attains quality education that respects and promotes his/her rights to dignity and optimum development (Convention of Children’s Rights, Article 29; UNICEF, 2007). The approach is about the right of every child to education, based on equality of opportunities without discrimination (United Nation, 2006). On that note UNICEF, (2006:2) says,

To achieve the goal of education for all education must be available for, accessible to, and inclusive for all children.

In the context of this study, the human rights approach emphasises that every child has the right to quality education that enables (UNICEF, 2006) him/her to develop to his/her potential. It sought to guarantee opportunities to all early childhood children (0 to 8-year-olds) to pursue their educational careers and other critical social services. This is emphasised by UNICEF (2006:4) saying:
To achieve this goal, education needs to be child centred, relevant and embrace a broad curriculum, and be appropriately resourced and monitored. Teachers need to be knowledgeable, responsive, and resourceful to address children’s needs, especially those learners that demonstrate physical, emotional, and or mental challenges. Concerning the above expectations, the rights based approach further states that:

It is the right of every child to be respected for her or his inherent dignity and to have her or his universal rights respected within the education system (UNICEF, 2006:4).

Thus, all children regardless of their physical or mental impairments deserve respect regarding access to service deliveries such as birth certificate registration, health, and nutrition including early stimulation opportunities.

The rights based approach reminds every citizen that even the young children have the right to know their rights and to grow up in an environment of understanding, peace, tolerance equality (UNICEF, 2006). In the context of this study, the rights approach proposes that all early childhood development learners deserve special respect regardless of their vulnerability, as education is a human right. The theoretical framework aptly asks educators and all other stakeholders to respect the unique needs of the learners. It acknowledges that the young children are different in various ways; thus, teachers and the community should not take advantage of the children’s special needs cases. The framework not only encourages access to educational provisions, but also the obligation of educational institutions to eliminate all forms of discrimination at all levels of the education, including at ECD level (UNICEF, 2007). In the case of early childhood development programmes, discrimination can occur within families, community, and the school system (UNICEF, 2006). The rights-based framework calls for equal access to social services for all children.

The rights-based approach also rests on the core principle of acting in the best interest of the child (UNICEF, 2007; UN, 2006). This should guide parents and teachers to respect decisions made by their children regarding their involvement in education. As aptly stipulated the principle enable the United Nations Committee on the rights of the child to ensure that children of all ages are active agents in their
learning, and that education promotes and respects their rights and needs (UNICEF, 2007: 8; UNICEF, 2006). The rights-based framework assisted the researcher to find out whether all early childhood children (0 – 8) have the right to meaningful quality education, with infrastructure and curriculum being adopted to address every child’s needs (UNICEF, 2012). In the school system, the rights-based approach necessitates the recognition that education provided is quality and good standard for the learners imparted through a relevant curriculum and a pedagogy that reflects and adheres to the ethos of how young children learn, creating a learning space, which includes rather than excludes children (UNICEF, 2006). In short, the rights-based approach to education calls for inclusive settings, which are respectful of the health, cultural, protection, and participation of all stakeholders.

A holistic approach to early childhood development is a weapon to achieve a child’s rights-based education system (UNICEF, 2006). It is from this understanding of the rights-based approach to education that early childhood settings are urged to implement holistic early childhood education programmes that promote not only access but also quality education and development opportunities among all children regardless of their differences. This theoretical framework guided the study to establish how stakeholders are catering for children with special education needs in early childhood development settings in Chiredzi District, Zimbabwe.

2.5 Summary

The chapter explored three theoretical frameworks used as windows to guide this research. The chapter looked at Bronfenbrenner’s ecological systems development theory, which shows the roles different systems of the ecology interact to influence the development of the young pre-school children in general, and those with special education needs in particular. The theoretical framework shows that:

Children develop within the context of families, communities, regions, nations, and the global environment: each type of environment plays a critical role in affecting young children’s well-being (UNESCO, 2014:13).

Therefore, it is necessary to address the functioning of policies and laws, programmes and services, family environments, and child well-being. Inclusive ECD
programmes should focus on children’s well-being depending on the support across the spheres of health, nutrition, education, parental support, child protection, and poverty alleviation, with each of the ecological systemic levels playing a crucial role. The study also looked at the bottom-up model of policy development and implementation which stresses that for new national programmes to be successful, there is need for street level implementers to be part of the policy-making process, thus, they should be consistently involved in the decision-making process. In the case of the national early childhood development program in Zimbabwe, the street level implementers are the teachers, school heads and parents need to be equipped with skills and procedures to implement the programme. The theoretical framework envisages the role of the street level implementers as important in implementing new education programmes, as they know the problems of the children as well as the community; hence, they must be involved in all the decisions about the implementation of the programme. In this study, the role of the teachers, school heads, and parents is important to the implementation of the early childhood education programmes in Zimbabwe, because without their full participation the programme will not be as effective.

Children’s rights are in the United Nations’ Convention on the Rights of the Child (UNICEF, 2006). The approach shows that early childhood education programmes have their operations anchored on seven principles of children’s rights: universality and inalienability; indivisibility; interdependence and interrelatedness; equality and non-discrimination; participation and inclusion including empowerment of families. The current researcher aimed to investigate the empowerment programmes designed for schools; teachers, school heads and parents so that the ECD programme benefits all learners regardless of disability, language, and illness. Furthermore, through this theoretical framework, the researcher investigated activities that the sector programmes of Health, Education, and Social Welfare are providing to young children with special education needs. The rights-based theoretical framework opened a window for critical assessment of involvement of stakeholders in provisioning resources to ECD institutions, to support children’s development. The next section is discussing empirical literature on how ECD settings cater for learners with special needs.
CHAPTER THREE

3. Literature Review on Catering for Children with Special Education Needs in ECD Programmes

3.1 Introduction

This chapter focuses on empirical studies relating to how stakeholders cater for children with special education needs in early childhood development programmes attached to primary schools in Chiredzi District. The first section of the chapter discusses ECD sector programmes, which are critical for establishing inclusive and holistic institutions. The second part of the chapter highlights strategies ECD stakeholders implement to achieve holistic and inclusive early childhood development programmes. The last section of the chapter looks at literature on support and monitoring practices employed in early childhood development programmes in other countries including Zimbabwe institutions. In the process, the researcher highlights gaps that emerge through reviewing current studies as reflected by the current school practices on inclusion of children with special needs in mainstream classes. The chapter concludes with a summary of the literature review from different authorities.

3.2 Rationale for universal early childhood development

3.2.1 The socio-political rationale of ECD

Extensive scientific evidence demonstrates the critical importance of the first years of life. From conception throughout early childhood, children’s brains develop at a rapid rate and are uniquely sensitive to environmental factors. There is a profound influence of a child’s environment on development and learning. Stimulating environments are aptly in a better position to unlock children’s potential, encouraging neurological development (UNESCO, 2014). In the context of the above, early childhood development programmes should be the answer to this holistic development of young children, especially those living in developing countries, often exposed to malnourishment, neglect, and diseases. There have been quite a number of treaties calling for universal accessibility to a whole range of early childhood
development programmes that should include early health and nutrition, protection and child welfare as well as social protection programmes (UNESCO, 2009). As such, most countries’ constitutions and legislations focus on compulsory schooling, and encouraging early stimulation to all ECD age group learners (Holdsworth 2014). Furthermore, early childhood development programmes are critical for young children with special education needs in assisting them to develop to their totality (cognitive, physical, social, emotional and creativity).

Hence, the rationale for universal early childhood development programmes as provided in (OECD, 2001: 38) cited in MacEwan (2013: 46) is as follows:

a) Supporting children and families at risk while promoting equal opportunities to education and lifelong learning,

b) Supporting environments, which foster children’s overall development and well-being,

c) Enhancing school readiness and children’s later educational outcomes; and
d) Maintaining social integration and cohesion.

Thus, effective government support is necessary for the implementation of an integrated early childhood development programme. It is clear that inclusive early childhood education programmes allow learners to grow and develop those skills that enable them to be full members of society. To this effect, International treaties, urge governments to implement well-resourced inclusive ECD programmes that support development of learners so that they become contributing citizens of the society (Holdsworth in UNESCO, 2014).

According to Walker, Wach, Meeks, Gardner, Lozoff, Wasserman, Politt et al., (2007) governments appreciate the importance of lifelong learning as a key feature to social and economic development. In most countries, policies aim at meeting the needs of universal early childhood development programmes (Whitehood and Oates, 2009; UNESCO, 2010). Ozar (2013) highlights the fact that states agreed to support the rights of all young children by rectifying international conventions, which urge political leaders to implement policies on universal ECD programmes. The holistic approach to ECD gains support from the Convention on the Rights of the Child (CRC), which sees the child as being at the centre of the ECD programme. Although the family is the immediate duty-bearer, circumstances of poverty put most families
in developing countries unable to provide support for their children. The situation makes the children vulnerable to remain in the cycle of poverty. Therefore, a rights-based approach to ECD and the ecological systems theory presupposes that the government has the obligation to formulate and implement equitable programmes, collaborating with non-government partners, to support families, teachers, and communities with knowledge, skills, and resources for good childcare.

Brooks-Gunn (2003) notes that regardless of the call for universal ECD programmes, poverty is a serious barrier that cause families not to enrol their children in early stimulating programmes as they lack materials and resources. Thus, the risk of poverty requires monitoring to effect universal child development programmes. Hence, there is need to create early stimulation opportunities for young children with special education needs, to allow the children to necessitate normal growth, development, and early learning opportunities of these young children.

Katz and Redmond (2008), state that children from poor families often fail to access quality early learning and care opportunities outside the home. As such, government support for inclusive ECD opportunities is critical in provisioning holistic development so that they can narrow the gap in developmental outcomes among middle and high-income families.

Furthermore, inclusive early childhood development programme assists financially strained families to be responsive to their young children (Brooks-Gunn, 2003). As articulated by Brooks-Gunn (2003) the family risk model notes that the impact of poverty on relationship and interaction is phenomenal to the development of children in general and specifically those with special education needs. For instance, family stressors from financial pressure lead to emotional deprivations and decreased ability to be responsive to children’s needs (Brooks-Gunn 2003). Thus, inclusive ECD offers clear opportunities for growth, learning, and development opportunities to the disadvantaged children where the children can develop language, socialisation, and skill opportunities (Guralnick, 2011). However, these require effective government and non-governmental support.
In the light of the evidence above, the impact of poverty on young children’s development naturally leads to vulnerability to these young children. Thus, the period of early childhood is a critical window of opportunity that early child development programmes can mediate effects of poverty, disability and other forms of vulnerability (Underwood, 2015).

However, researchers state that despite government commitment to supporting young learners with special education needs, there is still evidence that in many developing countries, authorities lack the goodwill and support mechanisms to support both access and equity early childhood education programmes (Woodrow, 2014; Underwood and Frankel, 2012).

3.2.2 The present state of ECD programme

Early child development programmes can mitigate effects of vulnerability of children in disadvantaged communities. A body of research emphasises that successful ECD programmes across the globe, in developed countries are comprehensive in nature in that they offer a range of services: health, nutrition, early care, and stimulation to address multiple needs of children (Sabini, 2011). Janeva (2009) suggests that governments should take into consideration holistic perspective in developing ECD programmes that promote children’s health, nutrition, living environment, including social, emotional, and cognitive development. According to Britto et al. (2011), ECD programmes should essentially be an integrated set of actions ensuring young children’s rights to grow up healthy, well nourished, protected from harm and providing opportunities for learning. On the other hand, Levine (2003) and MacEwan (2013) observe that in developing countries, efforts to introduce universal early childhood development are at low ebb, with many children not accessing the services as endowed in the CRC. One of the issues noted by (MacEwan 2013) is that the economic push factor has provided governments with insufficient time to attend to the needs of vulnerable children. This resulted in the suffering of children with special needs, as parents are not able to cater for these children. Despite evidence that early interventions programmes are the best for promoting equity and quality services among all the ECD programmes, studies show that access to pre-school services for vulnerable children is still limited in developing countries (SIEF,
2012; Arnold, 2007; Engle, Black, Behrman, Cabral de Mello, Gerler, Kapiriri, et al, 2007a; Penn, 2004). As reported in the UNESCO report (2011:23 ) on the disparity in pre-school education:

…It is also very unequal. … Urban children are about twice as likely as rural children to participate are, and children from the poorest one-fifth of households are half as likely to be in pre-school.

Research shows that a gap on access to universal quality early childhood programmes between the most and least advantaged children within countries have not decreased, and in some cases, it has actually increased (OECD, 2006). From the review of related literature, it is clear young children with special education needs still suffer from neglect and social exclusion in a number of ways. This is despite a body of studies pointing to the nature of holistic ECD programmes that are expected. Thus, the next section discusses the ECD sectors that necessitate holistic and inclusive programmes.

### 3.3 Early childhood development sector programmes

Empirical studies noted integrated programmes and services for ECD should focus on health, nutrition, education and poverty alleviation to promote children’s development across a range of competencies (Burger, 2010; Nores and Barnett, 2010). It is important to offer comprehensive support towards children at risk of exclusion in these educational programmes. According to Nores and Barnett (2010), the ECD sector programme support the growth of children with special education needs’ growth and development through the lens of a holistic framework. However, division of governments funding and policies for ECD programmes into separate sectors such as education, health and nutrition, and critical decision-making that affect young children and families spread across several government ministries often affect programme implementation. This can create challenges for intersectoral collaboration. Even with the acknowledgement of intersectoral approach in theory, efforts to work across sectors have proved difficult (UNESCO, 2014). The following section focuses on the services that sector programmes provide to ECD programmes, to serve vulnerable groups of children.
3.3.1 The health and nutrition sector

Studies concluded that holistic ECD programmes should target improvement of, physical, cognitive, social, emotional and language development (known as ‘domains’ of development, e.g. Walker et al., 2007b). Early childhood development sector programmes must work together to necessitate holistic development for each child to reach the full development potential. Studies indicate that appropriate health and nutrition programmes play important roles in enhancing children’s early life (The World Bank, 2010). Effects of chronic sickness and malnutrition are critical impediments to good health as these affect the physical health mental process and emotional well-being of young children (UNESCO, 2014). Research demonstrates the cumulative effects of environmental deprivation, which are characterised by learning environments that are not safe, affect the way young learners, especially those with special education needs engage in early stimulation activities. Such learners might require constant protection and individualised monitoring more than other children need.

There are many service-providers supporting early childhood development services (Britto et al., 2011). According to Engle, Fernald, Alderman, Behrman, O’Gara, and Yousafzai (October 2011), all children and their families are entitled to certain health and nutrition standard guidelines regardless of the ability of children and family status. However, studies point that the majority of children in the early childhood development years do not access these standardised health and nutrition facilities.

Empirical studies show that adequate health care and nutrition reduces children’s mortality (Kerac et al., 2012; WHO, 2008). However, as noted by Bronfenbrenner (1979), such provision of holistic support for early childhood development learners require coordinated and communal efforts by multiple stakeholders, from parents and communities, governments and international organisations. Each group has a role to play in caring for young children and supporting learners with special education needs including families. For instance, communities can provide direct care and assistance to the children with special education needs, while national authorities mandate and fund essential support services such as the health and
nutrition programmes for young children in ECD programmes. Meanwhile, global agreements should define children’s rights and outline goals for action.

### 3.3.1.1 Nutritional support in inclusive ECD institutions

Nutrition is a basic requirement for enhancement of physical skills among early childhood development learners who require attention, especially in disadvantaged communities where there is prevalence of poverty, hunger, malnutrition, and food insecurity experienced by children in communities. It is evident that the absence of adequate nutrition greatly affects children’s early development (physical and brain development, as well as cognitive and learning capacities), which can lead to poor class performance including poor health (Wildeman, Mbebetho and December 2005).

There is substantial evidence from studies showing that sound health, safe environments, and good nutritional practices provide the foundation for development and learning among pre-school children particularly with those with developmental delays (Stephenson, Lathan, and Ottesen, 2000). However, research evidence shows that most ECD centres do not access these facilities, especially in disadvantaged communities, leading to cases of malnutrition and poor health in most environmental settings where young children spend their time (Perry and Halsey, 2004).

Globally, there are more than 1 500 000 young children in ECD centres, infected with HIV and AIDS, needing good caring and support in form of supplementary feeding (UNESCO, 2007). Without access to supplementary feeding, antiretroviral (ARV) therapy would not work and disease healing will not be rapid, especially among the young children with special health needs. Hence, there is need that ECD centres ensure standardised nutrition facilities to enable such children improve their health.

Nutrition provisions to ECD “A” and “B” learners enable them to refocus their energy to master important developmental skills. Where malnourishment is prevailing, it causes irreversible structural damage to the brain, impair motor functioning, and can cause critical development retardation (Stephenson, Lathan, and Ottesen, 2000).
Studies found out those children lacking certain nutrients (iron and iodine) including general malnourishment do not have the same potential to learning. Hence, inclusive early childhood development programmes should establish nutrition supplementation programmes for ECD “A” and “B” learners. Improving nutrition through various intervention programmes can bring both health and educational benefits to learners.

In Denmark, supplementary feeding programmes are effective in disadvantaged communities. The authorities integrate food supplementation with maternal education to increase child stimulation (Engle et al., 2007). Educating mothers on ways of offering responsive care giving is effective in reducing maternal distress linked to depression and childhood stress (Save, the Children, 2011). For instance, Colombia provides a cup of breakfast to young children aged two and five years every day in over 90 000 ECD centres under a special social protection programme known as the “Delivery Act” which regulate deliveries to each centre. In Panama, the Programa Pre-schooler (Pre-school Program) initiates a complementary feeding programme that improves the health and nutritional status of children aged 6 – 59 months in communities across the country (Vegas and Silva, 2012). The programme Fundación Pro Niños de Darién (Foundation for Darién’s Children), was founded in 1993 with the objective of reducing malnutrition in children by implementing interventions in the areas of nutrition, health, education, and community development. Furthermore in Panama, the government built Kitchens in selected communities, where community mothers prepare two snacks throughout the day (9am and 3pm). The snacks are rich in balanced diets that enable learners to have the needed health (Vegas and Silva, 2012). The Minister of Finance funds and supports the feeding programme, with assistance from private sector donations. In addition, the programme receives contributions from the Ministry of Social Development and Ministry of Health. These programmes improve children’s participation in ECD programme (Vegas and Silva, 2012).

In New Zealand, the government and non-governmental organisations pay subsidies to selected community-run ECD centres, providing learners with supplementary nutrition (UNESCO, 2004a).
In a longitudinal study in South Africa by Victoria et al., (2008), malnutrition among ECD children was directly leading to poor educational attainment including poor skill development in pre-school children. As a measure to improve this, government initiated nutrition for children in pre-school settings. All children in registered community-based, centre-based, ECD with grade R classes access supplementary feeding. These interventions meant to improve the education and health benefit to the learners. There are a number of service providers including NPOs, non-governmental organisations, and private organisations offering health and nutrition intervention programmes (DoE, 2012). These interventions include school feeding schemes, the provision of deficient micronutrients through fortified sachet powder/pap to homes and community-based ECD facilities. Non-governmental organisations are facilitating the start-up of food gardens, as well as skills development and training on programmes that promote nutritional needs for ECD learners.

In Kenya's pre-schools, a supplementary-feeding programme that provides a cup of porridge to children improved the attendance of young children (UNESCO 2007a). The provisions of supplementary feeding schemes to young children from disadvantaged communities in ECD centres effectively promote children’ health needs. There is a possibility that such programmes improve children’s attendance and attention during lessons, and improving prospects of early stimulation (UNESCO, 2007a).

Zimbabwe policies and statutory instruments show the government is committed to the benefits of preventive health, nutrition, and safety in institutions that enrol ECD learners. For instance, the Zimbabwe Statutory Instrument 106 of 2005 stipulates the general health expectations of all ECD centres (Government of Zimbabwe, 2005, 2007). Makokoro (2015) further established that in most ECD centres, the issue of health and nutrition is rarely considered. For instance, the report establishes that in most primary schools offering ECD “A” and “B” classes, authorities do not offer supplementary feeding for learners, even in full-day programmes. Gunhu, Ndlomo, and Mugweni (2011) conducted a study in Masvingo, where they also established that primary schools offering ECD “A” and “B” classes were lacking water, sanitation, and hygiene facilities. It is clear from the evidence provided; the government, local
communities, and families have no solutions to the health and nutrition facilities in Zimbabwean schools. Thus, the reviewed literature used to find out from participants how institutions are providing national needs for children with special education needs

3.3.1.2 Health programmes for children with special education needs

Studies show that understanding health status for pre-school children with special needs in developing worlds is crucial since the provision of health and safety in inclusive ECD settings promotes children’s well-being. According to Govindasamy (2010,) health factors in educational institutions include the following but not limited to, cleanliness, environmental influences, consideration of children with health challenges or learning needs, nutrition, learning behaviour, licensing of the programme and immunisation programmes for the young learners. The government policies require all learners to learn in safe, spacious learning environments. The formative years are typically critical for children to have health experiences as well as to learn about health issues. Thus, ECD environments offering poor health standards are inhibitive to inclusive education (Ackerman and Baenett, 2009).

As stated in the UNICEF-Innocenti Digest (2007), communities and early childhood development programmes discriminate young children with developmental delays in in provisioning of essential health services such as vaccinations and treatment of common childhood diseases. Health and nutrition deficiencies do not only place pre-school children at risk of death but also of acquiring diseases that may require special attention in the case of severe infection (Perry and Halsey, 2004). Understanding the critical role of health programmes in supporting children with developmental delays ensures stakeholders unite to offer provisions to the already learners by ensuring that learning environments are safe, clean and protecting children so that they would have health experiences.

To improve health provisions, among children and families, Croatia initiated a programme, which allows paediatricians to integrate curative and preventive care to young children suffering from special needs (Carter, 2005). Croatia ensures that medical diagnosis and care are available to all young children aged six years and
below (Carter, 2005). Such programmes connect pregnant mothers to medical facilities resulting in sound neonatal and postnatal health improvements. National programmes of that nature allow all new born babies undergo hearing screening in maternity clinics, which necessitates early detection of childhood challenges (Marn, 2005).

Belarus provides ECD health programmes to children with special education needs, where such children have compulsory free access to special health, medication, nutrition, and education services (Vargas-Baron and Janson, 2009). Furthermore, Belarus initiated a systematic outreach and child assessment system to identify children with risky status such as developmental delays, malnutrition and disabilities (Vargas-Baron, Janson, and Mufel, 2009). There are also polyclinic-based early childhood intervention centres, which cater for children with special education needs, through early intervention and identification programme.

In Sweden since 1937, there are free health care facilities to all children aged 0 – 6 years. These goals are in the Swedish National Board of Health and Welfare established in 1981, (Karlsson-Almqvit, 2011):

- To decrease mortality, illness and disability among children;
- To decrease harmful and distressing influences on parents and children; and
- To support and bring awareness to parents in their parental role, thereby creating a supportive and responsive environment for all children.

The above programmes are fundamental in ensuring Swedish children, especially those children with special education needs, to have improved psychosocial well-being and health facilities that enable them to acquire special support (Almqvit-Tangen, 2011). At the Count-Council level, the Child Health Services (CHS) ensures there are immunisation programmes, surveillances, general medical care and a family doctor, nurses as well as therapists for children with special needs. The Child Health Services is supported by the Child Centre which provides specialised medical care (e.g. for paediatrics, physical therapy, speech/ language therapy to name a few).
In Ireland, children with special educational needs are a key health priority (NCSE, 2013). The national programme provides adequate clinical and therapeutic supports for young children with special educational needs, irrespective of school placement (NCSE, 2013).

In Hawaii, the national health programme allows ECD children a broad access to a range of health services, including prenatal, oral health, behavioural, and medical services (Tadros, Silloway, Mayman, and Dahlin, 2012). The government partners with private foundation investments to support screening services for developmental delays in children aged between three and four for hearing, sight, social and emotional development (Tadros, Silloway, Mayman and Dahlin, 2012). These early screening, results in the identification of children who need appropriate health and educational services so they can easily benefit from important medical and social services designed for pre-school children with such health conditions.

In Chile, the National Health System (INS) is responsible for epidemiological surveillance and monitoring of quality assurance in health delivery system for children below six years (Vagas and Santibanez 2010). In addition, the IDB undertakes to monitor and evaluate implementation of the immunization programme for all the children less than six years old (Vagas and Santibanez, 2010). The programme ensures all ECD children get vaccinations against childhood diseases.

The government of Colombia ensures that children with special education needs get free vaccinations and immunisations, monitored by the Ministry of Social Protection. This is in line with WHO and UNDP strategy of integrated management of child illness (IMCI) (Vegas and Santiago, 2010). There are also community mothers to execute the programme and the engagement of parents is Families in Action (Farmilias en Accion). Its aim is to complement family income, buying food, to improve children’s health outcomes and ensuring all children access regular healthcare facilities to improve health childcare practices (Vegas and Santibanez, 2010). To facilitate holistic development of ECD children, community mothers are educated to understand the development of children, and on child health and nutrition, as well as organisation and scheduling of pre-school learning activities (Vegas and Santibanez, 2010).
The South African Constitution requires every child requires sufficient clean water as well as health environment that is not harmful to the wellbeing of learners (NDA, 2012). The policy aims at implementing intervention programmes that improve key family practices on the upkeep of young children and their families (Department of Health, 2004). South Africa established health programmes that include free immunisation programmes for all children aged three to five, as a Strategic Priority for the National Health System (National department of Health, 2007). The Government introduced Free Health Care Policy in 1994 ensuring that every child aged less than six years, pregnant women and lactating mothers’ access public health services (Storbeck and Moodley, 2011). Such policy measures ensure every child access immunisation and nutrition programmes ensuring that the government offers free supplementary food to all children less than six years.

The Zimbabwe Health Act stipulates that every child who is under five years should have free medication. However, the Herald reports that the health facilities are compromised (The Herald Reporter, 2010), resulting in young children being forced to pay for medication. While Zimbabwe’s health policy calls free care for pregnant women and children under five, there is lack of sufficient funding which has resulted in imposition of user fees creating a health barrier to poor women and children’s access to life-saving facilities (UNICEF-Zimbabwe, 2011). Gunhu, Mugweni and Ndlomo (2012) substantiate that health facilities in primary schools offering ECD centres lack the facilities, thus, risking children’s lives. Due to lack of facilities in ECD centres, children suffer from soil-transmitted helminthiasis (STH) and schistosomiasis (SCH) parasites that affect children’s growth and development.

In the light of the above claims, the study investigated the provisions offered by the schools and other stakeholders to help ECD “A” and “B” learners improve their health through provisions of health and nutrition requirements, water, sanitation facilities, and access to immunisation facilities, including safe learning environments. The researchers' objective was to find out if pre-school learners accessed health and nutrition services, as appropriate services would constitute positive delivery of good health and nutrition coverage in ECD institutions. The next section examines the related literature on child protection sector.
3.3.2 Child protection sector programme

Child protection involves a range of activities that prevent and respond to violence, exploitation, and abuse (Browne, 2013). Child protection assists children to achieve their basic rights to care, protection and justice (Handa et al., 2010). There is a clear relationship regarding child protection and social protection programmes as can be realised from the definition that follows. Social policy refers to a range of public policies and instruments relating to conditions of human well-being, including health, education, housing, water and sanitation, child protection, social protection (Handa et al., 2010).

Child protection programmes ensure children achieve their basic rights to care and protection and justice (Global Development Goals, 2007). Child protection programmes ensure vulnerable children access public service facilities without hassles. In ECD institutions, discrimination may take the form of reduced nutrition; inadequate care and attention to the disadvantaged learners; restricted opportunities for play, learning and education; and sometimes inhibition of free expression of feelings and views such as harsh treatment and unreasonable expectations for the young child which may be exploitative or abusive (CRC, General Comment 7). In the case of the neglected children, or the physically and sexually abused victims, including those who experience various forms of neglect and deprivation, or those whose parents fail to provide medical care, need social protection. The above circumstances truly expose such children to vulnerability and such cases require stakeholder interventions. Child protection programmes are therefore necessary to help children experience relief through the provision of equitable social opportunities (Britto et al., 2013).

Child protection programmes do not necessarily focus on children, but should target parents of children with special education needs (Britto, et al., 2013). It is also critical that child protection programmes target both parents and children with special education need to provide critical safety nets to children at risk. For instance, in most developed countries, programmes for children with special education needs target the most vulnerable children living in rural communities including their families, especially those living in rural communities (Beckman, 2010). For instance in
Canada, the government prosecutes parents, and guardians for not reporting cases of domestic violence when young children become victims of abuse. If evidence that parents or guardians have failed to report an abuse case involving a young child a fine of between $250 and &2000 is imposed (Baid, Mcintosch &Ozler, 2010). In this regard, legislation is protects children with special education needs, making sure that the community is responsive and collaborative to take reasonable care of the children. Furthermore, in Canada, the government has an abiding law, which allows police to investigate all cases where perpetrators breach child protection rights. According to the law, if teachers identify critical cases they pass them to other service providers, showing that emphasis on investigations and decisions are clear. The urgency placed on reporting cases of child abuse ensures children get maximum protection services to ensure the outcomes and the principle of acting on the Best interest of the child, directs authorities to intervene in the least intrusive manner.

Child protection programmes focus on violence within families and communities, and within the wider society and those having a possibility of causing social exclusion or discrimination on young children with special education needs (UNICEF, 2009). In most social institutions, vulnerable children lack security because of poverty of their families and consistent discrimination that affect their emotional wellbeing, resulting in loss of normal growth, development, and early stimulation opportunities (Gilgert, Parton, & Skvener, 2011).

Programmes that target both parents and children are home visiting, which target parents through early awareness campaigns by members from the ministry of health on childhood diseases. Furthermore, in Canada, there are also other programmes such as the Out-of-Home Care, where children in foster homes, with special trained caregivers for children with serious health or mental health issues. Similarly, the Canadian Government ensures children who experience abuse and neglect, from their parents, taken care by their kinship. However, Black, Trome, Fallon and Maclaurin (2006) postulate that child protection organisations sanction such custodian. It is clear that governments run programmes to reduce the overall abuse of children with special education needs. The programmes serve the interest of the children, ensuring that the child is protected against harm, and family-initiated
conflicts which if not mitigated can affect the growth, development, especially the psychosocial need of the child. In developed countries, disadvantaged children are given a first preference to quality early childhood services, supported by the government, the business community and sometimes private individuals and kinship ties (Black et al., 2006).

Middle-income countries such as Botswana, Namibia, and South Africa also have programmes to promote child protection services. In South Africa, the government has three departments are coordinating the social protection programmes namely: Department of Basic Education, the Department of Social Development, and the Department of Health (Hwenha, 2011). The Department of Health and Social protection provide the bulk of the health services, for children and women, while the Department of Social Development is funding social welfare programmes through child support grants. The funding has gone a long way towards alleviating child hunger, especially those in disadvantaged localities (Hwenha, 2011). This information enabled the current researcher to probe participants on whether children with special needs in schools under study were accessing social protection provisions.

In Zimbabwe, an Act against child abuse referred to as; The Children’s Protection and Adoption Act Chapter 5:06, seeks to ensure young children are protected by law against any abuse and neglect from parents, guardians and community at large (Government of Zimbabwe, 1996). The Children’s Protection and Adoption Act of 1996 Chapter 5:06 Part iii, stipulates that if any parent or guardian of a child or young person assaults, ill-treats, neglects, abandons or exposes the child to assaults, ill-treatment, neglect, or cause abandonment then that parent will be imprisoned. Furthermore, the Act added that the parent should not expose the child in a manner likely to cause him unnecessary suffering or to injure, the child’s health or morals (Government of Zimbabwe, 1996). According to Makiwa, (17/12/2015), the Government launched a structure to identify and report all forms child abuse. The reporting structure extends from the community to the national level, in case management system. It is clear the government has put in place policies to cater for children with special needs. Thus, it is a punishable offence for parents and guardians to neglect or abuse their children. However, in most cases, children,
especially those with special needs and their families may not understand their rights.

Despite policies to protect ECD children, cases of child abuse are in the increase. For instance, The Herald (17/04/2014) reported a case of a four-year-old girl in Chitungwiza raped on her way from pre-school. This shows vulnerabilities of ECD children in general. There are also cases where caregivers molest ECD learners. These escalating circumstances drove the researcher to carry out the study on ways primary schools cater for preschool learners with special needs in Chiredzi District.

In situations where the government pays a lip service to social protection and child protection programmes policies, children become prone to deteriorating health standards that culminate in (diseases, malnutrition, unsafe water, and lack of proper sanitation) including abuse, neglect, and exposure to domestic violence. According to Devereaux and Sabates-Wheelers (2004), children under five years are most prone to health risks (e.g., malnutrition, vaccine preventable diseases, malaria, pneumonia, diarrheal diseases, and abuse), and hence they need safety nets. Therefore, it was important to investigate the existing child protection programmes that target to protect vulnerable children from various forms of family, school, peer, and policy abuses.

### 3.3.3 Social protection and welfare sector programme

#### 3.3.3.1 Conceptualising social protection and welfare sector programmes

Social protection encompasses a range of social protection interventions and social safety nets (Omilola and Kaniki, 2014). According to Holmes and Jones, (2010), social protection refers to important strategies of reducing vulnerability to economic, social, natural, and other shocks and stresses. It plays an important role in strengthening access to and demand for basic services and social welfare services by the poorest through childhood. Thus, social protection is facilitation to a better balance between care-giving and holistic development of childhood years, critical for the achievement of the Millennium Development Goals (MDGs) (especially MDGs 4 and 5) (Jones et al., 2008). Social protection refers to interventions by public, private and/or voluntary organisations as well as informal networks which support
communities, households and individuals in their efforts to prevent, manage and overcome risks and vulnerabilities (Holmes and Jones, 2010; Omilola and Kaniki, 2014). Hence, an understanding of multiple and intersecting vulnerabilities and risks that the children and their caregivers face informs child-sensitive approach to social protection (Holmes and Jones, 2010). Social protection interventions therefore, include the commitment of government, non-governmental organisations, and international agencies to provide provisions such as housing, nutrition, and to the most vulnerable children so that they can access education, health, and funds to promote social inclusion. According to Holmes and (2010: 1), social protection is:

being protective (protecting a household’s level of income and/or consumption), but also as preventative (preventing households from resorting to negative coping strategies that are harmful to children such as pulling them out of school and involving them in child labour), and promotional (promoting children’s development through investments in their schooling, health and general care and protection).

In the same context, Devereux and Sabates-Wheeler (2004: 4) further state that social protection policies are transformative seeking to tackle power imbalances in societies, encouraging, creating and sustaining vulnerabilities, and supporting equity and empowerment. They further say social protections are:

measures that protect their rights as well as ensuring that all children have voice and agency in their families, schools and communities, irrespective of gender, religion, ethnicity, race, class or (dis)ability.

According to Holmes and Jones (2010: 1 – 2), social protection programmes seek to achieve the following:

i. **Social assistance** to poor children and households, including regular, predictable transfers (e.g. cash or in-kind, school scholarships, school feeding programmes, health service fee waivers) from governments and non-governmental entities. These aims to reduce poverty and vulnerability, increase access to basic services and, in some cases, promote asset accumulation.

ii. **Social services** for marginalised groups of children who need special care, including child fostering systems, child-focused violence prevention and protection services, rehabilitation services after trafficking, and basic alternative education for child labourers.
iii. **Social equity measures** to protect children and their families against social risks such as discrimination or abuse, including anti-discrimination legislation (e.g. laws to protect children from trafficking, early child marriage, harmful traditional practices or to ensure special treatment and rehabilitation services for young offenders). Such measures also include affirmative action measures (e.g. scholarships for children of ethnic minority or indigenous communities) to try to redress past patterns of discrimination.

A number of facets including lack of material and non-materialistic values psychologically affect children with special needs. Hence, it is one of the reasons social protection programmes target the young children to benefit the most vulnerable children by supporting them directly or indirectly through their families.

The idea of social protection programmes is to minimise the impact of barriers to health and education through intervention programmes that empower the children with special education needs (Jones, Ahadzie and Doh, 2009). The aim of social protection programmes therefore is to assist in developing and strengthening protection systems and expanding opportunities for young children’s development potential (UNICEF-WB, 2013). Stakeholders can address children’s risks in time through timely social welfare intervention programmes, such as supplementary feeding, immunisation programmes and unconditional cash transfers (Britto et al., 2011).

### 3.3.3.2 Function of social protection policy

According to Britto et al. (2013), the protection function is one of the major aspects of the social protection policy, whose aim is to ensure that families and young children are maintaining minimum acceptable levels of physiological needs like food and shelter. Social protection programmes therefore aim to protect households experiencing poverty and struggling to feed young children. In Peru, for instance, the social protection programme called Vaso de Leche, provides subsidies for milk to young ECD learners. A similar programme is in Uganda, which promotes universal primary education by abolishing health and education levies to protect families that cannot afford to pay for their children (Deveraux, 2004 in Britto et al., 2013).
Social programmes also have a prevention function where the vulnerable young children and their families who face adverse experiences and shocks are assisted to recover from the shocks (Britto et al., 2013). Examples of preventive function programmes are the informal saving clubs that allow families to rotate funds. An example of such rotating savings and credit associations is in Kenya, known as ROSCAS. In such saving clubs, families lend each other funds used to purchase sustainable household goods for family consumptions.

Social protection programmes also have a promotion function, where it aims to assist families and children to become less vulnerable in future, through unconditional cash transfer programmes which use “direct transfers to broaden the scope of protection to break the cycle of poverty” (Britto et al., 2013: 6).

Finally, Britto et al. (2013), identifies the transformative functioning as the other aim of the social protection programme, which aims at promoting and advancing social justice by ensuring that all children access their rights. This is through empowerment programmes that support the poor and vulnerable. Rights-based programmes that ensure that the spirit of social justice is spread to all who deserve support them.

An appreciation of the types of social protection programmes employed in communities assisted the researcher in that he interrogated participants on social protection programmes that support children with special education needs and their families in Chiredzi District.

3.3.3.3 Social welfare programmes

In most African countries, government, implements social protection programmes with assistance from development partners and larger international NGOs (Omilola and Kaniki, 2014). Furthermore, in some cases, local partners and churches assist children who appear to be in need of social protection provisions (Jones and Holmes, 2010). These programmes are in line with the continental framework: the African Charter on the Rights and Welfare of the Child, which states “…the child occupies a unique and privileged position in the African society” (Preamble, para 4).
For this reason, most governments in sub-Saharan Africa have heeded the call by designing legal frameworks that protect all young children (Aidoo, 2006).

In the Latin American countries, the social protection policy focuses on social participation and family promotion. In these countries, the goal is to reduce the undernourishment of children while also improving levels of dropout in basic education programmes (Jones, et al., 2009). Thus, governments established policies that support social welfare services to improve opportunities for groups of children that need special care or are denied by circumstances to access basic services (based on their social rather than economic) characteristics (Aidoo, 2006). Social welfare services also target children who have perennial illnesses, or those orphaned or those who suffer from disability/disabilities. In extreme cases, social welfare involves children experiencing violence or living in families that are experiencing various dimensions of disharmony, divorce, domestic violence. Such children require social protection services because of their exposure to risk circumstances (UNICEF, 2009; Vagas and Santibanez, 2010).

Central to the social protection policy is the ecological systems approach that focuses on coordination and harmonisation of systems to address the fragmentation that limit the effectiveness and impact of programmes for families and young children with special needs (UNICEF, 2013). Advocates for social child social protection and social welfare proffer that the child’s life cycle is a sensitive issue that calls for social protection policies (Woodrow, Arthur, & Newman, 2009). Lack of social protection causes physical and psychological vulnerabilities among families and children with special needs (UNICEF, 2009; Jones et al.,). The major reasons for social protection and social welfare policies should focus on improving health and nutritional provisions and school attendance and household requirements. Thus, children’s vulnerabilities require a critical assessment by stakeholders to improve their social and psychological well-being through stakeholders’ participation in children’s programmes. Children’s problems are viewed through the lens of their evolving capacities and uniqueness. Solutions to these problems require communities to adopt strategies that empower the affected children.
In Chile for instance, there is an organisation called the Chilean Council of Kindergarten (JUNJI) responsible for selection of children with special education needs and their families into the National Plan benefit from programmes that enable them to overcome poverty. Selection is based on people known in communities to belong to “families that cannot solve poverty by themselves” (Woodrow et al., 2014; Rasavi, 2012). Thus, proper criterion in selection of beneficiaries is crucial to ensure deserving beneficiaries in social welfare and home visit programmes.

The Colombian Act 1295 of (2009) stipulates that the purpose of the state is to contribute to the improvement of life of expectant mothers and children under the age of six years. It directs its attention to the development of a comprehensive system of care for infants and pre-school children with special needs (Vagas and Santibanes, 2010). The government is putting a strong focus on those areas that relate to early childhood development interventions: health, nutrition, education, parenting practices, and poverty alleviations (Vagas and Santibanez, 2010). The government created intervention mechanisms providing milk or micronutrient supplements for the care of young children in centres including those at home, through pre-school education, as well as parenting education. All these are social protection benefits seeking to support ECD children in schools but also those in the custody of their homes.

In sub-Saharan Africa, a number of countries have social protection programmes targeting mothers, the elderly and young children with multiple disadvantages (Aidoo, 2005). Programmes on social policy provision offer free ECD (pre-primary) and supplementary feeding facilities specifically to children with special education needs. West African countries, social protection mechanism also known as (safety nets), are rooted in informal safety nets such as traditional cultures including the rotation of credit and savings associations, private transfers and remittances, and faith-based support (Omilia and Kaniki, 2014). Community mechanisms tend to provide more support than state-led assistance (Holmes and Jones, 2010).

Some countries implement social welfare programmes such as (conditional and unconditional cash transfers, school feeding programmes, food aid) (Omilola and Kaniki (2014). For the purposes of this study, conditional and unconditional cash
transfers, is in the next section. Most countries have introduced fee waivers, and free uniforms to vulnerable learners that appear to be in need (Omilola and Kaniki, 2014). In 2004, the Tanzania government emphasised the need to turn policy into practice to support the broader frame of vulnerability and special needs children (UNICEF, 2005b). The government increased its budget for pre-school education by 130%, targeting children’s survival and protection services (UNICEF, 2005b).

In South Africa, through the Child Care Act of 1993, the governments allow for the payment of early childhood facilities and subsidies grants for children in registered early childhood programmes. The Department of Social Development is the main organ tasked to pay for child support grants for young children in extreme poverty and those with special education needs. The department takes care and support orphans and vulnerable children (OVC). UNICEF, and the Department of Social Development and other partners also fund for the subsidies on children’s health, education, water, sanitation and other social services (The Government of South Africa, 2006).

In Zimbabwe the issue of social welfare programmes is embedded in social protection policy within the constitution and national legislation e.g., Social Workers Act [Chapter 27: 21] (No.9 of 2001). The Zimbabwe Constitution states that “The State must take all practical measures, within the limits of the resources available to it, to provide social security and social care to those who are in need” (Constitution of Zimbabwe, 2013: 23). This implies that children with special needs are rightful beneficiaries of the social protection programmes. Provision of Social Protection programmes, is also within the Republic of Zimbabwe’s Constitution No.82 on the Rights of Persons with Disabilities, which says the State must act appropriately within the limits of the resources available to ensure that persons with disabilities realise their full mental and physical potential, including measures to (Government of Zimbabwe, 2013: 22):

- Enable them to live with their families and participate in social, creative, or recreational activities.
- Protect them from all forms of exploitation and abuse.
• Provide special facilities for their education.
• Provide state-funded education and training where they need it.

However, in Zimbabwe, there are only 1.14 million children who are classified as orphans and vulnerable (Annual Statistical Report, 2012: 13). According to the Zimbabwe, National Action Plan for Orphans and Vulnerable Children (NAP for OVC), such children enrolled in educational programmes are eligible for government social protection assistance. In 2001, Zimbabwe introduced the Basic Education Assistance Module (BEAM) as part of their Enhanced Social Protection Programme. BEAM is coordinated and managed by the ministries of Primary and Secondary, Labour and Social Services (MoLSS), as part of their National Action Plan for Children in schools. BEAM, is meant to cushion households from resorting to coping mechanisms such as withdrawing children from school in response to household poverty. However, only a small number of deserving children benefit from the BEAM programme (Smith, Chiroro, Musker, 2012; Deluca, Tramontano and Kett, 2014).

More than half of the identified orphans and vulnerable children in schools does not access BEAM under the Enhanced Social Protection Programme through a basic education package to cover for levies and tuition for the needy children (Smith et al., 2014). According to studies by Deluca et al. (2014), ECD learners with special education needs are do not benefit from BEAM. This is regardless of the fact that the mechanisms are in place to assist all children enrolled in educational institutions to with special education needs, to benefit from BEAM. The BEAM programme is fraught with challenges, as it is not reaching all those children with special needs at ECD level. The current study explored if ECD learners in Chiredzi District accessed social protection programmes. The literature enabled the researcher to probe participants on whether young children with special need benefit from NAP for OVC, as stipulated in the national document.

3.3.3.4 Cash transfers to assist ECD children with special needs

In most countries, social protection programmes include provisions such as cash transfers and grants, which target vulnerable groups. In developed countries, cash
transfer provisions target families of vulnerable through public work programmes, subsidised micro finance, and financial services.

In Panama, the government through the Red de Oportunidades (Opportunity Network), offers conditional cash transfer as subsidies to families of vulnerable children. The aim is to reduce critical poverty among households to enhance human capital through cross-sectorial approaches, conditional cash transfer (CCT) to families in critical poverty. The CCT department disburses cash to the heads of households so that they can spend it on basic needs such as health and food. In order to qualify, families are required to fulfil specific “co-responsibilities”, requiring them to give evidence that their children maintain regular school attendance and consistently visit health services (Burns, Evans, & Lugue, 2012).

In Colombia, a contracted agency known as Inistituto Colombiano de Bienestar Familiar (ICBF), monitors social protection programme for family welfare (Vagas and Santibanez, 2010). The organisation offers conditional cash transfer (CCT) to pregnant mothers and all children less than seven years who have special needs (Vegas and Santiago, 2010).

Also in Uganda, the government, together with multinational agencies such as UNICEF and the World Food Programme embarked on a cash transfer programme provided through parents on condition that their children enrol in pre-school. This has led to the improvement of visual reception skills, fine motor skills and receptive or expressive language through improved pre-school attendance (Gilligan, Hoddinott, &Taffesse, 2009a).

In most West African countries such as Congo, Mali, and Senegal, social protection programmes reach only a few proportions of the poor children and need families. According to Jones and Holmes (2013), the countries run a ‘demand driven’ social assistance scheme where consideration of individuals to receive assistance is upon request for the government to provide. The assistance is a one-off payment of support subject to application and does not constitute any systematic sort of support (Jones 2011).
In a study in Ghana, Holmes and Jones (2009) note that households, access cash transfer scheme known as Livelihood Empowerment against Poverty (LEAP) provided to extremely poor families. LEAP seeks to supplement the incomes of ‘dangerously poor households’ through the provision of cash transfers linking them with complementary services so that they can, over time, ‘leap out of poverty’ (Holmes, and Jones, 2009). In this regard, children with special needs have levies paid for their early stimulation programmes.

According to Holmes and Jones (2010), Sierra Leone and Nigeria, benefit from international organisations in the provision of social assistance transfers, to vulnerable children and families. However, authorities agree that social services are covering only a very small population of the children in need. A universal and a targeted model need is implemented to ensure all deserving children benefit from cash transfer programmes to augment those numbers of children living in poverty and suffering from malnourishment. Issues of poor governance and administrative capacity of the social protection services are major challenges that many nations face (Jones and Holmes, 2010; Lerise, Mmati, and Baruani, 2003).

3.3.3.5 Microcredits as a means of social protection policy

Microcredit encompasses loans or saving programs offered to eligible households to alleviate poverty. For example in Ethiopia, the Wisdom Private Banks are running some schemes that offer microloans to resource-constrained households through a group-lending model (Doocy, Teferra, Norell & Burnham, 2005).

According to Behrman (2006) several social protection programmes, in Latin America like the Progresa in Mexico offers microcredits to cater for the education and health of children and their families.

Gatenio (2012) notes that most countries that have strong social protection systems in place have great investments in education and health, and they cater for the wellbeing of children with special education needs, through these micro-credits programmes. Britto (2013) citing Deveraux (2004) notes that social protection instruments like, cash transfers with or without conditionality, have positive effects on
household consumption and on poverty alleviation. In Zimbabwe, microcredit non-governmental organisations provide loans to families to start small projects. These programmes have positive influence on school enrolment among the poorest children (Galdames, 2011). Thus, the researcher was investigating whether ECD learners with special education needs, are accessing social protection provisions, to improve their lives.

3.4 Identification, screening and assessment of children with special education needs

Ensuring that children with SEN receive adequate support should begin with correct identification of their needs (European Commission, 2013), and should be through effective diagnosis of each child’s problems. Evidence has shown that effective screening to identify developmental disorders during the first three years is essential to overcome later difficulties (European Commission, 2012). Baird (2001) pointed out screening for SEN should best be done during infancy and pre-school years. Early intervention is essential for identification of children with special education needs (Parsons et al., 2009; Marschark and Spencer, 2009; Cooper and Jacob, 2010).

Early intervention and preventative measures can help to ameliorate the difficulties the child experiences before these difficulties become more deeply entrenched and thereby more resistant to intervention (NCSE, 2013: 24). Initial identification should be timely and appropriate to ensure that appropriate intervention immediately follows (NCSE, 2013). Identifying and assessing children’s needs are an important process, where screening is repeated at different intervals to detect possible problems that might not have been identified at earlier stages. It is not the best of every parent’s ability to observe developmental delays of their children at an early age and researchers (European Commission, 2013) have always noted this. The state makes it mandatory that all children to be assessed for disabilities with specialist personnel. According to the European Commission (2013), when universal screening is not done in time, it leads to developmental risks not identified. Hence, teachers can identify children’s difficulties at pre-school level, and possibly refer them to experts for further diagnosis. The implication is that governments should effectively support
SEN identification in order to universalise education and allocate the necessary resources to these children.

In Ireland, a team of specialists delivers programmes for assessment. The team has a psychologist, medical practitioner, and the principal of the school where the child is attending or a teacher at that school nominated by the principal including a qualified social worker, and a therapist qualified to provide support services to children with special educational needs (Government of Ireland, 2013).

Desforges and Lindsay (2010) suggest that assessment of students with special educational needs should not be a once-off diagnostic event, but an on-going process closely linked to intervention. Thus, identification and assessment of children with special education needs is an integral part of the entire process of inclusive education (NCSE, 2013).

In South Africa, the Department of Education developed the National Strategy on Screening, Identification, Assessments, and Support for children with special education needs (DoE, 2008). The government supports children with special education needs enrolled in other institutions such as public centres, community centres and home-based. It is clear that the South African government supports ECD inclusive education programmes by recognising their presents in learning centres. This arrangement is crucial in equipping schools and communities with information on how to cater for children with special education needs. The government funds and monitors children with special needs' learning institutions.

In Zimbabwe, the Secretary for Education directs all schools to be inclusive. It also encourages routine screening of any form of special needs (Education Act, 1996; Secretary’s Circular No.P.36, 1990; Statutory Instrument 1 of 2000). The Department of Zimbabwe’s School Psychological Services and Special Education (SPS and SE) in the Ministry of Primary and Secondary Education supports schools in their inclusive education practices (Chataika, Mckenzie, Swart &Lyner-Cleophas, 2012). The Department of the Zimbabwe School Psychological Services and Special Education provide in-service training and support in identification and teaching of children with special education needs (Mpofu and Nyanungo, 1998). The next
section focus on educational programmes that benefit children with special education needs in inclusive settings.

3.5 The education sector programme

3.5.1 Parenting programmes

Parents bear the heaviest burden for the upbringing of children (United Nations, 1990, 2006). Where parents lack knowledge, skills, and resources to meet their obligations, governments are obliged to assist and provide parenting support (United Nations, 1990, 2006). In light of those directives, early childhood development programmes include the provision of support to parents and or caregivers of children. There is a realisation that the contribution of the school is not sufficient by itself to provide equal opportunities to children from deprived homes and communities (OECD, 2015). The engagement of families in the education of their children is critical especially when these children have special education needs and are in inclusive schools. Without the school working with families, it might be difficult to provide a fair start for young learners who are meeting new learning environments for the first time, in inclusive ECD settings (OECD, 2015). Parental programmes in inclusive settings are vital since most children with special education needs are often unprepared for school and to begin ECD classes, where they will be unfavourable experiences. Children with special education needs are often behind other children in terms of socialisation, language, and mastery of other skills, which young children need most if they are to benefit from early stimulation experiences.

Early childhood development institutions should collaborate with families, to strengthen the foundations of lifelong learning (OECD, 2015). Gaining support from parents is advantageous to educational outcomes of ECD learners, especially those with special education needs who require community support to raise their self-esteem (European Commission, 2014). The main purpose of programmes for those parents with children with special education needs, is to help parents to value their children and to empower them to advocate for their children at all stages of their development (Guralnick, 2005; European Agency for Development in Special Education Needs, 2006). Vargas-Baron (2009) also contends that parenting programmes for those parents whose children are in inclusive ECD programmes
ensure that parents are partners in assessment, planning, and evaluation of children’s learning.

Parental programmes provide training opportunities for parents to identify and deal with their children’s emotional and behavioural issues through positive parenting (European Commission, 2014). In the context of this study, it was critical to understand parental programmes designed for parents who have children with special education needs, to find out how these parents benefit from the programmes.

### 3.5.2 Home-visiting programmes

Many programmes are in place to provide support to parents during pregnancy and early childhood years. European governments provide early intervention programmes for children who are out of pre-school but are in their homes and in day-care clinics (European Commission, 2013). The major purpose of home visiting is to allow early identification of SEN children to assist them with the much-needed assistance. Early identification and assessment programmes in the home are part of the intervention programmes that also target parents and guardians (Jones, 2004).

In the United States of America and the United Kingdom, teachers and nurses conduct home visiting to families whom they know have children with special education needs where they educate parents on ways to deal with special needs cases (Waldfogel and Washbrook, 2011).

In the USA, the Nurse-Family, Partnership programme focus on improving pre-natal health, reduction of dysfunctional care of children in early life, and improving family functioning and economic self-sufficiency (Brooks-Gunn and Markman, 2005). In Panama, teachers also engage in outreach programmes for parents. The government engages in non-formal education programmes for illiterate mothers (CEFACEI and Educación Inicial en el Hogar, 2008). As pointed by (Waldfogel and Washbrook, 2014), these programmes improve responsiveness and sensitivity of parenting as well as quality of home learning environment and parents’ literacy activities. In the USA in particular, the programme improved nutrition and reduces child abuse by parents.
In the USA parent education programme, is aiming at improving specific aspects of parenting and/or specific child outcomes. The parenting programme known as the Incredible Years Programme provides parent training for families whose children have severe behavioural disorders (Brooks-Gunn and Markman, 2005).

Another parent programme is the Triple P – Positive Parenting Programme, whose aim is to promote positive impacts on children’s behaviour. The Triple P – Positive Parenting Programme is like the Incredible Years Programme, but educates parents on ways to manage children’s behaviour (Waldfogel and Washbrook, 2011).

In Belarus, outreach services are critical in identifying and servicing children with special needs in communities (Vergas-Baron and Janson, 2009). The government developed a policy that allows for inter-agency early identification, assessment, and case management to ensure children are not “lost” in the system.

In South Africa, NGOs engage in home visiting programmes. For instance, a local non-governmental organisation called Noah networks ECD community centres allowing them to take part in afterschool programmes where they are provided with supplementary feeding meals (Neudorf, Thurman, &Taylor, 2011). In South Africa, home visits are performed by trained volunteers who assess children’s needs in communities and provide further support services like play materials, nutrition support, counselling facilities and psycho-social care to children with special needs and their families. The project also enhances children’s school readiness (Neudorf, et al., 2011).

Save the Children’s volunteer childcare workers also make home visits to identify and assess the needs of children with special education needs and their families. The organisation provides health, nutrition and play services that assist early learning activities (Neudorf, et al., 2011). In the Limpopo Province, Save the Children offers ECD-specific training opportunities to volunteer childcare workers. These ECD personnel staff, in turn visit communities where they work with parents and other caregivers, teaching them parenting ideas to take care of children with special education needs (Neudorf, et al., 2011).
These parental programmes are mostly in developed countries, and understanding their objectives and ways of implementing them benefited the study. In addition, the literature review was valuable to uncover programmes ECD teachers and administrators engage parents in to facilitate their contribution towards ECD programmes.

3.5.3 Readiness programmes

In the USA, parent programmes include the Play and Learning Strategies (PALS) programme. This programme provides in-home training to parents of infants and toddlers focusing on improving parents’ responsiveness. The infant programme includes 10 sessions while the toddler programme has 12 sessions. The purpose of training parents is to understand how young children with special education needs learn. Trainers use videotapes as a training tool. According to Waldfogel and Washbrook (2011), PALS improves parents’ responsiveness and sensitivity to improve children’s communication skills, maintaining children’s interest in learning activities.

Furthermore, in the USA, parents engage in health and nutrition programmes, which offer Special Supplementary Program for Women, Infants, and pre-school Children (WIC). The programme aims at providing nutritional advice as well as helping parents to purchase healthy foods especially for those living in low-income communities (Waldfogel and Washbrook, 2011).

In the UK, a programme called Peers Early Education Partnership (PEEP) fosters reading readiness by engaging parents in some literacy programmes. The programme increased parents’ literacy understanding, and in a way, it improves children’s literacy outcomes. The programmes assist parents to make and use age-appropriate teaching materials (Waldfogel and Washbrook, 2011).

In Turkey, schools engage parents in a programme for ECD learners, called the Mother-Child Education programme for mothers of children aged 3 – 5 years from low-income families. These mothers receive weekly training to stimulate their children’s cognitive skills including language, sensory and perceptual, problem-
solving, as well as pre-literacy and pre-numeracy skills. They also participated in fortnightly group discussions designed to support mothers in their parenting and spousal roles and provide them with better coping and communication skills (Woodhead, 2014). Some of the topics covered in the Mother-Child Education Programme include, nutrition, child health, child development, learning and play activities, discipline and parent-child communication. According to a longitudinal study by Kagitzcibasi et al. (2009), children whose parents attended such parental programme have higher primary school grades and vocabulary scores, more favourable attitudes towards school and better family and social adjustment.

In the Netherlands, studies show that schools are making efforts to engage parents, to understand services they can offer to children with special education needs to gain from the social, health and education (OECD, 2015). Parental support for effective implementation of inclusive ECD programmes should not be taken for granted because of the connection between what they offer and the benefit it has to their children’s educational achievement.

Biersteker, Dawes, Hendriks and Tredoux, (2010) found that parents are not consulted in ECD services delivered to children. Stakeholders do not offer adequate resources, especially those that support children with special education needs, to fulfil their primary early childhood development obligations. Therefore, there is need to develop the much-needed parenting skills to enable them to fulfil their primary obligations. The DoE recognises the importance of training parents and guardians of children with special needs especially concerning early identification of children with special needs (Storberk and Moodley, 2011). Regardless of much the realisation of the importance of parent programmes, little is in place to motivate them many inclusive ECD centres have hardly specific programmes for adults so that they enhance their support to inclusive ECD programmes (Biersteker et al., 2010). Parents often engage in peripheral roles that do not afford them opportunities to contribute towards the education of their children. Understanding parental programmes was critical to the study as the information assisted the researcher to probe participants on programmes that schools engage parents in Chiredzi District.
3.5.4 Community-based programmes

Community-based programmes are in caregivers’ homes or are small community facilities run by para-professionals or experienced community mothers (Woodhead, 2014). They are equally relevant to the pre-school years (Woodhead, 2014). These programmes have varying goals, with some prioritising child development goals while others serve the needs of working parents. There are also called day care centres.

One of the most flourishing community-based programme is the ‘Educa a Tu Hijo’ (Educate Your Child) programme in Cuba. This community-based programme places the family at the centre of programme activities, where home is visiting central for children aged 0 – 2 years old. At 2 years, the caregivers engage the children in group sessions at least once or twice per week in a community space. The teachers ensure that children’s parents or daily caregivers participate in in-home and group sessions. In addition, the caregiver or the parent is equipped with knowledge and skills to assist in educating their children (Woodhead, 2014). According to Tinajero, (2011) the national statistics in Cuba shows that seventy percent of Cuban children under the age of 6 years participate in ECD programme (Tinajero, 2011).

Peru has an established history of community-based programmes known as the ‘Wawa Wasi’ (Children’s House) (Woodhead, 2014). According to Woodhead (2014), the Ministry of Development and Social Inclusion introduced Cuna Mas to improve parental understanding of child development of children living in extreme poverty environments. The ECD programme is multi-sectorial including components on nutrition, health care, early learning, and working with families. Hence, the literature review assisted the researcher to investigate the connected nature of the sector programmes in the schools where the researcher carried the study.
3.5.5 Centre-based pre-school programmes

Centre-based pre-schools are more formally organised pre-school programmes for children aged 3 – 5 years. According to Woodhead (2014), centre-based programmes have emphasis on ‘school readiness’ goals. In the same way, Rio et al., (2013) point out that centre-based programmes have child-focused interventions that emphasise on high quality of stimulation (indoor learning materials and outdoor learning equipment), in addition to learning materials that enhance development of skills. Centre-based programmes have appropriately qualified teachers, principals, and childcare workers/minders. Woodhead (2014) also notes that centred-based programmes have a well laid-down structure that is characterised by a well-defined child sized curricula and instruction. Studies concluded that centre-based programmes have higher quality in terms of the products (Engle et al., 2011). The next section focuses on how stakeholders implement inclusive ECD programmes.

3.6 Implementing inclusive early childhood programmes

Many stakeholders debate enrolment in ECD classes, concluding that the programme does not cater for other groups of learners in communities. Empirical studies show that there is a large misrepresentation regarding to composition of ECD class enrolments world over (Woodhead, 2014). Woodhead (2014) also noted that ECD enrolments show a large gap of children with special needs and those without. This is regardless of government frameworks that emphasise on inclusive education. In the absence of compulsory policies on delivery of ECD services, studies established some huge variations regarding to access of children with special education needs’ enrolments in mainstream schools/classes. Studies by Britto et al., (2013) found out that schools exclude many disadvantaged and other socially marginalised groups of learners. Thus, the study investigated how schools were catering for those marginalised groups of learners enrolled in ECD centres.

In Chile, early childhood development programmes are part of mainstream education system (Rolla, Leal and Torres, 2011; Ministrio de Educacion de Chile, 2011). The government has made a legal requirement for all children aged five years to enrol in ECD as a requirement to enter primary education (Heckman, 2013). The legal provision has seen large enrolments of ECD learners including those with special
needs to be part of public institutions. For instance the Law of Social Integration for People with Disability, No.19.284, Chapter 11, January 1994 states that:

The public and the private mainstream education centres should incorporate the necessary innovations and curricular adaptations to enable access for children with special education needs, providing them with complimentary education required in order to assure them of their performance and progress within the system.

The education sector implemented a more responsive curricular within the context of a coordinated inclusive education programme which involves health, legal protection, social protection and education. It is a requirement that each early childhood development institution has at least one full-time specialised qualified teacher to teach in inclusive ECD programmes (OECD, 2009). Nevertheless, while other countries had made a requirement regarding the establishment of the legal framework requiring qualified ECD teachers to teach in inclusive classes, some countries might not be having the same policies. Hence, the researcher was obliged to request for the educational qualifications of teachers as a basis for understanding whether teachers were capable of catering for learners with special needs.

In countries such as Panama, the national framework for the Pre-school Program calls for the provision of compulsory education to all children aged four and five years. According to Vagas & Silva (2010), the government supports institutions that offer inclusive pre-school education by providing free education to children enrolling in both public schools and private institutions. This resulted in a boom in pre-school enrolments, which rose to 61% for children aged four and five years (COIF, 2008). To harness support for early childhood education the government made the family a component of ECD.

In Sweden, teachers operating in inclusive education programmes have personal assistance (Ljung-Djärf and Holmqvist Olander, 2013). It is clear that teachers have to be better qualified to manage children with special education needs. Inclusive ECD centres are required to reduce environmental complications that hinder full participation of children with learning challenges (Holmqvist, Brante and Tullgren, 2012). Arrangements are made where the Child Health Service and Centre provides staff supervision and consultation to help the proximal development of pre-school
children with special needs. There is also an arrangement where all staff members without the necessary skills and knowledge to work in inclusive schools undergo in-service training to reduce environmental challenges that hinder full participation of such learners (Holmqvist et al., 2012).

Closer Zimbabwe, South Africa established the legal framework that calls for compulsory inclusive ECD programmes, however the policy does not include children with severe special needs to be part of mainstream education who are by policy referred to special schools (DoE, 2001b). The literature was important in establishing the national policies, district policies including school policies that guide enrolment of children with special needs in mainstream schools. Furthermore, the researcher investigated whether ECD teachers have desired skills to work in inclusive early childhood development classes. The existence of legal frameworks allowing all children with special needs to enrol in ECD classes has a strong bearing on establishment and successful implementation of inclusive programmes.

3.7 Capacity of ECD teachers to teach in inclusive classes/schools

One of the major issues that affect appropriate and effective implementation of inclusive education programmes is the absence of qualified ECD teachers. There is both an absolute shortage of teachers and a relative shortage of teachers qualified and competent to teach in specific phase, especially on the teaching of Braille at the foundation phase (DoE, 2011 – 2025). Teacher quality plays a decisive role in the measurement of student progress, and in programme implementation (OECD, 2010c). Teachers’ skills, knowledge and qualifications, have a lot of bearing towards attainment of holistic development of these children (Barber and Mourshed, 2007). Teacher training has major implications on curriculum implementation at ECD level (OECD, 2013). Furthermore, improved training and education of ECD teachers improves the quality of services and programme outcome as the knowledge, skills and competencies have ripple impacts on the way teachers organise and execute the courses of actions to bring desired results (OECD, 2013). Thus, this section of literature review helped the researcher to investigate the capacity of ECD teachers to delivery in inclusive classes that have children with special education needs.
Various countries laid down procedures on what is required for teachers to deliver in inclusive classes. According to the Ministry of Education in New Zealand (2010), well-trained teachers provide the basis to handle inclusive ECD classes. Hence, special training is necessary for inclusive ECD teachers. The Global Monitoring Report (2010), state that inclusive ECD teachers should possess effective skills of communication, which relate to their role to discuss students’ needs and performances of general education teachers, parents, and administrators. Teachers for inclusive classes need effective communication skills to explain to parents and guardians difficult concepts that characterise assortment of children with learning disabilities. They also need critical thinking skills to necessitate organisation of learning experiences for children with diversified learning needs (Rieser, 2013).

In the UK, Ireland, Scotland, and Norway, governments emphasise that teachers should have the ability to detect, identify, and assess learning needs for children with special education needs (European Commission, 2013). The implication is that all teachers must have working knowledge of warning signs regarding developmental delays. In these countries, Initial Teacher Training (ITT) for teachers equips teachers with skills to develop the required expertise of handling children’s special education needs. Specialist teachers are therefore important for the delivery of inclusive ECD programmes and their services for children with special education needs is critical as they assist and help to identify developmentally challenged and to lead children with specific disorders (European Commission, 2013).

It is clear several studies point out that appropriate teacher training is critical for teachers to understand children with special education needs’ dispositions, and assisting teachers to identify children’s learning difficulties (Jimerson and Hansen, 2009). For instance, in Chile each early childhood development institution has a full-time early childhood qualified teacher with a higher level of specialised qualifications to teach young children with special education (Junta Nacional de Jardines Infatiles, 2005; Ministrio de educacion de Chile, 2011). It is clear that the measures relating to initial teacher training are important in the advancement of an inclusive ECD teacher, with skills and knowledge to cater for children with special education needs.
According to Drame and Kamphoff (2014) for inclusive education to succeed, effective teacher training is necessary for teachers to adapt and adjust instructional materials to learners’ needs. Concisely, an inclusive ECD teacher possesses skills that enable him/her to think outside the box in order to build solutions that assist children with special needs in mainstream classes/schools. In schools where ECD classes do not have qualified teachers, the school head can seek the service of someone who is qualified to act as a resource person to other teachers. Furthermore, teachers also need to generate new ideas that enable them to help their students as well as those teachers to adjust/adapt their lessons to suit the needs of learners with disabilities (Government of New Zealand). From the above information, it is clear that it was necessary for the researcher to investigate the qualification of ECD teachers so that it would be easy to ascertain their capacity to conduct classes that have children with special education needs. Such knowledge would be critical to the outcome of the thesis since it could lead to realistic recommendations that are in line with the training of inclusive ECD teachers. Thus, this information was helpful during the course of the research because the researcher was able to probe issues surrounding teacher qualification as the availability of resource units and the qualifications of the work force that man them. This information was relevant in determining the capacity of ECD teachers to cater for children with special education needs in inclusive classes.

3.8 Curriculum for children with special needs

According to The National Institute for Early Education Research (NIEER) (2007) curriculum refers to content, materials and methods that substantiate children’s learning and development. ECD inclusive education curriculum is central to teaching and learning (Weeks and Errandu, 2013), and it determines ways teachers handle learners with special education needs. Wood (2013) notes the determining factor of the ECD curriculum is a list of childhood developmental milestones indicating the child’s developmental level. Therefore, the ECD curriculum should be designed as a basis from which comprehensive teaching and learning materials can be developed to enhance the competencies (NCSE, 2013), of those diverse learners in their own contexts of growth, development and experience. However, for children with special educational needs, an individualised assessment informing the basis for teaching
and learning should be part of an ongoing and cyclical process of assessment, intervention, and review of outcomes.

For the development of a functional ECD curriculum, the DfES (2001) in the UK urges practitioners to work closely with parents listening to their views to have curriculum that is sensitive on children’s previous experiences, knowledge, understanding, and skills. DfES (2001) recommends that inclusive ECD curriculum should provide opportunities for all children to develop in six specific areas of learning:

1. Personal, social and emotional development
2. Communication, language and literacy
3. Mathematical development
4. Knowledge and understanding of the world
5. Physical development; and
6. Creative development.

From the above recommendation, it is clear that inclusive ECD curriculum should aim at developing the totality of the child. For instance, in Fiji, the emphasis of the inclusive ECD curriculum is put on learning and teaching environments are safe, for example, buildings, grounds and equipment, (indoor and outdoor) are developmentally appropriate for children (Government of Fiji, 2008). The Fiji Ministry of Education directs the physical learning environment for children with special education needs to in inclusive environments to adhere to the following:

- It should be adapted to the needs for all students, parents, visitors, and communities.
- The environment should be safe including the grounds and buildings.
- The environment should be printing rich, stimulating and spacious.
- The physical environment should be colourful, and attractive that is conducive to learning.
- The environment should be accident free.

To ensure effective curriculum implementation, qualified Early Childhood Care, Development, and Education teachers are the only ones who are eligible to deliver
quality programmes that meet developmental and cultural appropriateness.

Also in Chile, the national early childhood development curriculum, guides teachers on what to teach as well as the skills to impart to learners with special needs who are in mainstream pre-school centres. It also assists teachers with the methodology to use (Ministrio de Educacion de Chile 2001, 2011). The implication of this literature review is that, the current researcher had to observe the nature of inclusive ECD programmes to determine whether it was appropriate for the age level and capable of assisting the individual learners to develop to their full potential.

However, successful implementation of inclusive ECD curriculum depends on a number of factors that include a well-prepared learning environment, well-trained teachers (Shonkoff and Phillips, 2000), small teacher-child ratios, as well as stimulating and developmentally appropriate curricula and settings. The implication is that naturally, when classes are large it is not possible to implement an inclusive ECD curriculum and to assist every learner, as the sole focus of inclusive classes in individualised teaching. According to Ozar (2013), the principle of individualised teaching is to support individualised learners with diverse needs, in inclusive pre-school classes. Given the effectiveness to address individual needs of learners, it is clear that teacher-pupil ratios should be small enough to allow teachers to attend to the multi-diversified needs of children. Thus, other barriers include the lack of knowledge and skills of pre-school supervisors who have limited kindergarten experience. Lack of knowledge and experience on current issues relating to early childhood development programmes are major problems hindering effective implementation of quality pre-school education. Shortages of trained teachers in rural areas and lack of in-service training programmes for the servicing teachers manning ECD classes was also cited as a barrier to effective implementation of inclusive classes that benefit children with education special needs. The above information was relevant to the current study and it was necessary to explore the same issues on teaching methods teachers employ and also availability and suitability of teaching and learning resources (e.g., indoor and outdoor teaching materials) in these inclusive ECD centres.
3.9 Attitudes of school communities towards children with special needs

There is considerable research output showing that early childhood development programmes for children with special education needs are influenced by caregiver relationship. According to Holdsworth in UNESCO (2014), in China, teachers are not prepared to teach children with special education needs for various reasons, ranging from lack of training to teach children with disabilities to cultural influences. In the same way, Cooper et al., (2013), note that in UK, studies have shown that in most schools, teachers and communities have negative views of children with special needs, resulting in low self-esteem from the majority of the children. Naturally, these studies reveal that children with special education needs lose their self-esteem because communities marginalise them.

On the other point, Ruttle (2014) notes the following attitudes for teachers in Austria:

i. Special education teachers together with their pupils feel they are excluded in special schools. Their argument is that even the best-equipped and well-staffed schools could not put in place a 'normal' environment for children with special education needs.

ii. Parents and disabled adults complain that the relationship between disabled and non-disabled children is characterised by fear, insecurity, and ignorance. They argue that if children with special needs were educated alongside those called normal children, learning and playing alongside each other, negative feelings are removed. However, this is only a supposition. The conclusion on attitudes of most school communities about the inclusion of children with special education needs in mainstream classes is characterised with scorn, bullying, and discrimination.

In Malawi, a study by Harris and Schbert (2001) found that 9.1% of the children were dropping out of ECD education soon after the death of one or both parents, due to poverty and discrimination. Ainsworth, Beegle, and Koda (2001) in Uganda found out ECD enrolments for orphaned children tended to suffer from discrimination, from various angles of society.
Also in Zimbabwe, studies have found out that teachers have poor attitudes towards children with special education needs (Maunganide and Kasayira, 2004). These teachers noted that they do not like teaching children with mental retardation, while some point to the deaf and dumb (Mpfu et al., 2007). A study by Mutepfa et al. (2007) and Deluca et al. (2014) found out that teachers still segregate and discriminate children on condition of having special needs. It is clear that the system of education continues to disadvantage some sections of children with special education needs particularly those in early childhood development settings are more vulnerable. This is despite the existing legal framework that regulates their enrolment in inclusive learning environments. Thus, the researcher investigated the relationship of ECD stakeholders with children with special education needs in Chiredzi District so that he determines whether the children benefit in inclusive educational settings.

3.10 Infrastructure in pre-school settings

Infrastructure plays a critical role in establishing a student friendly environment, in inclusive education schools. According to Gallagher, Clifford and Richard (2000), infrastructure in ECD settings ensure there are educational standards. It also supports quality and accountability of learning and teaching activities at learning institutions. Improvement of children’s development, especially at ECD level depends greatly on a range of learning opportunities and developmental supports that children receive in learning institutions (Halfon and Friendly (2013). The implication is that schools should strive to have child-sized learning materials and equipment, which address the developmental needs of all learners in the ECD, centre.

Pre-school centres are inaccessible by many children with special education needs, because they lack the necessary infrastructure, which supports those children that best require that assistance (UNESCO, 2007). As a result, they affect enrolment of children with special education needs and limit their involvement in learning activities in ECD centres. For instance, ECD centres lack rumps, yet these schools have learners on wheel chairs. In such cases, the classrooms are inaccessible to learners, and to parents that also use wheelchairs. Coffman (2007) states that unavailability of supporting infrastructure affects the institution’s capacity to plan, evaluate and to
carry out important functions that are intended to improve children’s development and learning. Institutions enrolling children with special needs had not modified entrances to classrooms, resulting in some children with special needs struggling to access the facilities. Taguma, Litjens and Makowiecki (2013) warn that schools are struggling to meet holistic development of ECD learners; they lack learning materials. In such situations where there is lack of supporting learning materials and classrooms not accessible, needs of children with special needs are hardly catered for. Hence, stakeholders should support institutions with the relevant infrastructure if regular schools should support children with special education needs.

In Jordan, the government constructed infrastructure at 400 ECD pre-school centres through the World Bank loan. This venture resulted in increased enrolments of the vulnerable children in government run ECD institutions from almost 0% in 1999 to 17% in 2010 and to 37% in 2012 (EFA: Global Monitoring Report (2013/14)). Thus, government assistance to improve inclusive ECD infrastructure is critical for the development of children with special education needs, thus this issue deserved further investigation to find out what the government and its partners are doing so that all learners benefit.

In a study in Botswana, Mukhopadhyay, Nenty, Okechukwu (2012) found that most primary schools did not have appropriate infrastructure and resources to improve learning and development of children with special education needs. Mokhopadhyay et al. (2012) observe that schools that enrol children with special education needs lack classrooms that support inclusivity. In Zimbabwe A study by Hlopo, Ganga and Kufakunesu (2013), made similar conclusions that ECD "A" and "B" classes lack appropriate infrastructure, especially those for learners with special needs. the studies show there are similarities in governments on catering for learners with special needs.

In South Africa, only 4 – 5% of the children with disabilities attend ECD facilities (SAHRC, 2014). However, there is serious inaccessibility of ECD facilities for children with disabilities. One reason why ECD centres lacked age-appropriate infrastructure, sensitive to children with special needs was unavailability of the law that enforces funding of ECD services (SAHRC, 2014). In the face of economic
hardships, ECD institutions hardly have capacities to improve infrastructural adaptations and adjustments, to accommodate students with diverse learning needs. Regardless of enrolling children with special needs, some ECD institutions have barriers to inclusive education, as they do not have appropriate infrastructure that is responsive to those kinds of learners (Griffin, 2013). Most ECD institutions enrolling children with special education needs report that learners lack assistive technologies. Hence, the issue of availability and appropriate infrastructure in primary schools attaching ECD classes is one area the study wanted to investigate.

3.11 Teacher Education Curriculum for inclusive education teachers

Successful implementation of inclusive education that is in harmony with children with special education needs require highly trained teachers who meet the individual needs of learners and families. However, to come up with a responsive teacher education curriculum, it requires a lot of input from other professionals whose experiences is virtuous to the history of integrating children with special education needs into mainstream education (Padro and Woodrow, 2014). For example in Chile, the Chilean National Council of Kindergartens offers technical guidelines on practical approaches to inclusion. The guidelines are important for establishing criteria for identification assessment of children with special needs and for evaluation of children’s educational achievements (Padro and Woodrow, 2014; Razavi, 2012).

Salamanca Statement for Action (1994) urged governments to mobilize support from civil society organisations including international agencies such as UNESCO and UNICEF to improve and to enhance teacher education programmes especially inclusive education (UNESCO, 2008). Furthermore, the Salamanca Statement encouraged pre-service teacher training programmes to orient prospective teachers from pre-school, primary to secondary schools towards disability issues. As such, it is clear that teacher training represents a determining dimension of quality in inclusive ECD programmes. It also stands that the success of any special education needs project, especially in programmes for young children depends primarily on the commitment and skill of the teachers to handle the learners (European Commission, 2013). It is clear that effective delivery in inclusive ECD programmes hinges on the
effectiveness of teacher training to equip teachers with the necessary skills and understanding of teaching in inclusive classes.

In view of such information on the quality of teacher training for inclusive education, Chile’s national early childhood development curriculum, guides teachers on the skills, the methodology, and the content suitable to teaching in mainstream preschool centres where there are children with special education needs (Ministrio de Educacion de Chile, 2011). In Panama, the Ministry of Education is responsible for teacher training, making sure that teachers have the best skills to deliver in inclusive ECD settings. To ensure all children are benefiting from their education, the government is providing teacher training equipping teachers with skills to cater for children with special education needs.

In Ireland, a teacher-training curriculum for teaching children with special needs focuses on the following teacher skills:

- Assessment and identification of learning and caring needs for students with special educational needs;
- Planning for each student with special educational needs, so that he/she has appropriate access to curriculum, setting meaningful learning targets and monitoring progress and outcomes for each learner;
- Differentiating the curriculum for students with intellectual or learning difficulties, behavioural difficulties, communication and language difficulties, physical and sensory difficulties so that each unique need is covered;
- Organising and delivering the teaching and care program in the classroom using a variety of appropriate teaching methodologies that stimulate learning;
- Involving other stakeholders in ECD programmes such as parents, special needs assistants, and health professionals (NCSE, 2013: 62).

In Australia for instance, three-year trained primary teachers take a special education study in their fourth year. Such situations imply that globally, governments are in dire need of teachers with a special education needs qualifications, one who would address the unique needs of the learners. It is clear that curriculum for teacher training must be improved to ensure that all prospective teachers have more than just enough knowledge that allow them to cater for children with special education
needs. In addition, teacher education curriculum should go beyond ensuring that teachers are collaborating with parents, but should actually allow parents to be equal partners in the education of their children. Hence, also examined the extent to which teachers have knowledge about growth, development and early stimulation programmes for children with special education needs.

Curriculum for teachers teaching children with special education needs should promote progressive principles of handling children with special education needs in kindergartens (Global Monitoring Report, 2007). These include a focus on child development, active learning, and attention to individual differences and group functioning. Other key areas they also should cover include creation of respectful relationships between staff, parents and children, as well as promotion of holistic evaluation of children. Furthermore, teacher training is expected to focus on holistic development and active participatory pedagogical process in the training of ECD teachers. This training model will be useful in implementing an inclusive early childhood development programme where teachers have the necessary teaching skills.

The nature of teaching children with special needs implies that teachers should have exceptional skills that allow them to handle the unique needs of each learner. One of the skills repeatedly identified by authorities is observation, which is critical for both teachers and parents. Observation skills are vital for teachers to meet appropriate goals that fulfil their requirements for individual learning programmes designed for each unique learner (Alexander, 2008; Holdsworth, 2014). Equipped with critical observation skills, teachers are able to design programmes that accommodate children with special needs; therefore the teachers will allow them to adapt curriculum content to utilise assistive technology if necessary and also importantly to individualise teaching procedures that suit range of abilities.

In Ireland, heads and teachers are required to have the following specific skills to support students with Special Educational Needs in Schools (NSCSN, 2013):

i. School heads are required to have the knowledge, skills, understanding, and competence to lead and develop a whole school approach based on a firm
commitment to inclusion of students with special educational needs, should be reflected in the school’s policies and practices (NSCSN, 2013).

ii. Classroom teachers teaching children with special education needs are required to have the knowledge, skills, understanding, and competence necessary to provide for the education and care of all students but most particularly those with special educational needs.

Thus, curriculum for teachers should allow them to handle classes for children with special education needs and to adapt their curriculum so that those learners could benefit immensely from programmes that allow them to express themselves without necessarily competing with other learners. Furthermore, concerned teachers must have knowledge about what works best for different learners with diverse background, to assist those learners with special educational needs to learn to the maximum extent possible, through use of knowledge about evidence based educational interventions. In as far as possible, teachers should apply ICT knowledge (NCSE, 2013: 62), so that all learners can actively be involved in their own way according to their own learning difficulties.

However, regardless of the benefits cited, there are challenges that are noted. For instance, teacher training is not aligned to the new curricular guidelines especially inclusion of vulnerable learners in ECD class (Save the Children, 2014; OECD, 2011). In developing countries for instance, teachers are criticised for failing to match theory and actual practice of teaching children with special education needs.

Most countries support teacher development programmes to equip teachers with important skills necessary to handle children with special education needs. For instance, teachers are provided with modules that are written to support them with practical skills of delivering in classes where they are children with special education needs. According to Rinald (2008), teachers need practical information on what they can do in situations where they face diversity classes, including how they can identify children with special needs and how they ought to refer the children for medication and rehabilitation.

In 2009, Vietnam (DFID2011) assisted teachers by providing a second round of training for part-time support teachers in three districts. The organisation also,
trained teachers for outreach programmes for the production of teaching materials for those teachers that have specific children with learning difficulties.

To demonstrate how institutions cater for children with special education needs, teachers showed how they marry theory to the actual teaching. School heads and District Education Team members gave evidence-based information on what they felt about the way teachers catered for children with special education needs.

3.12 Strategies employed by stakeholders to cater for early childhood children with special education needs

Teaching in inclusive ECD institutions requires teachers with skills, and knowledge to employ different strategies that accommodate all children including those with special education needs. Skills and knowledge are important for teachers, so that they support early intervention programmes for children with special education needs (British Institute of learning Disabilities, 2010). Early intervention strategies, which include identification and assessment skills, are critical for ECD teaches to assist children who show early signs of learning disabilities (OECD, 2013).

Early intervention programmes should have four main goals: (Children’ Bureau, 2004:5).
1. To support families in supporting their children’s development
2. To promote children’s development in vital domains
3. To promote children’s coping confidence
4. to prevent the emergent of future problems

The effective use of the multi-disciplinary and networking procedures to support children with special needs constitutes major strategies teachers employ in existing ECD programmes (EADSNE, 2010). According to EADSEN (2010), in some countries, they have vibrant healthcare services that take into account the importance of early diagnosis medical surveillance and immunisation programmes throughout the early years. In such countries, ECD teachers have knowledge of
diagnosis and medical surveillance skills, so that they can support growth and development of learners in acquisition of skills (European Commission, 2013).

In European Union countries, compulsory access to Early Childhood programmes is an intervention strategy that ensures all young children have access to early stimulation programmes as early as possible (European Commission, 2013). Compulsory access to early stimulation programmes is vital for children with special education needs because it ensures that each child will have a change to benefit from these programmes.

### 3.13 Strategies to collaborate with parents to promote inclusive education

Many authorities agree that new programmes can only be successful when people are knowledgeable about what goes on in that programme. Furthermore, Keilty, (2004) and Muller and Ahearn (2005) concur that in America, teachers educate parents on the best practices of teaching young children in inclusive classes. For instance, they mention that teachers emphasise that structured play is the only way other teaching method for children that are under seven years. The idea is to allow parents to appreciate ways young children master concepts in a way that is none threatening.

Public awareness programmes about early childhood inclusive education is crucial as it creates collaboration with parents (Keilty, 2004). In a study in American states, public awareness campaigns on inclusive education showed that 65% of EO states were successful because school heads and teachers engaged communities through awareness campaigns. Another way of collaborating with parents, schools in USA market inclusive early childhood programme by targeting vital stakeholders including parents of children with special education needs (The National Early Childhood Technical Assistance Centre, 2011).

Advocating inclusion of children with special education in regular classes/schools allows parents and key stakeholders to accept the programme. School heads use brochures, flyers, and websites to reach different stakeholders early care providers
and families about inclusion (The National Early Childhood Technical Assistance Centre, 2011). Teachers write the brochures in local languages to ensure that all stakeholders comprehend the message about the benefit of inclusive education programme. The current researcher was interested in how teachers promote school communities on inclusive education programmes.

### 3.14 Strategies for inclusive ECD curriculum development

The Department of Education and Early Childhood (DEECED) (2008) in Victoria in Australia notes that teachers employ pictures as a strategy to ensure that all learners with special education needs in regular classes are taking part in learning activity. The use of pictures is important for children with special education needs as it allows learners to think logically and critically. The activity is with learners in pairs or in small groups; the strategy allows each learner to be involved in the learning process, which results in social, and language development. However, the authority warms that teachers need to monitor the activity to make sure every learner is benefiting as introvert learners may not contribute to the learning process, while extroverts may dominate the learning.

According to Harmer (2003), role-play is also a very useful strategy employed in inclusive ECD classes. Role-play can be effective by allowing learners to debate topic that they encounter in everyday lives, regardless of children’s diversity. In addition, role-play can be utilised to teach various concepts across the ECD curriculum, which can include inclusivity (Harmer, 2003). Furthermore, role-play is used to teach all subjects across the curriculum. For instance, teachers can use role-play to teach Expressive Arts especially in teaching drama. The strategy allows learners to develop holistically as they immerse in the learning process. As a strategy, it assists learners to develop holistically; as they act out themes, they laugh and act together, thereby appreciating one another regardless of physical, social, and another difference. Learners that perform in role-play, usually improve their confidence as well as their motivation, as they feel free to voice their concerns in a less threatening environment (The Department of Education and ECD, 2013).
One strategy of good practice is acknowledging success of what ECD learners do in inclusive classes (DEC/NAEYC, 2009). The strategy is effective because, with young learners, they develop self-esteem upon realising that they are successful and the caregiver appreciates their work. Hence, passing a positive comment is encouraging for children in inclusive classes. As a strategy, it enables even the slow learners to feel that they are worth in the community of learning (Frankel and Underwood, 2012).

One of the strategies teachers use more frequently is to model and correct children’s attitudes, especially in inclusive classes when a child misbehaves towards others. He notes that teachers should be specific of the behaviour not approved. However, it is also important to note that good teachers negotiate for appropriate behaviour needed in inclusive class (NAEYC, 2009).

DEC/NAEYC (2009) encourages the capacity to demonstrate skills and behaviour as a strategy, which is worthy practising in inclusive early childhood development settings (Underwood and Langford, 2011). In this regard, teachers do not need to tell learners what to do. Instead, teachers should perform activities with the learners. For instance, if it is a particular skill that learners should learn teachers should demonstrate the skills while children are observing. They can also demonstrate how the skill is done. This can take the form of a procedure the teacher want learners to carry out the activity.

According to Underwood et al. (2012), asking questions is a strategy that improves critical thinking in ECD classes. Asking questions that are provoking to children’s thinking is a good strategy teachers should employ in a variety of learning situations in inclusive classes. Children are prompt thinkers and questions improve their thinking.

Teachers should give assistance (such as cue or hint) to help children work on the edge of their current competencies (NAEYC, 2009). Giving assistance to children whenever they appear to be struggling is also an important strategy that teachers can use in ECD inclusive classes.
Finally, creating and adding challenges that goes beyond what learners are doing is a strategy that assists children with special needs to raise their competencies (NAEYC, 2009). However, teachers should consider when and where to actually provide these challenges. Such a strategy is mostly helpful in teaching mathematics and sciences. Teachers should simplify the task, if they feel the learners are facing difficulties in accomplishing the task.

3.15 Strategies to accommodate unique needs of Individual children

Understanding individual learning needs of each learner is a critical strategy to learners with special education needs. In China and United Kingdom, teachers assess individual learners so that they can assist learners with special needs (Holdsworth, 2014; Underwood et al., 2012). The child's individual programme is in operation throughout the day and teachers observe as the child carries on with his/her activities and only to intervene at points when they think they should offer support system. If the teaching plans require them to be observant to the child’s utilisation of learning material, or the interaction with other children and the ability to follow instructions, the teacher has to support the learner. This entails a one-to-one session with the child in order to capture everything that the child does and to determine whether the child is making progress (Holdsworth, 2014; Cross, Traub, Hutter-Pishgahi and Shelton, 2004). An individual programme is also the basis of the free play session in early childhood development programmes. Even during group teaching sessions, teachers ensure they direct and redirect the child with special needs to allow him or her to benefit from the learning process (Holdsworth in UNESCO, 2014). This strategy goes along with what Gadzikowski (2015) identifies as the principle of differentiation which include the teachers’ involvement in conversation with individual learners in an effort to assist them to improve their thinking. These strategies create rich and satisfying learning experiences for individual learners enabling each learner not to compete with others. In addition, teachers employing individualised instructions enable individualised learners to improve their thinking skills and to be independent thinkers. However, this does not imply that in inclusive classes, opportunities should not be created to learn from
other learners, but it implies that teachers should appreciate that learners are
different and they learn best if they are assisted, as individual personalities.

Individual programmes assist teachers to monitor children's learning as well as
appraising parents on skill development peculiar to every learner (Holdsworth 2014;
DfES, 2002). Such an undertaking assists teachers to have a follow-up in form of
communication with parents and guardians on their child’s individual performances.
Strategies employed by teachers in inclusive classes were important to the study in
that it enabled the current researcher to determine whether children with special
needs are getting any meaningful assistance. In addition, the information is used to
provide critical recommendations especially to institutions that train pre-service
teachers, including institutions that conduct in-service programmes for teachers. The
current study benefitted from the literature review because the researcher used the
information to interrogate teachers and school administrators on strategies teachers
employ to cater for children with special education needs in inclusive classes.

3.16 Strategies to establish child friendly schools

Inclusive education like any other educational phenomenon requires good leadership
from schools heads. Day et al. (2009) also found that the head teacher’s leadership
is potentially critical in influencing improvement in the school's organisation and the
teaching and learning environment. Rodrigues (2009) also found that school heads
made the greatest impact through their ability to influence instruction in schools. The
implication is that school heads should employ strategies that promote good
teaching (Chapman et al., 2011) since it is the case, that good teaching is good for
everybody. Thus, this provides effective teaching that fosters the benefits of inclusion
and maximises the learning of children with special education needs requires special
consideration from the leaders. Ross (2001) argues that school leaders have three
core tasks, and provides such strategies of leadership: fostering new meanings
about diversity; promoting inclusive practices within schools; and building
connections between schools and communities. Based on their study in Australia on
strategies for inclusive education, Chapman et al. (2011) suggests that school heads
who engage in good administrative practices are building and sustaining good an
inclusive education culture, and they pay particular attention to having consensus with school communities on issues revolving around inclusive values.

According to Dyson et al. (2004), strategies school heads employ face challenges because the majority of them are not trained to have relevant skills to implement inclusive education values and to be sensitive to vulnerable groups of the learners. Hence, this has impact on the delivery of inclusive education practices. In addition, school authorities are not selected based on their understanding of inclusive education, yet they are critical for sustaining changes in beliefs, values, and practice. The implication is that some schools tend to do better in promoting inclusive education programmes because the school heads usually have prior training and knowledge that leaders already have.

In the USA, early childhood development school heads have developed a website on inclusion resources (Expanding Opportunities, 2011), which provides training materials and advice to early childhood providers. This website aims at helping teachers to cater for children with developmental delays in mainstream classrooms/schools. The strategy is also important in sensitising communities on inclusive education programmes. This strategy has been cascaded down to the school level where school heads are assisted to make informed decisions about critical steps to make in determining the most appropriate service provision to ECD learners children with special learning needs.

A research by Ofsted (2006) in USA found that successful school heads are those who assist their teachers to engage in professional development programmes to allow teachers to implement inclusive practices. Researchers suggest that effective professional development must occur on an ongoing basis, focusing on the school's educational challenges (Department of Education, 2001). Strategies by different school heads include other models of school-based training as part of plans to enhance the development of collaboration, problem solving, and mentorship that comes with sharing of best practices of working with children with special education needs in regular classes. Therefore, most effective school heads plan from their teachers and other stakeholders working with children to engage teachers in mentorship school based programmes. School-based continuous professional
development programmes include encouraging teachers to engage on Action Research on working with special education needs; it also refers to seminars, demonstration lessons symposiums, and simulations. School heads may also provide professional development programmes on line, evening courses off-campus courses and the use of school-based mentors if they feel the timetable is congested (Quality Learning Agenda, 2005). Thus, supporting teachers who are the real implementers is an important strategy, which enables teachers to adapt their curricula to accommodate learners with special needs, and at the same time ensuring that all learners benefit, in inclusive settings. Hence, the study examined this important area, with an aim of finding out how teachers’ knowledge and understanding of delivering in classes that have children with special education needs is enhanced.

In addition, Chapman et al. (2011) found that effective inclusive school heads have a clear channel of supporting their staff. School heads should define clear roles and responsibilities on who should do what in the delivery of services in inclusive classes. The strategy involves having a clear period for the major plans that the institution intends to make for children with special education needs. These projects might include construction of rumps and construction of special infrastructure for learners who use wheel chairs having other learning devices in place. Thus, the strategy involves building confidence in teachers as well as in caregivers who also work with children with diverse needs on daily basis. The strategy also involves, setting-up the tone of the school concerning accommodating children with special education needs in regular school/class. Chapman et al. (2011) further states that in Australia, school heads engage in the recruitment of skilled and committed staff that drive inclusive education delivery. Hence, the study sought to establish strategies school heads are employing to cater for children with special education needs in ECD inclusive settings.

In the UK, British Columbia and Ireland, school heads' strategy in enhancing special needs education programmes includes placing identified students with special needs in appropriate classes. They also ensure that curriculum and infrastructure is adjusted to assist children to grow, develop, and learn the required skills. However, this is done through effective consultation with parents (DfES, 2001; Jones,
This means, in an inclusive school every school’s curriculum must be flexible enough to allow every young learner with special needs to be accommodated (DfES, 2001; Karen, 2005).

In China, schools should not just emphasise the training of good educational practices of catering for ECD children with special needs solely on the classroom teacher, but also on local administrators. It is the head’s responsibility to ensure that each special needs class is integrated within the school system (UNESCO, 2014). Professional and attitudinal change can only be achieved with the active support and understanding of the school head (Holdsworth, in UNESCO, 2004; Salamanca, 1994). In the context of this study, the researcher investigated how school administrators and heads of schools are improving the way communities are catering for children with special education needs.

Studies conducted in Zimbabwe revealed school heads are organising in-service staff development workshops, led by resource unit teacher(s). Teachers employ demonstration lessons or peer reviewing teaching on how children with special education needs learn (Mpofu, 2004). Thus, teachers in schools with resource units have knowledge of how they can cater for children with special education needs in inclusive classes (Mpofu, 2004).

However, regardless of the aforementioned strategies, studies note that inclusive education is facing challenges of large classes (Alberta’s Learning, 2000). Schools with resource unit teachers have communities that possess an awareness of inclusive education programmes as well as environments that accommodate children with special education needs.

3.17 Strategies employed by the District Education team to cater for ECDSEN

The District Education Team’s responsibility is to support schools, based on the view that local education offices are best placed to play a critical role in the enhancement of quality inclusive education teaching and learning (Mavuso, 2013). To achieve the EFA goals, central governments, through their ministries of education, developed
effective decentralised district administrative and management tools close to the schools. The major function of the District Education Team is to ensure that schools are producing quality teaching in all programmes as deemed necessary by the central government.

In this regard, the District Education Team provides support to all schools in the district through school visits (Lugaz and De Gauwe, 2010). Globally, district education officials provide pedagogical evaluation of the teachers’ work as well as the level and successful implementation of all the educational programmes in the district. In the case of new programmes, supervision and assessment are in line with provision of continuous professional development, as each visit that the District Education Team makes ends up in imparting skills and knowledge to teachers and school heads (Lugaz and De Gauwe, 2010).

The roles and strategies of the District Education Team vary from one country to another. In Illinois in the United States of America, the district Education offices are fiscal agents who ensure that the money that entrusted to schools by the government and parents is put to good use (Ruiz et al., 2007). Thus, District Education Teams audit donor funding and food from non-governmental organisations.

In Chile, teachers are ‘sensitised’ and trained in the language they should use in inclusive schools so that they treat children with special education needs appropriately. A monthly bulletin allows easy study and analysis by parents and teachers on how to help early childhood development children with special education needs (Padro and Woodrow, 2014). Teaching materials are developed and distributed on how to teach in inclusive classes/schools. To initiate their usability, teaching materials, were tested to find out if they stimulate students and whether the materials allow children to participate in the learning process (Padro and Woodrow, 2014). The government is working on structural modifications on infrastructure to improve access for children with physical problems to learning centres (Padro and Woodrow, 2014).
In Kenya, the Ministry of Education is responsible for the provision of both administrative and professional support to education at national, provincial and district level. The provision of professional support focuses on teacher training and improvement of teaching skills, spearheaded by the District Education Team and the municipality education offices. Supervision and provision of support services to all staff members including those manning ECD classes is through visiting of schools and workshops (Maoulindi, 2008).

In Zimbabwe, the decentralisation of education ensures that all educational programmes within their jurisdiction were implemented as per policy directives in different educational districts. The District Education Team gives support in terms of teaching and learning to all educational institutions. In addition, they also follow up to oversee the progress that institutions are making about implementing new programmes. The District Education team serves as a professional and administrative role model to school heads and teachers regarding displaying of the much-needed attitudes in enrolling children with special education needs.

3.18 Strengthening local collaboration to promote inclusive education

The concept of partnership, also referred to as “complementary expertise” is crucial in implementing inclusive education programmes (Jones, 2004). Positive collaboration between the school, civil society, government, and parents of children with and without special education needs (SEN) is critical for children’s education. Opportunities for parents to share with other parents on issues regarding children with special education needs should allow parents in the school communities to support inclusive education. The school administration, teachers, and other stakeholders should value parents’ views on how they can support inclusive education. The school administration, teachers, and other stakeholders should value parents’ views on how they can support inclusive education. Wolfendale (1997: 4) quoted by Jones (2004) emphasises the importance of parent involvement by stating, “It should lead to full and equal rights and opportunities to participation and power sharing in special needs processes and decision-making.”
In the UK, the Taylor Report (1977) established that parents should collaborate with teachers, health personnel and social workers to improve learning and development of the young children (Jones, 2004). To be specific, Jones (2004) notes the Wannock Commission of 1978-heralded partnership between schools and parents in promoting education for children with special education needs. It is clear that schools that are collaborating have established strong inclusive education programmes.

Studies on education collaboration show that 40% of American pre-schools are thriving because centre directors established effective local coordination (Evaluation Summary: Expanding Opportunities, 2011). Childcare and Head Start programmes have thrived in America because of the existence of trusting collaboration with parents, resulting in community change of attitudes (Expanding Opportunities, 2011). Collaboration of stakeholders has necessitated joint trainings of teachers and parents and has improved relationships among local entities, thereby addressing previous challenges encountered by early childhood inclusive education and care, programmes (Expanding Opportunities, 2011).

In Zimbabwe, partnership between parents and schools are successful in some communities while in others it is not the case (Chataika, 2012). It was noted that the level of family involvement in children’s education varies by the types of inclusive education programme available (Mpofu, 2007). Parents whose children attend more structured inclusive settings are likely to consult teachers, psychologists, and the school heads regarding the education of their children (Mpofu, 2007). Parents in non-structured schools are not likely to involve the parents in ECD programmes. Thus, on-going collaboration between ECD centres and parents should be encouraged as an indispensable way that enhances partnership, especially when it comes from parents. Thus, the area is critical in the study and it requires further investigation to establish strategies that schools and the District Education Team are employing to cater for children with special education needs, in Chiredzi District.
3.19 Strategies civil society organizations employ to cater for ECDSEN

Civil society groups include traditional organisations like religious organisations and modern groups and organisations like non-governmental organisations (NGOs) and churches are a sub-section of the civil society (Pasha, 2005). Non-governmental organisations and independent centres sponsor early intervention programmes of certain childhood conditions (e.g., children with Down Syndrome, autism, deafness, speech, language deficiency and physical disabilities). In most developing countries, research established that non-governmental organisations are working with schools and communities to support rehabilitation of children with special education needs. In Pakistan for example, research found that non-governmental organisations are providing a range of services to children who need such services regardless of gender, religion, ethnicity, race, disability or socio-cultural background (Nawaz and Raza, 2002).

The strategy that most private organisations and non-governmental organisations employ is advocacy (Department for International Development [DFID], 2014). They advocate for the right of all children, regardless of children’s vulnerability circumstances. The major responsibility of civil societies is to ensure governments collaborate with other organisations to assist in the development and programmes of children with special education needs (DFID, 2014). The primary role of the civil society is to ensure the government eventually claims ownership of supporting children with special education needs.

Another strategy that civil societies employ to improve the services for children with special education needs is funding of programmes. For instance, in Kenya, UNICEF, and Sightsavers work with education ministries to improve the livelihoods of children with special education needs. Sightsavers provides capacity-building programmes to teachers and parents to enable them to assist learners with special education needs. They equip teachers with skills to identify and handle the children with special education needs in inclusive settings.
In Bangladesh, Leonard Chishire Trust funded about 200 primary schools (DFID, 2014). The Trust is also involved in teacher training programmes, of which to date, the organisation has trained over 400 primary school teachers as well as reaching 2,400 children with disabilities (DFID, 2014).

In Nepal, a number of non-governmental organisations are improving the education of children with special education needs. Literacy Watch Bulletin (2000, No. 15) reported that Save the Children (Japan, USA, and Norway) are improving the education and health sector programmes by targeting under-privileged children and women. The strategy focuses on improving vulnerable children’s education as well as women’s literacy. They are also involved in improving school buildings, ensuring that school buildings are free from major health hazards. The Redd Barna (Save the Children Norway) is educating children about their rights, assisting the vulnerable children in difficult situations to build their better future.

In Pakistan, research reported that the private sector has emerged as a strong partner in assisting schools to promote children with special education needs. For instance, the Bait-ul-Mal provides funds to support children with disabilities. Because of support from non-governmental organisations and private sectors, Nawaz and Raza (2002) noted that the standard of special education in Pakistan has changed remarkably. There is no doubt that the strategies that are employed by non-governmental organisations are important in improving the plight of children with special education needs. However, the success of such strategies hinges on the support and commitment of the government to improve the welfare of children with special education needs.

The current researcher probed participants on strategies employed by civil society organisations in promoting ECD inclusive education programmes in Chiredzi District. Given the crucial role of civil society organisations in promoting children with special education needs, it was important to investigate their roles and strategies in implementing inclusive education, so that the study would recommend ways of reaching all the deserving students.
3.20 Government strategies

3.20.1 Early diagnosis for children with special education needs

Intervention programmes for children with special education needs are critical in improving their wellbeing. One of the major strategies that European countries employ to assist children with special education needs is ensuring that every child identified as having special education needs has access to pre-primary education opportunity (European Commission, 2013).

The UK government encourages the local education areas, schools, and pre-school settings to work together to identify special needs cases (DfES, 2001a 1.6). The school heads and nursery school teachers already see the benefits of early identification of children with special education need (Jones, 2004), as the children are provided with the best educational assistance.

According to Padro and Woodrow (2014), in Chile, early diagnosis and treatment for children with special education needs, done in JUNJI Diagnosis Centre and in special schools. Pre-school staff trained in identifying, assessing and teaching children with special education needs (Padro and Woodrow, 2014) in inclusive settings.

In addition to early intervention, Chile purchases assistive devices such as wheelchairs, prostheses, and hearing aids, supplied to those children with special education needs (Padro and Woodrow, 2013). These assistive devices will ensure that the young children will know how to utilise the aids. UNESCO also assists the government by training teachers and directors of nursery institutions to identify and assess children with special education needs (Padro and Woodrow, 2014).

In Finland, every child from the age of ten months to seven years joins the day-care system where children diagnosed for special education needs cases (European Commission, 2013). This early intervention programme ensures that children with special needs cases identified early and assisted. This has seen up to 85% of the Finish children with special education needs or at risk diagnosed and enrolled in
ECD programmes (EADSNE, 2006). The government is also providing them with the most appropriate assistance based on the need of the child.

In Hungary and Belarus, governments introduced Early Intervention Centres (EICs) to provide services that assist to detect children with special education needs from zero to six years. A team of specialists that focus on the holistic development delivers identification programmes. Adequate focus goes to terminally ill children and those from poor backgrounds. To offer effective diagnosis, the team consists of paediatricians, special needs teachers, physiotherapists, psychologists, social workers and integration specialists (European Commission, 2013). They also ensure that all children have standard health and their well-being is well looked after within the context of their families (European Commission, 2013). However, in developing countries, early identification and assessment of children with special education needs provided by non-governmental organisations. Mostly, this is because the governments do not have enough funding for such programmes.

Non-governmental organisations have encouraged schools to build links outside the education sector to access the required assistance for children with special education needs. These organisations are helpful in providing early intervention programmes to schools with children with special education needs at ECD level who require early diagnosis so that they could also access early assistance. Early identification of disabilities can limit the impacts of impairments. In India, and Uganda, Sightsavers have supported programmes for community-based rehabilitation.

These international organisations offer technical support and other expertise benefits to institutions. Holdsworth in UNESCO (2014) credits the role of international organisations in improving the status of children with special education needs through assisting in teacher training programmes. In China, the programme for teaching children with special education needs is successful because it gets support at the highest levels, with international organisations, non-governmental organisations and the national government of China, through legislations and policies.
In the State of Alberta in USA, education personnel are equipped with skills to identify the early stages of students’ special needs and to initiate assessment techniques for those students. Upon identification and assessment of special needs cases, the government provides support services targeting improvement of the child’s education programme. There is a policy (Section 29 (1) of the School Act,) that empowers school authorities to determine students in need of special education programmes based on their behaviour, communication challenges, intellectual capacity, including learning or physical characteristics, or a combination of the above characteristics (Learning Alberta, 2000). It is important in this literature review to note that while some developed countries have established early identification and assessment programmes for children with special education needs. In Africa, such programmes not been established. Thus, such literature was important in determining ways in which Chiredzi District schools are assisting children with special education needs with appropriate support services. Early special needs identification programmes are crucial in enabling school communities to track the special education needs identified children. Establishing centres that detect and identify children with special education needs is one way of providing special attention to these children (Government of Colombia, 2013).

3.20.2 Strategies by the government to implement ECDSEN curriculum

Globally, governments have initiated inclusive education programmes to promote inclusion of children with special education needs in formal mainstream school system, putting all elements in place to ensure the children benefit. In Chile for example, there are training initiatives by the Regional Technical Teams (RTTs), which ensure that appropriate supervision is offered to early childhood educational institutions offering inclusive education. The institutions offer support on the adequacy and appropriateness of the curriculum within the paradigm of inclusion process. Focus is on curriculum, which integrates family work and working in the multi-diversity societies. Also included in the curriculum is the role of the teacher and other educational agents in implementing inclusive early childhood development programmes. Teachers are offered specific training on classroom-based activities, giving special attention to children with special needs (Padro and Woodrow, 2014).
Consistent with the concept of quality universal education, the British Columbia has created legislation that categorise children with special education needs, as special needs students. In the United Kingdom, the Department of Education and Special Needs enacted a policy known as The Code of Practice, 2001. The above documents define students with special needs and lay the obligation of school boards to consult with parents in the placement of these children in inclusive early childhood programmes (Government of British Columbia, 2013; DfES, 2001).

United Kingdom, British Columbia and Scotland, developed a circular called, the Individual Education Plan (IEP) Order M638/95, which sets out the requirements for school boards and teachers to design and implement individual education plans for students with special education needs. According to European Commission (2013), an IEP serves as a contract between teachers, parents and other professionals, to commit themselves in assisting children with special education needs. Use of the IEP ensures effective positive-strength approaches and needs-based assessments used for each child to determine appropriate curriculum adaptations (Peters, 2003). It was clear from the above literature review inclusive schools worldwide designed that cater for the unique needs of individuals. Hence, in inclusive classes, teachers should focus on planning curriculum that takes every child in the class/school to understand the concepts taught. The implication is that the curriculum should be flexible, determined by the unique needs of individual children. In addition, the British Columbia has also designed a government known as the Student Progress Report Order M191/94, which describes reporting requirement from teachers on the progress of students with special needs.

A policy of inclusion, in British Columbia (2013: 2) stipulates, “A school board must ensure that a principal offers to consult with a parent of a child who has special needs regarding the student’s placement in the learning programme.” One of the crucial strategies that governments employ involves consultation with students with special education needs, the parent, and the teacher on the child’s curriculum. The policies encourage stakeholders to support inclusion education programmes. Furthermore, consultation builds a sense of ownership among the stakeholders, which is important in the implementation of inclusive programmes, especially where parents are supporting the programme.
Based on the above information, this study sought to investigate whether institutions offering programmes for children with special education needs have IEPs for these children. Thus, to establish the availability of these programmes, the study explored available documents in schools that targeted these children with special education needs. Availability of such documents was evidence that teachers were catering for children with special education needs in ECD programmes. Furthermore, the study explored the nature of partnership that promote inclusive education curriculum for children with special education needs.

3.21 Support and monitoring mechanism provided to ECDSEN teachers

The 1994 Salamanca Statement declares inclusive schools should be favourable settings for achieving equal opportunity and full participation of education by all young citizens. The Convention acknowledges that the success of the inclusive education programmes requires a concerted effort by teachers and school staff, peers, parents, families and other stakeholders. To facilitate this, social institutions such as schools, hospitals and other public institutions require reforms to accommodate learners with special education needs. Interventions for supporting learners with special needs and institutions come from stakeholders who should target teacher training, infrastructural development, advocacy, as well as procurement of assistive devices and other learning resources.

Support encourages supporting general advocacy activities that seek to educate communities on issues of children with special needs (DFIDS, 2010 – 2015). Therefore, sustained advocacy programmes that focus on the entire community improve stakeholders’ understanding of education as a human right. The following sub-topics cover support that stakeholders offer to teachers so that they improve ways of assisting learners with special education needs.

3.21.1 Support provided by the government to ECDSEN teachers

According to Holdsworth (2014), support systems from the central government are essential for the success of programmes for children with special education needs. Governments develop systems that support schools in their efforts to educate
children with special education needs. In China, the federal government through the local administration offer overall support and monitoring systems to schools and teachers who teach children with special education needs so that these learners do not feel isolated (Holdsworth, 2014). The government provide teaching resources, funding for training workshops and seminars, and assistive devices for special needs education learners (Holdsworth, 2014).

Furthermore, in Austria the government designed a national curriculum that teachers utilise in inclusive ECD classes. It is clear the availability of a national curriculum ensures that there is uniformity on what teachers teach, and on the general aims of the ECD curricula. This sets standards for teaching and it guides the outcomes that ECD teachers should strive to attain.

Also in Colombia, the government has a quality assurance measure that cut across sectors and institutions to ensure the content learners learn meets standards. Such quality assurance measures provide a legal framework that enforces compliance within ECD settings across all public and private institutions.

The government of Sri Lanka, in 2009, worked with international consultants to improve the welfare of children with special education needs in inclusive settings. The government and the consultants developed needs-based toolkits that assist teachers with strategies to operate in inclusive ECD classes. Such a strategy has provided teachers with information on ways of handling children with special education needs.

In Ethiopia, the government urged all teacher-training institutions to have an additional course, which exposes pre-service teachers to special needs education curriculum. Furthermore, a specialist pre-service training in four institutions which include disability and society; assessment; early intervention; responding to different impairments counselling, community based rehabilitation are part of the initiatives to assist teachers to adjust to inclusive classes. The paragraphs highlighted that governments laid down support and monitoring mechanisms to ensure ECD children with special needs attend inclusive classes.
3.21.2 Support provided by school heads to ECDESN teachers

According to the Salamanca Statement (1994), local administrators and school heads should play a major role in making schools more responsive to children with special education needs. The Salamanca Statement directs local administrators to have training to develop skills to support and monitor programmes for children with special education needs (The Salamanca Statement, 1994). The Salamanca Statement says school heads should be developed through workshops to initiate more flexible management procedures that assist them to redeploy instructional resources meet diversity-learning options, through effective resource mobilization that offer instructional support to learners with special needs (The Salamanca Statement, 1994). The Salamanca Statement further directs school heads to promote positive attitudes throughout the school community as well as arranging effective co-operation between class teachers and support staff (Salamanca Statement, 1994: 24). The 1994 Salamanca declared that declared Curricula should be adapted to children’s’ needs, not vice-versa, and it is the responsibility of the school head to ensure that curricula in inclusive ECD class meets children’s needs. This means children with special needs are entitled to receive additional instructional support in the context of regular curriculum and not a different curriculum.

Based on these directives, in China, school heads are themselves at the centre of implementing inclusive education programmes. According to UNESCO (2014), the head’s responsibility in implementing inclusive education is to ensure that each special needs class is integrated within the school system. Other responsibilities include influencing professional and attitudinal change to the entire school community through the school head’s active support (Holdsworth, 2014).

According to the Government of Alberta (2000), the school head ensures there is availability of teaching resources provided to teachers. These teaching tools should help teachers to implement ECDSEN programmes based on individual needs of students with special needs. Thus, it is the task of the school heads to ensure that teachers have child-sized tools with practical application to children with special education needs in inclusive early childhood development settings. The school head should ensure that teachers receive professional support to handle children with
special education needs. Such assistance to teachers is offered through continuous professional development programmes as already have been explained.

3.21.3 Support provided by civil society organizations to ECDSEN teachers

One of the objectives of the 1994 Salamanca framework was to give responsibilities to government to work with non-government. The Salamanca Conference urges non-government organisations and other funding agencies such as World Bank (WB), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Children’s Fund (UNICEF) and United Nations Development Program (UNDP), in laying the basis of inclusive education programme.

According to Global Monitoring Report (2010), NGOs offer in-service teacher training programmes to teachers in schools that do not have qualified specialist teachers. For instance in Kenya, Sightsavers a non-governmental organisation trains a contact teacher in each school.

In China, the Elementary Division of Anhui Provincial Education Commission (APEC) and Save the Children Fund UK (SCF) support inclusive pre-school programmes ensuring that children with special education needs learn together with those who do not have. Since 1988, each ECD centre admits and enrolls two or three children with learning difficulties (Holdsworth, 2014). The government provides teaching resources and funds teachers whenever they are attending training workshops and seminars on ways of improving teaching learners with special education needs (Holdsworth, 2014). Save the Children sponsors, at least one qualified foreign teacher with special education needs qualification to work with APEC team to assist local teachers to work in inclusive classes (Holdsworth, 2014). The above activities motivate teachers, and to equip the teacher with skills to operate in inclusive classes.

In Chile, private organisations and local non-government organisations collaborate with the government to fund inclusive education programmes (Padro and Woodrow, 2014). Furthermore, international agencies such as UNICEF, provides funding for in-service teacher training programmes for a few selected staff members, who after training retrain teachers in the different regions (Padro and Woodrow, 2014).
However, schools often face the challenge of failure to support ECD teachers due to lack of finances. Hence, support from non-governmental organisations and international agencies is critical in ensuring teachers understand unique needs of learners.


In South Africa, a number of other organisations offer services to improve the implementation of inclusive education programmes. For instance, a local non-governmental organisation called Nurturing Orphans of AIDS for Humanity (Noah) and Save the Children in collaboration with the Centre for Positive Care (STC/CPC), the Southern African Catholic Bishops’ Conference (SACBC), World Vision, and Woz’obona. These non-governmental organisations assist in monitoring programmes for children with special education needs.

Apart from the local and international non-governmental organisations (NGOs) there are also community-based organisations (CBOs) that play an important role in ensuring that children with special needs access to ECD services (Marfo et al., 2008).
World Vision’s centre-based programme, concentrates on supporting ECD teachers by offering expanded teacher training programmes that enable them to work with vulnerable learners in the broader community (Marfo et al, 2008). A further support to ECD teachers is provided with Woz’obona’s, which is a pre-school teacher training programme which focuses on helping teachers provide ECD education to young children in resource-constrained environments. Woz’obona engages teachers in workshops and training programmes so that they can help parents and primary caregivers to be active participants in their children’s cognitive and physical development. These programmes are important for teachers because they equip teachers with skills and knowledge to stimulate children is cognitive, social, and physical.

In Zimbabwe, UNICEF Zimbabwe initiated in-service programmes to ECD “A” and “B” para-professional teachers in more than 56 education districts (UNICEF, 2012). Furthermore, Leonard Cheshire Zimbabwe Trust and partners improve Inclusive education programme in Zimbabwe since, 2009 (Deluca, 2014). Their role has been on improving school community’s understanding of inclusive education, as well as changing the attitudes of parents, teachers, and school administrators (Deluca et al., 2014). Given the role of non-governmental organisations in supporting teachers, to adapt their teaching to meet the diversity of learners in inclusive classes, this literature review was important to the study, as it was also pertinent to establish the roles of non-governmental organisations in supporting ECD teachers’ efforts in inclusive settings in Chiredzi District.

3.21.4 Support services offered by psychologists to support ECDSNE teachers

According to Zwiers and Johnson (2012), in some countries, school psychologists trained to offer specialist support to teachers, parents, and children with special education needs, are critical to children with special education needs. They have the expertise in mental health and education and they provide educational services to learners who have special education needs including their teachers and parents (Zwiers and Johnson, 2012). The responsibilities of educational psychologists revolve around identifying and offering assessment to learners who require
diagnosis. In the state of Alberta, school psychologists provide services that include suggesting to teachers on strategies, programmes development, implementation support, and problem-solving consultation to teachers, parents, and school staff (Zwiers and Johnson, 2012). From this analysis, inclusive education model requires educational psychologists to work with classroom teachers to assist them to design programmes that foster accountability to children with special needs in inclusive classes.

According to NCSE (2013), educational psychologists assist teachers in inclusive schools to initiate solutions to problems that children and teachers encounter in inclusive classes. Most importantly, educational psychologists collaborate with teachers to identify instructional solutions to problems that teachers encounter as they teach inclusive classes. According to NASP (2014), children with special education needs require school psychologists to assist them to succeed and do well in their schoolwork, ensuring that they adjust well socially, behaviourally, and emotionally. Thus, for inclusive education teachers, psychologist’s assistance is very important. School psychologists are entitled to work with educators, parents, and other professionals to create conducive learning and safe, healthy, and supportive environments for all children but particularly for those with special needs (NASP, 2014). Thus, with their services, school psychologists strengthen communications between home, school, and the community (NASP, 2014). It is the role of school psychologists to address learning and behavioural needs for children and parents (NASP, 2014).

In Ireland, psychologist support teachers through offering assessments to learners in the classroom, where concerns arise regarding progress and behaviour (NCSE, 2013; DES, 2007, 2010). Furthermore, psychologists assess complex problems of learners with special education needs, using a range of formal assessment methods (NCSE, 2013). Educational psychologists also provide teaching resources used to teach children with behavioural and emotional challenges.

In Austria, Ruttle (2014) noted that educational psychologists act as consultants to teachers, especially in situations when schools have learners with special education
needs. It is the head’s responsibility to ensure that each special education needs class is integrated within the school system (UNESCO, 2014).

In Sweden, the Department of Child Habilitation Centre advises and supports families, teachers, and children with disabilities (Homquist, Brante and Tullgreen, 2012). The traditional goal of the Child Habilitation Centre is to assist stakeholders enhance the development of the child by building the child’s resources and to give the child optimal opportunities for independent life in future. The next section summarises the chapter on literature review.

**3.22 Summary**

This chapter explored several dimensions of literature on children with special needs in ECD settings. Specifically the chapter reviewed literature on ECD sector programmes, relevant for inclusive ECD settings. These are the health and nutrition, education and social protection programs sectors. The literature show that the health and nutrition sector programme is critical to ECD learners in inclusive settings. The health sector works with ECD institutions to ensure that children the learning environment is safe for all learners including for learners with special education needs. Furthermore, literature also shows that the health and nutrition sub-sector programme should check whether all children are vaccinated against major diseases as addressed by WHO.

The researcher also reviewed literature on intervention strategies stakeholders employed to minimise problems in inclusive ECD settings. The reviewed literature indicates that stakeholders carry advocate campaigns, continuous professional development programmes and collaborative activities to improve communities’ understanding on ways to cater for children with special education needs.

Finally, the study looked at support and monitoring programmes offered by key stakeholders to teachers to assist them to cater for children with special needs. Literature review showed that teachers go for continuous professional development programmes to assist them to cater for learners with special education needs (European Commission, 2013). Furthermore, literature shows that the non-
government organisations also support teacher with teaching and learning materials and other incentives, to allow them to improve their understanding of children with special education needs. The next chapter looks at the research methods used for the study.
CHAPTER FOUR

METHODOLOGY

4.1 Introduction

This chapter presents the methodology adopted for the study on catering for children with special education needs in early childhood development programmes. The chapter covers the research paradigm, the research design, nature of sampling and population including data collection and analysis adopted to address questions of the study. The chapter rounds off, discussing the Research Ethical considerations that the study followed to collect data for the research.

4.2 Research paradigm

Maree (2007) defines a paradigm as a set of assumptions or beliefs about fundamental aspects of reality, which gives rise to a particular worldview. In the same way, Mertens (2010) defines a paradigm as a way of looking at the world, composed of philosophical assumptions that guide direct thinking and action. Creswell (2014: 6) sees a paradigm as “philosophical worldview assumptions” that are brought to the study. Furthermore, Creswell (2014) says paradigms are important because they guide the researcher about the designs that are specific to a particular worldview and the procedures that the research will apply in conducting the study. The three authorities concur that paradigms serve as lens or organising principles of the research to assist the researcher interprets reality in a specific way. Creswell (1994) in Khumwong (2004) note that philosophers and researchers make specific claims about what knowledge is (ontology), knowledge about it (epistemology), the values (axiology), how we write about it (rhetoric) and the process for studying it (methodology). In this regard, paradigms are comprehensive belief systems, worldviews, or frameworks that guide researches and practices in the field of study. This study investigated the nature of these knowledge claims on the provision of social services; health, child protection, social welfare and education to early childhood development (ECD) children with special education needs by educational stakeholders in Chiredzi District. Mertens (2010) and Creswell (2014)
identified some of the paradigms used in research, among them positivism, post-positivism, interpretivist, critical paradigm, postmodern and multi-pragmatic research. The section below gives a brief description of the first three paradigms as these give a clear picture on the reasons the researcher selected a particular paradigm. The section will round off describing the paradigm used to guide this study, which is post-positivism.

4.2.1 The pragmatic paradigm

The nature of the problem that the researcher investigated influenced the selection of the paradigm. This study investigated delivery of services to ECD children with special education needs, in primary schools attaching ECD centres in Chiredzi District Zimbabwe. To get a more holistic picture of how stakeholders are providing social services to ECD children with special education needs in inclusive ECD institutions, the current researcher had to be objective to minimise all the possible biases. Furthermore, the researcher had to be subjective in to get a deeper insight into the issues surrounding the implementation of inclusive education programmes in Chiredzi District. In this regard, the researcher considered the paradigm that adequately supports both positivistic and interpretivist principles were the most appropriate for the study. Thus, the study adopted a pragmatic paradigm, as the philosophical foundation that guided the study because the researcher wished to maintain an interest in some aspects of quantification (positivism) yet at the same time, had to incorporate interpretivist concerns around subjectivity and meaning. In addition, the researcher used the pragmatic combination of qualitative and quantitative methods to understand how primary schools catered for the enrolled ECD “A” and “B” children with special education needs. At the same time, the pragmatic paradigm supported the mixed method design because of its flexibility in using both qualitative and quantitative methods.

Pragmatism is not committed to any one system of philosophy of reality. Pragmatist researchers focus on the “what” and “how” of the research problem (Creswell, 2003: 11). In pragmatism, the concern is what works best for understanding a particular research problem. Instead of methods being important as is the case in the positivism knowledge claims, the pragmatist views the problem as the most
important part; hence, researchers should use all approaches to understand the problem (Creswell, 2009:10). Thus, what works is what is useful and should be used regardless of any philosophical assumptions, or any other type of assumptions (Johnson and Turner, 2003).

Johnson and Onwuegbuzie (2004: 16) made the following recommendation to the usefulness of pragmatism:

We advocate consideration of the pragmatic method of the classical pragmatists (e.g. Charles Sanders Pierce, William James, and John Dewey) as a way of researchers to think about the traditional dualisms that have been debated by the purists. Taking a pragmatic and balanced or pluralistic position will help improve communication among researchers from different paradigms as they attempt to advance knowledge. Pragmatism also helps shed light on how research approaches can be mixed fruitfully; the bottom line is that research approaches should be mixed in ways that offer the best opportunities for answering important research questions.

The implication is in pragmatism there is no one method that can be said to be suited to a particular problem. Like the other post-positivists, early pragmatists “rejected the scientific notion that that social enquiry was able to access the truth about the real world by merely using a single scientific method” (Mertens 2010: 20). Pragmatism studies focus on knowledge as the fallibility and which requires constant revision of experience (Biesta, 2010; Dewey, 1916, 2009). Thus, pragmatic researchers employ a multitude of research designs and methodologies embedded in quantitative, qualitative, and mixed methods research depending on what the researcher judges will provide the most warranted assertability of knowledge claims, given the available data, possibilities for analysis and availability of resources (Biddle and Schafft, 2015). The pragmatic paradigm places “the research problem” as central and applies all approaches to understand the problem (Creswell, 2014). It also implies that data collection and analysis methods that provide insights into the question are selected without loyalty to any particular paradigm (Mackenzie and Knipe, 2006). The needs of the study dictated the methods the researcher employed. Pragmatists use pluralistic approaches to solicit for knowledge about the problem being investigated and this served this study well because the researcher needed to open the doors to multiple methods as well as to different forms of data collection and analysis.
The pragmatists stress on use of multiple measures: observations, interviews, document analysis, questionnaires, and focus groups, each of which may possess different types of error, but the complementation of each of the various research tools (referred to as triangulation) of data instruments across these multiple error-full sources brings validity and reliability as well as credibility to the gathered data.

For purposes of this study, the current researcher employed the pragmatic paradigm, to understand ways stakeholders are catering for ECD “A” and “B” children with special education needs in ECD centres attached to the primary schools in Chiredzi District. Thus, pragmatism, was employed because it places importance on ways in which different methods produce different understanding of the phenomena (Johnson and Onwuegbuzie, 2004; Tashakkori and Teddie, 2011), in this case, ways in which children with special education needs are being catered for in ECD settings in Chiredzi District. According to pragmatists, triangulation of research instruments enable researchers to get meaning of what is happening in reality. Pragmatists appreciate the fact that people are all biased and all of their observations are affected (theory-laden), therefore, their best hope for achieving objectivity is to triangulate across these fallible perspectives (Trochim, 2006).

### 4.3 The research approaches

The term research design refers to the structure of the research, the glue that holds all of the elements in the research project together (Trochim, 2006). The design may reflect the entire research process, from conceptualising the research problem to the literature review, research questions, methods, and conclusions. However, it also refers to the methodology of the study (e.g. data collection, and analysis) (Harwell, 2012). A research design can be qualitative, quantitative or a mixed approach, depending on the answers that the researcher wishes to provide (Creswell, 2014). According to Trochim and Land (1982: 1), quantitative researchers define the research approach as:

... the glue that holds the research project together. A design is used to structure the researcher, to show how all of the major parts of the research project-the samples of groups, measures, treatment or programs, and
methods of assignments- work together to try to address the central research question.

Below is a discussion of each of the three approaches to the study.

**4.3.1 Mixed methods research approach**

This study employed a mixed methods approach to inquiry where the researcher combines both the quantitative and qualitative approaches. The root of mixed approach is in the multi-trait, multi method approach of Campell and Fiske, (1959) as cited in Teddie and Tashakkori (2009). Mixed methods carry the philosophical assumption that believes in combining both qualitative and quantitative approaches in research (Mertens, 2010; Springer, 2010; Creswell, 2009). However, Johnson and Turner (2003) argue that the fundamental principle of mixed methods is the use of multiple kinds of data collected with different strategies and methods in ways that reflect complementary strengths and non-overlapping weaknesses. Thus, a mixed method study should provide insight, which may not have been possible when only one method (e.g. qualitative or quantitative) data are collected. To this end, Creswell and Plano (2007) in Creswell (2009) emphasise that mixed methods approach is more than simply collecting and analysing both kinds of data: it involves the use of both approaches in tandem so that the overall strength of a study is greater than either qualitative or quantitative research. The following is a fundamental definition of mixed research as provided by Johnson and Onwuegbuzie (2004: 17 – 18).

Mixed methods research is formally defined here as the class of research where the researcher mixes or combines quantitative data and qualitative research techniques, methods, approaches, concepts or language into a single study. Mixed methods also is an attempt to legitimate the use of multiple approaches in answering research questions, rather than restricting or constraining researchers’ choices (i.e., it rejects dogmatism). It is an expansive and creative form of research, not a limiting form of research. It is inclusive, pluralistic, and complementary, and it suggests that researchers take an eclectic approach to method selection and the thinking about and conduct of research.

It is clear from the above definition that mixed research, when appropriately applied it can produce important and valid results, because of its ability to borrow from both
qualitative and quantitative methods. Use of mixed methods approach is chiefly supported by the pragmatists in that they advocate for use of a variety of methods/measures and observation as a data collection method. Creswell (2014) has emphasised that mixed methods use pragmatic knowledge claims (Pragmatic Worldview), as well as sequential, concurrent, and transformative designs. In mixed methods, researchers use both open-ended and close-ended questions, including, both emerging and predetermining approaches as well as both quantitative and qualitative data and analysis (Creswell, 2014). The mixed methods approach realises that even use of these multiple measures may contain different types of error; therefore there is need for the tools to be used in such a way that they complement each other (triangulate) to get a better picture about what is happening in reality (Creswell, 2003; 2014). Despite the use of the two approaches, mixed methods realises the fallibility of each of them (qualitative and quantitative approaches), and hope by merging the two, they can serve a complimentary role for better results of the study, there-by leading to a more reliable and valid data.

The mixed method approach fitted well with this study as the main goal of the study was to get a deeper understanding of the “what” and “how” ECD children with special education needs in Chiredzi District-Zimbabwe in 20 ECD settings are catered for. As far as the researcher is concerned, one method was not able to provide deeper insights into what exactly is happening in to children with special education needs at this foundation phase of their development and education. Mixing both qualitative and quantitative methods in data collection process as well as use of multiple sources of information enabled the researcher to reach for rich and in-depth views from different data sources, giving insights into matters concerning implementation of inclusive ECD policy focussing on treatment of children with special education needs in Chiredzi District in Zimbabwe. For this study, quantitative sampling methods were cluster sampling, where the researcher made sure the selected schools represented each of the three educational administrative sectors in the district. This enabled results from the sample on how schools are catering for children with special education needs to be generalised to the whole range of ECD institutions in Chiredzi District.
Despite the amount of time required to engage in mixed methods, the current researcher spent two months in the research field, which allowed him to establish critical relations with the participants. The triangulation of instruments also complemented each other, which according to the researcher, produced credible results.

4.4 Research design

Trochim (2006) defines research design as the structure of research and the "glue" that holds all the elements in a research project together. Creswell (2014) defines a research design as a type of inquiry within a research paradigm, whose function is to give direction for the procedures in the research design. Denzin and Lincoln (2011) have aptly called research designs strategies of inquiry. Creswell (2014) talks about four research designs in mixed methods approach which are: convergent parallel mixed methods; explanatory sequential mixed methods; exploratory sequential mixed methods and transformative mixed methods. A brief explanation of each of the above research designs is provided below.

4.4.1 Sequential explanatory mixed methods designs

In a sequential explanatory mixed methods design, the qualitative data are used to enhance, complement, and in some cases follow up unexpected quantitative findings (Creswell, 2003). The researcher first conducts quantitative research, analyses the results and then builds on the results to explain them in more detail with qualitative research (Creswell, 2014). In this design, the focus is on interpreting and explaining relationships among the prevailing variables; they may or be guided by a specific theory (Harwell, 2012). The researcher collected and analysed quantitative data first, followed by the collection and analysis of qualitative data. The mixing of quantitative and qualitative data is done after the analysis stage. The researcher integrates the results after interpretation in ways that provides more weight on the quantitative nature of the study. On that, Creswell (2014), says that this kind of research design is popular in fields with a strong background in quantitative data, supports this. Thus, the project would start with quantitative research, followed by qualitative research. However, most researchers claim this design often has a challenge of identifying and further exploring the meaning of quantitative results (Harwell, 2012; Creswell, 2014).
Despite the advantages that are provided by the sequential explanatory designs, in terms of data collection, and data reporting, for quantitative and qualitative data which is relatively easy to implement, researchers often cite the amount of time and the resources needed to collect and analyse the separate data (Harwell, 2012). Hence, the researcher who faced acute resource constraints of time and funds used an alternative design, which is explained later.

4.4.2 Sequential exploratory mixed method

The sequential exploratory method research design is the reverse of the sequential exploratory mixed method (Mertens, 2010; Creswell 2014). In sequential exploratory design, the researcher first begins with a qualitative research phase and explores the views of participants, quantitative enhanced and compliment qualitative results. According to Harwell (2012), this type of research design is most useful when the researcher’s interest is to promote generalisability of the findings. The sequential exploratory may or may not be guided by the theoretical perspective. An important aspect of sequential exploratory is that pilot testing with a small number of cases, expected to provide some qualitative feedback, which follows instrument construction. This modification of the instruments then follows to ensure it gathers relevant data (Harwell, 2012). The modified instruments collect quantitative data, and the results are used to enhance, compliment, and possibly extend the pilot tested results. After this, the data is then analysed, and the information built into the second quantitative phase. The qualitative phase maybe used to build on instruments that best suit the sample under study to identify appropriate instruments to use in the follow-up quantitative phase, or to specify variables that need to go into a follow-up quantitative study. However, Creswell (2014) said the major challenge to this sequential exploratory mixed method is in focusing on the appropriate qualitative findings to use and the sample selection for both phases of research. The current researcher did not employ the any of the above designs because of the amount of time and resources they require. Specifically, the researcher chose the concurrent/convergent or parallel mixed method, explained below.
4.4.3 Concurrent/convergent triangulation or parallel mixed method design

This study employed the concurrent/convergent or the parallel design where open-ended interviews, observations, document analysis and focus group discussions for qualitative data. This complimented the use of questionnaires to gather quantitative data. According to Harwell (2012), concurrent triangulation design confirms, cross-validates, or corroborates findings from a single study. Qualitative data and quantitative data are collected concurrently, such that shortcomings of one kind of data are offset by the strengths of the other. In the same way, Onwuenbuzie and Teddie (2002) in Mertens (2010), says concurrent design converges or merges quantitative and qualitative data in order to provide a comprehensive analysis of the research problem, by integrating the information in the interpretation of the whole results (Mertens, 2010; Harwell, 2012; Creswell, 2014). The idea was to provide equal weight to both types of data in mixing qualitative and quantitative data. The current researcher analysed both qualitative and quantitative data separately and mixing only took place when he was interpreting the findings. To maintain reliability and validity of results, contradictions, or incongruent findings were crosschecked, further probed and explained (Mertens, 2010; Harwell, 2012; Creswell, 2014).

The current researcher was able to maximise the information especially given its ability to validate the findings in a fairly short but intensive period. Although there were discrepancies with regard to qualitative and quantitative data, this did not affect the reliability of the findings. Concurrent/convergent triangulation mixed designs fitted well with this study because of time limit, regardless of the fact that the researcher spent two intensive months collecting data. Furthermore, the design assisted the current researcher to provide an explanation on how children with special education needs were catered for in primary schools attaching ECD “A” and “B” classes. Triangulating data sources was important in this research for verification of the data obtained from the multiple sources across qualitative and quantitative methods. One database was able to explain the other databases, and one database could help to explore different types of questions than the other database (Creswell, 2014). The researcher found this design to benefit the results of the study, especially in discussing some grey areas such as those to do with attitudes of stakeholders.
including the poverty and socio-political experiences of the learners and their families.

The quantitative data triangulated qualitative data or vice versa. Hence, the data complimented each other during the data analysis and interpretation stages. This gave a good picture of how primary schools attaching ECD “A” and “B” classes cater for learners with special education needs in mainstream classes/school environment in Chiredzi District schools. It also uncovers the strategies and roles of stakeholders in providing support services that benefit children with special education needs. The use of mixed methods was appropriate in this study because one tool would not have been able to elicit all the necessary data (Creswell, 2013). Hence, this provided a good basis for data triangulation and added to the overall reliability and trustworthy of the research process.

4.5 Population, sample and sampling

4.5.1 Population

Mertens (2010) defines a population as the group or people or things to whom the researcher applies the results of his/her study. In human researches, Springer (2010) sees a population as the entire representative group of individuals that a study is intended to investigate. The study targeted a population of 145 ECD preschools that are attached to primary schools in Chiredzi district. The district has a total population of 12,841 registered ECD children (District Education enrolment statistics, 2014). These learners are in three major education administrative clusters: the rural council; the town board and a sugar estate company boards. These ECD centres have a total number of 100 qualified ECD teachers and a further 150 semi-qualified teachers including those not qualified (District Education records and statistics, 20/04/2014).
4.5.2 Sample and sampling

Sampling is a set of elements taken from a larger population. In the study, a sample is a subset a total research population of 145 early childhood settings attached to primary schools, as per the national ECD policy of 2004. This study was targeting only those ECD pre-school centres attached to primary schools in each of the identified geographical area in Chiredzi Education District. The researcher ensured each of the education geographical area represented the sampled 19 ECD centres attached to primary schools. The quantitative representation of the pre-schools is 16%, which is a good percentage in a mixed study, one that would also allow generalisation of the findings.

Cluster sampling ensured each educational administration was represented in the study on how children with special education needs are catered for in ECD classes attached to primary schools. Specifically, the study utilised a two-stage cluster sampling. Cluster sampling justified the representativeness of educational administrative authorities of schools for quantitative data (Creswell, 2010). To complete the sampling for quantitative data, the researcher employed random sampling to select the elements (primary schools heads in schools attaching ECD “A” and “B” classes) from each of the selected educational administrative region.

Cluster sampling fitted well in the study as it ensured that each educational administration region was represented and gave a clear picture of how pre-schools attached to primary schools are catering for ECD “A” and “B” children with special education needs, in each specific educational region. Each educational administration turned out to be distinct in terms of the demographic characteristics (socio-economic status, culture and ethnic composition and resource distribution). Naturally, these scenarios influence the way pre-school centres cater for children with special education needs. Thus, the study employed cluster sampling to understand the strategies of stakeholders in their efforts to cater for individual needs of children with special education needs.

For qualitative data, the study employed the purposive sampling strategy to select primary schools in each educational administration. The criteria that was used was
basically those schools that were accessible and also known to be having a rich reputation of enrolling children with special education needs (Creswell, 2010; 2014; Springer, 2010). Purposive sampling involves selecting subjects because of some characteristics they possess and their ability to provide rich information for the study (Creswell, 2006). For this study, purposive sampling helped the researcher to select representative schools from urban, estates and rural locations with qualified and experienced teachers that had also rich information about catering for children with special education needs. Purposeful selection of the schools is justified in this study as the researcher followed a set of criteria. For instance, the researcher was interested in primary schools that attach ECD “A” and “B” classes, with the teachers qualified to teach the classes. Purposive sampling was for schools in urban, estates and rural schools (already clustered), that had qualified and experienced teachers with more than three years’ experience in teaching the ECD “A” or “B” classes. It was felt these teachers have first-hand information on delivery of ECD programme for learners with special education needs in mainstream classes or schools.

Purposive sampling was used to select parents making the focus group discussion from three schools. These schools enrolled a sizeable number of children with special education needs. Hence, it also followed these schools had a number of parents with children with special education needs. The researcher selected between five and eight parents from each school, who took part in the focus group discussion. The researcher worked with parents who had ECD “A” and “B” children with special education needs.

The district psychological tutor and the ECD trainer assisted the researcher using information in the existing database to guide the researcher on schools that could supply information. Meanwhile school heads assisted the researcher with teachers and parents that were best at providing the necessary information in answering the questionnaire.

Quantitative data from 19 schools was provided by 19 school heads, and 34 ECD teachers (n=52). The sample for qualitative data came from ten school heads, ten ECD teachers interviewed. In addition, the researcher interviewed one ECD Trainer, one Schools’ Psychologist, one District Education Officer, and one District Education
Inspector making the District Education Team. Furthermore, the researcher interviewed three NGO representatives; two members from the Ministry of Health and Child Care, one member from the Ministry of Labour, Public Service and Social Welfare, and one from the Ministry of Local Government and Housing (MLGH) including eighteen parents who took part in focus group discussions (No=50). This put the total number of participants for the research to 102.

4.6 Data collection procedures and instruments of the study

The adoption of a mixed methods approach in this study implies that the researcher collected generated qualitative and quantitative data as explained above. The researcher used interviews, questionnaires, focus group discussions, observations, and document analysis as data collection instruments for the study. Below is a brief description of the research methods used in the study. For this study, questionnaires collected quantitative data; while open-ended interviews; focus group discussions with parents; observation and document analysis collected qualitative data. Mertens (2010) supports the use of multiple sources of data collection instruments saying they allow both triangulations of data as well as the opportunity for self-reflection.

4.6.1 The interview

According to Cohen et al. (2000), interviewing is a way of uncovering and exploring the meanings that underpin people’s lives, routines, behaviours, and feelings. The researcher used face-to-face interview, because it offers the possibility of modifying one’s line of enquiry, following up interesting responses and investigating underlying motives in a way that postal and other self-administered questionnaires cannot (Maree, 2007). The researcher used face-to-face interviews with key participants, which afforded a chance to probe the responses of participants to get clarification of some obscure points. The researcher was able to probe for some elaboration or redefining of meaning in events he felt responses on implementation of catering for children with special education needs curriculum where it appeared the answer was deviating from the purpose of study. More information was sought through personal contacts of the researcher and the participants as that enabled the researcher to read non-verbal gestures that were speaking a lot about the topic that was under investigation. That brought about the richness of the data, which the researcher was
looking for, on how ECD institutions were catering for 3 to 5-year-old children with special education needs.

Given the nature of ECD, the researcher was more interested into the roles and responsibilities of the different stakeholders’ involvement in early childhood programmes in assisting teachers to improve the way they cater for children with special education needs in mainstream classes. Specifically focus was provision of health and nutrition facilities, access to social welfare provisions, capacity-building projects for ECD teachers and parents to them to cater for children with special education needs. The instrument solicited information on teaching methods and assessment strategies used availability of teaching materials and equipment, infrastructure, support and monitoring mechanisms. In order to ensure accurate data capturing, the interviews were tape-recorded and notes were taken as back-up then transcription of data was made.

Interviews allowed the participants to provide meaningful or important information about the subject that was under discussion to him or her using his or her own words rather than being restricted to predetermined categories. Certainly, participants asked for clarification of certain statements or questions, something that could not have been possible if a questionnaire was the sole research instrument. Maree (2006) support interviews saying they provide high credibility and face validity, and make intuitive sense to lay audiences. The researcher managed to probe for more details in the way ECD children with special education needs are catered for in mainstream classes/schools to enhance growth, development, and learning.

The type of interviews used in this study was semi-structured. Semi-structured interviews enable respondents to project their own ways of defining the world (Johnson, Onwuegbuzie & Turner, 2007). It permits flexibility rather than fixity of sequence of discussions and it enables participants to raise and pursue issues and matters that might not have been included in structured questions (Denzin, 1970 & Silverman, 1993 as cited by Cohen et al., 2000). In semi-structured interviews, the researcher asked informants a set of similar questions. Mertens, (2010) agree to this indicating that semi-structured interviews are based on an interview guide that is a list of questions and topics that have to be covered. The interviewer covers each
topic by asking one or more questions and using a variety of techniques to probe and decide when the conversation on a topic has satisfied the research objectives. They further state that the interview guide, and its instructions on where and how to probe, are essential when there is more than one interviewer on a project so that people are asked roughly the same questions (Mertens, 2010).

Semi-structured interviews were appropriate in this study because the interviewer managed to modify the order and details of questions on how ECD institutions are catering for children with special education needs in mainstream classes/schools. The researcher sought views of participants on support and availability of learning material/equipment and other resources from all participants. The researcher also intended to understand the roles other ministries and non-governmental organisations were performing to cater for ECD learners with special education needs in schools and their communities. The researcher also investigated the roles and responsibilities of parents in catering for children with special education needs. School heads, ECD teachers, and the District Education Team were interviewed on continuous professional development programmes for teachers. This knowledge was important because research points that continuous professional development programmes are crucial in equipping teacher-lacking skills, so that they can improve their knowledge of the teaching skills. Concisely semi-structured interviews elicited to produce

Although interviews are an important instrument for obtaining first-hand information in research, some weaknesses were cited. Data collection depends on the willingness of the participants to be interviewed (Cohen and Manion, 2005). Seale, (2004) wrote that interviews may be affected by the personalities, moods, and interpersonal dynamics of the interviewer and the interviewee. The same authorities have written that the use of a recorder or videotape may participants as some would feel unsafe with the information that will depict the participants, they feel threatened when they are aware that their words are preserved. Actually, the researcher experienced that some participants that were not at ease with being video recorded. This was the case when they felt the topic had some political connotations. Certainly, this had some sensitive implications to the findings, so the researcher made use of the clarification technique to make participants not suspecting that there was something sinister. Each time such instances were occurring, the researcher
employed manual recordings to obtain the trust of the participants. In any case, the limitations that the researcher encountered were of a minor nature to affect the objective of the research because there was always an alternative.

Creswell (2013) also identified bias as another weakness of interviews. For instance, he noted that qualitative interviews are more subjective than quantitative interviews in that, the researcher decides which quotes or specific examples to report. The participant might respond to give an impression that what he is saying is critical to the research can also cause bias. Whenever the researcher felt that there was a possibility of falling into such a trap the researcher was quick to approach the same aspect from a different angle to cross check response. The use of interviews requires considerable skill and experience, especially when interviewees feel uncomfortable to respond to sensitive issues (Mertens, 2010). Although interviewing is time consuming, it has the potential of providing rich and highly illuminating material.

4.6.2 Semi-structured questionnaires

According to Cohen et al. (2000), a questionnaire is a document containing questions designed to solicit information appropriate for analysis. The researcher employed self-administered questionnaires in this study to obtain data from 34 participant teachers, and 18 school heads in selected schools. The information that the researcher was looking for was about capacity of implementers, teaching and assessment methods, learning materials and equipment including infrastructure, support and monitoring mechanism that is provided to schools to implement inclusive education early childhood development curriculum. The questionnaires comprised both open-ended and closed-ended questions so that contextual detail was also captured (Babbie and Mouton, 2005). The closed-ended questions are relatively easier and faster to design and complete than the open-ended ones. Open-ended questions were kept to a minimum since respondents prefer to choose from pre-determined responses than to write. In some instances, respondents had to mark the correct answer while in other cases; they had to explain to support their views.
To promote the rate of return of questionnaires and make sure that the right respondents filled the questionnaires, the researcher delivered the questionnaires in person where upon he explained the procedure of completing them to each participant before he would come to collect them within few days after allowing participants to work on the questionnaires. Questionnaires were administered to many respondents, to elicit information on how ECD institutions attached to primary schools catering for ECD “A” and “B” children with special education needs. This made it possible for the researcher to save time and finances (money), but ensuring that he was getting a higher percentage of responses (Cohen et al., 2000). A semi-structured questionnaire was completed in writing, ensuring that each participant could work at a free pace without being hurried by the researcher. This ensured more comprehensive and undiluted data. Both qualitative and quantitative data was obtained from the questionnaire. This provided the researcher with the opportunity to collect rich qualitative descriptive data, which benefitted to the types of responses obtained from those closed questions.

According to Maree (2007), questionnaires have a disadvantage which include its impersonal element and openness to abuse by the respondents who might not attach as much importance and relevance to some of the questions or decide to withhold vital information. Maree (2007) made the following observations on disadvantages of questionnaires: that some respondents may decide to withhold valuable information because they do not wish to give it for some reason. Neuman (2000) cites the limitation of the questionnaire as that of not giving the researcher an opportunity to probe. The answers were accepted as final; there was no opportunity to probe beyond the given answer, to clarify ambiguous answers, or to appraise the nonverbal behaviour of respondents (Cohen et al., 2006). In the study the researcher, encountered some of these challenges, for instance some of the respondents that had initially accepted to take part in answering the questionnaire withdrew from the study by not completing the questionnaire.

The researcher guarded against some of the weaknesses that are cited above its impersonal nature and openness to abuse by the respondents. The researcher made sure that he cultivated a good rapport with the respondents so that he gained their trust and respect. Some respondents might not attach much importance and
relevance to some of the questions because of the ‘halo effect’. These respondents would answer positively to please the researcher by saying what the researcher wants. However, for this research, the researcher explained to them before they completed the questionnaire that they needed to be impartial. Where participants failed to respond in time the researcher sent friendly reminders (Neuman, 2000). Since the researcher took two months to collect data for the research, he was continuously reminding the respondents until finally he collected enough for the research.

4.6.3 Focus group discussion

The researcher also employed focus group discussion to gather data from parents from three schools, purposively selected for this study. These schools had a number of parents that had children with special education needs. Focus groups are similar to group interviews, with the exception that focus groups do not rely on question and answer format, as is the case with group interviews, rather they rely on the interaction within the group. In this case, the researcher selected those parents who had children with special education needs. A favourable discussion environment allowed members to participate to solicit enough views on the subject of children with special education needs in ECD settings. The researcher made sure that, the views of each parent was heard and no participant dominated others. Krueger and Casey (2009: 2) point out that a focus group discussion is “a carefully planned series of discussions designed to obtain perceptions on a defined area of interest in a permissive and non-threatening environment”.

Krueger and Casey (2009) further say in a focus group discussion, the researcher has to pay attention to what participants say and should be non-judgmental. Given the above views, the researcher made sure a favourable discussion environment was created for participants to share views about how children with special education needs are being catered for in Chiredzi District ECD settings. Given that the focus group discussions were primarily made-up of parents that had children with special needs, all participants were delighted to have their perceptions known. At the end of the focus group discussion, the researcher felt each member was left feeling good about having been heard (Barbour, 2008). In this study, the researcher opted
to use focus group discussion as one of the method for this study because the study was concerned with how all stakeholders deliver their services in ECD settings where there were children with special education needs. It was necessary to have focus groups for parents because parents are at the centre of the education of their children with special education needs, and hence they would elicit valid information regarding this phenomenon.

The researcher selected parents from four purposively selected schools through the assistance of school heads since these school administrators knew the parents who could supply the most reliable answers. The school head advised the parents to meet the researcher at the school on a particular day and time. Each focus group had at least eight parents who participated in each of the four focus group discussions. The researcher conducted two focus group discussions in Estate schools, one in urban schools, and the other one in a rural school. The researcher employed cluster sampling to determine the composition of the schools while he employed purposive sampling to select the actual schools where the researcher could elicit the most accurate and reliable information, considering that the parents selected had children with special education needs enrolled in ECD settings.

Focus group discussions with parents were a crucial data-gathering method for this study. The responses provided during the discussion provided an in depth view based on informed knowledge about delivery of early childhood education for children with special needs in ECD centres. Such discussions provided a deep knowledge, which became possible to share because of the nature of the interaction interviews, which necessitate the debate and provided in-depth views worth sharing.

The group interactions during focus group discussions was productive in coming up with deep and insightful responses, which triggered the once forgotten experiences of not only children with disabilities but also those parents who are experiencing segregation because they have children with special education needs. The researcher audio recorded the various group discussions, which he then had to transcribe before the final write-up (Creswell, 2009). The data gave an insight into the delivery processes in inclusive early childhood development programmes, targeting children with special education needs. Focus was on how teachers
implement the programme; the responsibilities of the school heads and the district administrative team, including the support and monitoring procedures by stakeholders. Finally, the challenges that were encountered in implementing ECDSEN as well as suggestions on what they saw as good practices of delivery of ECDSEN curriculum to assist the children to develop were noted.

Although it is often felt that focus group discussions have the limitation of getting biased, and sometimes running out of control when some members dominate the discussions (Maree, 2007), the researcher found the method to be valuable in giving important and reliable information. The participants were continuously encouraged to contribute to the debate in a very natural manner and to maintain focus on the topic.

4.6.4 Document (s) analysis

According to Creswell (2009), during the process of research, the researcher may collect qualitative documents, such as public documents. Thus for this study, the researcher focused on written communication that sheds light on the phenomenon on how children with special education needs, are catered for in ECD programmes. Maree (2007) supports the use of document analysis as a research tool saying documents are a means of eliciting reliable written information by the researcher that could shed light on events and practices of the studied phenomenon. Maree (2007) stresses that one should considering the fact that document analysis is unobtrusive and non-reactive, hence they undoubtedly can yield a lot of creditable data about the values and policies shared by participants in their natural surroundings (Maree, 2007). The idea was to ensure that analysis of documents in this study was complementing information obtained from interviews, focus group discussions, observations, and questionnaires. Analysis of documents assisted and reinforced responses from interviews and questionnaires. Document analysis therefore, enlightened the researcher on some areas that needed clarification. In the context of this research, this included meetings held at school level with other stakeholders concerning the delivery of ECD programme for children with special education needs.
Creswell (2009) identifies two types of documents that the researcher reviewed: public records, which include minutes of meetings, government circulars, newsletters, and newspapers. Another category of document analysis also cited is private documents that include journals, diaries, or letters (Creswell, 2009: 180).

However, Cohen et al. (2000) cite other documents as useful whenever the researcher decides to use document analysis as a tool for data gathering. These include primary sources of data such as receipts. For this study, the researcher used all the above documents as he felt such documents were appropriate to offer relevant information regarding delivery of services to ECD children with special education needs in ECD settings. For this study the sources of documentary data was taken from minute books, clocking registers, receipt books, circulars including syllabi and the institutional vision, mission statement etc. (Cohen et al., 2000; Creswell, 2009, 2014).

Maree (2007) emphasises that document analysis is a very usefulness tool for its ability to give reliable information that is first-hand. In the context of this study, documents assisted the researcher to uncover meaning, develop an understanding, and discover insights of how stakeholders are exactly engaged in catering for children with special education needs. For instance, use of documents as research tools revealed what different institutions do or did to ensure that children with special education needs are fairly treated and this includes the health, nutrition, educational and their general upkeep in ECD programmes in question. For instance, documents show the values of specific groups of people such as the parents, the teachers, the local administrators, the education support team, non-governmental organisations including the government in their effort to support ECD programmes for children with special education needs. Thus, the data from documents added reliability, and validity to the results of this research.

Nonetheless, document analysis has demerits. For instance, Creswell (2009) concedes, given its social context and identity, the researcher may be tempted to select only those documents, which have the information that he/she requires. If not well considered, document analysis may lead to biased research findings. In spite of the above pitfalls, the researcher used documents as a source of data sparingly.
The researcher approached the documents with a bit of scepticism in terms of both the meanings and intention. The researcher analysed the intention of the minutes, whether they covered specific government or school issues. The researcher still believes those documents he consulted had appropriate information. To be specific the researcher looked at circulars from the government, including school minutes on meetings with other government authorities, stakeholders, and parents on children with special education needs. The current researcher also checked Individual Plans for children with special needs. The intention was to check on whether teachers were providing individual services to children with special education needs. The researcher also looked at letters to parents or organisations that show the services these stakeholders provide to children with special education needs, especially those at ECD level (e.g. assistive learning devices, payment of fees, provision of nutrition and other health services meant for children with special education needs).

4.6.5 Observation (s)

Observation is the systematic process of recording the behavioural patterns of participants, objects and occurrences without necessarily questioning or communicating with them (Nieuwenhuis, 2007). As a qualitative data gathering technique, observation enabled the researcher to gain a deeper insight and understanding on how early childhood development programmes cater for children with special education needs in Chiredzi District. Specifically, the researcher observed the interactions that were occurring between the teachers, pupil-to-pupil, and parents with those children with special education needs. The researcher also observed the adequacy and appropriateness of learning materials and equipment, especially their suitability to developing a variety of skills on children with special education needs.

Observations gathered data on whether schools in Chiredzi District have reasonable facilities that promote development of physical skills, language and social skills in the young ECD learners with special education needs. The method afforded the researcher an opportunity to collect ‘live’ and more reliable data from ‘live’ situations, especially when the learners were doing indoor and outdoor learning activities. Specifically, the researcher was more interested in how the learning materials were
offering opportunities for children’s holistic development. This method enabled the researcher to understand the context in which schools deliver inclusive ECD, specifically for children with special education needs. The method allowed the researcher to have first-hand information on exact behavioural patterns, including attitudes of stakeholders to children with special education needs in inclusive classes. The method allowed the researcher to observe those salient attitudinal issues missed by other data collection instruments questionnaires, interviews, document analysis, and focus group discussions with parents. Observations enabled the researcher to discover by himself, things that participants are not at ease to talk or write about in other situations of data gathering techniques. Thus, Cohen et al. (2000) made the same observation noting that the method allows the researcher to move beyond perception-based data, (e.g. opinions in interviews) and to access personal knowledge. In this study, the researcher was able to observe equipment at the outdoor play centre, the materials in the indoor play centres, their suitability to support children with special education needs.

Creswell (2014) supports the use of the observation method saying the method is important if one considers taking photographs in studies such as case study sites, as this gives evidence of the phenomenon. Thus, the researcher considered taking photos of the nature of equipment and materials and outdoor equipment at ECD “A” and “B” settings regarding their suitability to promote participation of children with special needs in the learning process. However, the researcher was then convinced that was not possible to have pictures of the interaction of those children and the teacher because he had not secured permission from their parents.

Leady and Ormrod (2005) note, in through the observation method the behaviour of participants is recorded as it occurs, assisting the researcher to have a full picture over the really feelings of the participant. In this way, the observer being an outsider can see phenomena in which the participants are involved which however, often taken for granted (Leedy and Ormrod, 2005; Nieuwenhuis, 2007). This enabled the researcher to have unobtrusive observations, as he took note of all the actions that were taking place, ensuring that he was getting the best for the study.
Finally, the researcher used the observation method because it gave him an insight into what actually happens in programmes for children with special education needs in ECD “A” and “B” settings. It also afforded the researcher an opportunity to observe the behaviours of participants, their relationship with young children with special needs while un-noticed and their use of learning materials. This gave him a chance to record the behaviour and practices of people, as they were engaging in their “normal” learning routines, taking note of some salient features such as gestures, shown by facial expressions. In this study, the research was very much keen to observe, take pictures of the facilities and equipment that he found in ECD classes as well as the infrastructure within the schools. Such information is useful to this kind of study because both the researcher and the readers should have an insight into how stakeholders are delivering the education of ECD children with special education needs.

The observation technique, like any other technique has its own limitations. In a study such as this, the problem of using the observation method is that individuals might be conscious of being under scrutiny especially from the researcher who in each case was a stranger. Thus, it was possible that the participants were tempted to behave in a manner that is likely to portray a different life experience in their everyday life. This is a case in point in situations where the researcher is looking at issues to do with relationship, which involves children with special education needs. In such cases, participants behave in ways that are, culturally and approved in accordance with the observer’s expectations (Springer, 2010).

Springer (2010) also notes that another limitation is that during observation, the researcher might miss other important observations because he/she may be writing about other things he/she may have noticed first. In addition, Hancok (1988) further says that in observations, the researcher may find his/her attention focusing on certain events or features that may appear interesting or relevant to the study, yet at the expense of other things. In the process, he might also miss things, which are equally important to the study. The researcher used the observation schedules to minimise these limitations, by recording information about the learning materials and equipment including the general security of the learners in the school learning environment, taking note of how they support of the needs of children with special
education needs. These observation schedules assisted the researcher to concentrate on fundamental issues of the study. Although the researcher will not interact with any participant (Springer, 2010), he used the observation schedule to check whether support systems such as rumps are in place, the water and sanitation facilities are available and accessible to children with special education needs. The data collection tool offered meaningful and rich information on the capacity of ECD institutions to cater for children with special education needs. Although Springer (2010) warns that non-participant observation have negative effects, which include the observer effects, the researcher used the data collection tool to cross check the data that had been collected through other research tools such as questionnaires and interviews.

4.7 Credibility/trustworthiness/validity and reliability

4.7.1 Validity

The process of gathering evidence to support a particular interpretation of test scores is validation (Ary, Jacobs, Razavieh and Sorensen, 2006). The concept of validity, reliability (credibility or trustworthiness) is multi-faceted. This is because there are many different types of validity and reliability in research. According to Kumar (2005), the concept of validity refers to quality and applies to any aspect of the research process. With respect to measurement procedures, it relates to whether a research instrument is measuring what it set out to measure (Dahlberg and McCaig, 2010). There are two approaches used to establish the validity of an instrument: the establishment of a logical link between the objectives of a study and the questions used in an instrument, and the use of statistical analysis to demonstrate this link (Kumar, 2005). Measuring instruments yield scores; but the important thing is the interpretation we make of the scores, which may or may not be valid. From the discussion above, it follows that validity is an important component of any study, such that if not well carried out, might affect the outcome of the results, to be valid or invalid. Cohen et al. (2000: 105) warn, “Validity is thus a requirement for both quantitative and qualitative/naturalistic research.” In qualitative data, validity which is referred to as trustworthiness/authenticity or credibility (Lincoln, Lynham, and Guba, 2011), might be addressed through the honesty, depth, richness and scope of the data achieved, the participants approached, the extent of triangulation
and the disinterestedness or objectivity of the researcher (Cohen et al, 2006; Creswell, 2014). In quantitative data, validity is a critical issue and is improved through careful sampling, appropriate instrumentation, and appropriate statistical treatment of the data (Mertens, 2010).

The researcher carefully examined the responses to his questions in order to determine whether they really meant what the researcher thought they did. Babbie and Mouton (2005) say, validity refers to the extent to which an empirical measure adequately reflects the real meaning of the concept under consideration. All of social life, including social research operates on agreements about the terms we use and the concepts they represent. Babbie and Mouton (2005) further argue that social researchers should look both to their colleagues and to their subjects as sources of agreement for most useful meanings and measurements of the concepts they study. Sometimes one source will be more useful, sometimes the other.

The researcher used multiple sources of evidence to enhance validity as well as the credibility of the findings. Specifically the researcher used interviews, observations, questionnaires, documentary analysis and focus groups. This triangulation of research instruments, aided with member checking, pilot studying of instruments and triangulation of instruments ensured validity of the data collected.

In this study, validity considered many facets such as the procedures regarding data collection as well as the outcome of the data from the standpoint of the researcher (Creswell, 2014). Issues such as the length of questionnaires, the educational and professional level of participants, who administered the instruments, as well as the time the researcher, took to administer the instruments. In this case, it took two months to administer the instruments. The researcher also considered the educational and professional level of respondents/participants who administered the research instruments. In any cases, the respondents/participants of the questionnaires were professional (qualified schoolteachers ands and heads, and other professionals from other organisations and ministries). In the cases of the parents, focus groups simplified for easy understanding, making elaborate explanations in areas where the researcher felt respondents needed some clarifications. The respondents did not to write their names on the questionnaires to
give them confidence and security to respond honestly. Moreover, interview schedules and questionnaires were pilot tested.

This did not only give them a sense of trust and security to respond honestly, but also to conform to ethical requirements of the research process. Questionnaires and interviews were pilot tested to the population frame of the sample. The advantage was to perfect the instruments so that the researcher perfected them before the actual data collection process, to be sure that the instruments were ready to gather the data they were supposed to obtain.

4.7.2 Reliability

Reliability is “essentially a synonym for consistency and replicability over time, over instruments and over groups of respondents. It is concerned with precision and accuracy” (Cohen et al., 2006:117). Kumar (2005) states that another way of ensuring accuracy is to transcribe the interviews and send them back to their respective respondents for confirmation and approval. According to him, validation of the information by a respondent is an important aspect of collecting data through unstructured interviews. It ensures accuracy of content and helps in removing ambiguities in meanings and inferences drawn by you as a researcher. Creswell (2014) says reliability is a measure of consistency over time and over similar samples; the ability to produce the same results in similar situations. In terms of reliability, the researcher was concerned with whether different participants/respondents understood the question in the same way. The research made sure the supervisor edited and corrected the instruments to ensure their reliability. The aim was to edit the language of each item so that the items were to be relevant and to cover a wide coverage of topics. The supervisor reviewed the items with respect to their readability, clarity, format, ease to understand, and adequacy to gather reasonable responses. The researcher considered the number of questions because a large number of many questions were likely to attract less enthusiasm from the participants, yet few questions were not likely to cover a wide range of information required for the study. The implication is a reliable instrument for a piece of research is likely to yield similar data from similar participants repeatedly if the same methods and instruments were used in a similar situation.
Lincoln and Guba in Maree (2010) include credibility, applicability, dependability, and confirmability as key criteria of trustworthiness. Therefore, the researcher tried to use methodological triangulation by using multiple techniques (interviews; questionnaires, document analysis and observations) to generate more than one form of data to gauge a more holistic picture of discursive practice. Engaging in multiple methods of data collection leads to trustworthiness and credibility of data collection.

In qualitative research, reliability can be regarded as a fit between what researchers record and what actually occurs in the natural setting that is being researched, that is, a degree of accuracy and comprehensiveness of coverage (Cohen et al., 2000). For the purposes of reliability, the researcher recorded the responses as they occur using a tape recorder and made a backup by noting what the participants were saying immediately during the interview with each participant. The researcher also recorded all necessary information as he was making the observations. The triangulation of the different forms of data collected added to the reliability and validity of the research process and the findings. Creswell (2014) advocates for the use of at least three different data sources to complement validity and reliability of the data collected.

In this study, the researcher made use of extended closed questions than open-ended questions in interviews. The researcher enhanced reliability by carefully piloting interview schedules and questionnaires. The supervisor and a PhD student edited the instruments in order for them to be reliable. The result of the exercise was that the researcher revisited those questions that had had some grey areas. The researcher also considered the concentration spun of students for both questionnaires and focus group discussions.

4.7.3 Member checking

Member checking is the process of going back to the participants to find out if the analysis or interpretation makes sense and reflect on their experiences (Creswell, 2006; 2014). As confirmed by Lincoln and Guba (2011) and Gibbs (2007), the process of member checking provides confidence in participants and ensures validity
and reliability of the data collected. It also clarified certain data collection issues. In as much as the researcher would have telephoned the participants, he never had problems concerning the interpretation of data he collected.

4.7.4 Pilot study

In this study, pilot testing of instruments was necessary to determine if participants understanding of questions were similar across the group answering the questions, and whether the information. As authenticated by the various studies, it is necessary to ensure that the items measure what they should measure. According to De Vaus (1991) once a questionnaire is developed, each question on the questionnaire is pilot tested before final administration, and that process is pilot testing of data collection instruments. The researcher conducted pilot study to check the validity of the questionnaires and interview guides in schools in Masvingo District. This was for convenience purposes as the researcher stays in Masvingo District. Noteworthy is the fact that the questionnaires and interview guides were pilot tested in schools and district offices in Masvingo District, before the participants in Chiredzi District schools completed them and offices. This ensured that the language in each instrument was understandable and that the categories used were not confusing to the respondents. The feedback from the pilot study respondents led to some adjustments to both the questionnaire and the interview guide. For instance, the questionnaire had some questions removed because it was felt that there were many repetitions. In the case of the interview guide, adjustments on editing of the language to make it clearer and brevity was done.

The researcher served the schools with an introductory letter from both the University of Fort Hare and Masvingo Provincial director. The researcher explained the purpose of the study to the participants. The researcher stressed the need to answer the questions honestly. On a separate paper, participants indicated the questions, which needed clarification or reframing.

The data from pilot study was analysed and some the researcher made modifications on areas where the participants indicated there was need for clarification. In this study, the issue of multiple sources of data ensued
credibility/trustworthiness/validity/reliability. In addition, a large sample of 102 participants and the pilot testing of the instruments ensured they were providing relevant data for the study. This is in line with Teddlie and Tashakkori (2009) and Creswell (2014) who advocate for the use of at least three different data sources to ensure validity/reliability/credibility/trustworthiness of data. The piloting of the questionnaires and interviews schedules rendered reliability and validity of the instruments. Finally, member checking allowed the researcher to verify and confirm the information collected from participants. The researcher made sure all information in the questionnaire and interview guides were interpreted correctly.

4.8 Data analysis

Maree (2010) says data processing and analysis implies to editing, coding, classification, and tabulation of collected data. Thus, analysis of data in mixed research projects involves the type of research strategy chosen for the procedures. It also includes summarising the data collected and presenting the results in a way that communicates meaning to the reader. As noted by Creswell (2014), in mixed methods, data analysis occur at both quantitative (descriptive, and inferential numeric analysis) and qualitative (description and thematic text or image analysis) level and sometimes between the two approaches. The researcher examined the raw data using many different interpretations in order to find linkages between the study objectives and the outcomes. However, the researcher remained open to new forms of data even during the analysis and interpretation process, as this led to new insights concerning the area of study. Teddlie and Yin (2007) emphasise that the outcome of the study should demonstrate that the analysis relied on all the necessary relevant evidence, including all rival interpretations in the analysis.

In this study, qualitative data analysis was “ongoing during collection of data” as supported by Creswell (2006; 2014), particularly for that data obtained from the interviews, document analysis, observations and focus group discussions. The researcher employed concurrent embedded model, where the researcher conducted interviews, focus groups, and document analysis (teachers, parents, and school heads) to gather qualitative data. At the same time, he also collected quantitative data through the questionnaires from ECD teachers, and school heads, to explore
the phenomenon of how learners cater for children with special education needs. For quantitative data, findings were in tables, and figures while for qualitative data, the researcher clustered common themes to uncover main issues that were arising during the course of data gathering. For this study, part of the data analysis was done in the field as this helped the researcher to come-up with new categories and underlying themes. The issues that rose from the interviews, observations and document analysis and focus group discussions were put together as findings for the study. The following principles guided qualitative data analysis as written by Maree, (2010), Creswell (2014), Springer (2010), and Mertens (2010):

i. Qualitative analysis takes place throughout the data collection process. As such, the researcher will reflect continuously on impressions, relationships and connections while collecting the data. This will assist the researcher for a search of similarities, differences, categories, themes, concepts and ideas that will form part of the continuous process.

ii. An analysis will commence with reading of all the data and then dividing the data into smaller more meaningful units, according to themes.

iii. Data units are organized into a system that is predominantly derived from the data, which implies that the analysis is inductive.

iv. The researcher will make sure that the analysis will truly reflect the participants’ perceptions.

The result of the analysis demonstrated a kind of higher-order synthesis in the form of descriptive pictures, patterns or themes, or emerging theory. This is supported by Maree (2010) who notes that qualitative data analysis is an iterative approach aimed at understanding how participants make meaning of the phenomenon under study. in this cases the general meaning that they made were centred on infrastructure, qualifications and commitment by the stakeholders.

In this study, qualitative data from the interviews, focus groups, and observations were collected using tape-recording supplemented by handwritten notes. For the handwritten notes, field editing involved completing, translating, and rewriting the handwritten notes immediately after coming back from the field to enable the researcher to have the full picture of what he was investigating. It also enabled the researcher to recall and relate to the meaning of the notes before he was overwhelmed with events. Tape-recorded data was field edited by listening to the
tapes after recording each interviewee and transcribing the information to ensure audibility and clarity of voices and try to remember everything as said. In an event where the voices were not clear enough, the researcher telephoned the respondents to ascertain the initial response. However, these were rare cases. The researcher transcribed tape-recorded data, and then stored it in three USB disks for security reasons.

The researcher triangulated both quantitative and qualitative data from research instruments. Finally, the captured data results were condensed. The quantitative data was analysed using frequency tables, percentages, pie charts, and bar graphs. The researcher coded and entered the data collected through questionnaires using the SPSS programming. The analysis took the form of univariate analysis such as frequency counts, percentages, and the calculation of appropriate indicators. It also took the form of multivariate analysis to identify relationship between variables. The collected qualitative data clustered into common themes as well as writing stories and tallying and ranking responses to uncover the main issues rising from the data. The researcher triangulated issues arising from the interviews, the questionnaires, the document analysis, and observations and focus groups before condensing them as findings for the study. This helped to cluster the data into common and meaningful groups, which was then analysed. For questionnaires, editing involved identifying errors and omissions in the raw data. This eliminated incomplete or invalid information and making corrections wherever possible to ensure data was accurate, consistent, and uniformly entered to facilitate coding.

According to Maree (2010), coding is the process of reading carefully through the researcher’s transcribed data; line-by-line, and dividing it into meaningful analytic units. When the researcher located meaningful segments, he coded them. Coding is marking the segments of data with symbols, descriptive words, or unique identifying names/letters. In this study, the researcher coded quantitative data using symbols and numerals. All question numbers and options were assigned codes and data labels. The coding process enabled the researcher to quickly retrieve and collect all the text and other data that they have associated with some thematic ideas so that the sorted bits can be examined together and different cases compared in that respect.
4.8.1 Establishing themes or categories

Maree (2010) says after the data have been coded one need to move on to the next phase of data analysis process where he/she organises or combines related codes into themes or categories. In this study, after the researcher read through the identified codes to find the themes that recur in the data, he carefully went through descriptive responses given by participants on each question across all columns to understand the meaning they communicate. This approach allowed the researcher to establish emerging themes from the data. After establishing the themes, he labelled the data and grouped it into themes. This involved some form of cutting and sorting. This was a process of selecting sections of data that are similar and putting them together in their appropriate themes.

According to Maree (2010), a simple method is to cut text out of the printed hard copy and then sort it into different category piles. Each pile represented a category and had a label with a descriptor. This is an iterative process of moving back and forth through each category of data. To do this, it means the researcher had to work meticulously to ensure that he keeps the (source of data) so that he knows where the text came from. Kumar (2005) urges researchers to continue to categorise the data until one has identified and labelled all the coded data into relevant categories. Having identified the themes, the researcher went through the transcripts of all interviews and classified the responses under different themes. After identifying responses that fall within different themes, the researcher integrated them into the text of his report.

4.8.2 Ethical considerations

Water-Adams (2006 p.45) states,

Any research, which involves other people in some way, has ethical implications. Because education is a social action, data gathering and analysis within this study inevitably impacts on the lives of other people involved in the study.

In the same way, Mouton (2001) states that ethical issues arise out of our interaction with other people, other beings such as animals and the environment, especially where there is potential for a conflict of interests. For instance, in this study there
was a potential conflict of interests because the research was looking at daily relations in the delivery of ECD programmes for children with special education needs. As is always the case, ethical choices involving a trade-off or compromise between the interests and the rights of different parties cause some conflicts. For example, while the researcher had the right to collect data through interviewing participants, this right was not at the expense of their privacy. In research studies, ethical considerations relate to morality issues as they also deal with matters of right and wrong. "What we regard as morality and ethics in day-to-day life is generally a matter of agreement among the members of a group" (Mouton, 2001: 523). The researcher did not force anyone to participate, making sure that the information each participant supplied was confidential. The researcher also guarded individual privacy as stipulated in ethical considerations involving any kind of research.

The researcher first asked permission from the Ministry of Primary and Secondary Education through their Masvingo regional offices, who directed him to seek permission from the head office. When he received that permission from the head office, the researcher came through the regional office, which gave him the letter to take to the District offices, and then to the school heads, to administer interviews, questionnaire and focus groups to participants. The researcher sought permission to administer the instruments to participants from other organisations through their relevant ministries and district offices. The starting point was submission of the introductory letter from the University of Fort Hare. Upon reading it, they granted him permission to conduct the study. As emphasised by Babbie et al. (2005), informed consent guided the researcher as an important ethical norm. Therefore, all respondents/participants voluntarily took part in the study because the researcher explained to them that they were free to withdraw if they felt they could not proceed. The information provided by participants was confidential and private. As advocated by Creswell, (2014), a set of regulations guided the researcher to govern various aspects of conduct and ethics in relation to political activities, declaration of interests and use of official information, guided the study throughout.
4.8.2.1 Informed consent

In every research discipline, it is unethical to collect information without the knowledge of participants, and their confirmed willingness (Kumar, 2005; Mertens, 2010). The researcher made sure participants were aware of the intention of the study, the type of information the researcher wanted from them, and why the information was being sought, the purpose that that information served, how participants would participate in the study, and how it directly or indirectly affected them. Hence, participants’ consent was made voluntary and without coercion of any kind (Kumar, 2005; Creswell, 2014).

In line with Kumar (2005), the researcher did not breach the principle of informed consent. First, he sought permission from the Ministry’s head office, regional office, the district office and from schools and other operational offices. After securing permission, the researcher then made appointments with all the participants concerned as shown by his sample. The researcher met these participants/respondents in person and held briefings to minimise any misrepresentations of information. The researcher furnished the respondents with full information on the aims and objectives of the study, the duration of their involvement, possible risks, benefits and methods or procedures.

The researcher asked the participants if they would want to be video recorded during the interviews. Some participants agreed to be video-recorded, but others rejected. The researcher did not take that as an offence, and instead decided to take down notes, in situations where the participants could not agree to be video recorded. In this regard, the researcher respected participants’ right to know that their involvement is voluntary and that they had the right to withdraw at any time.

4.8.2.2 Maintaining confidentiality and anonymity

Kumar (2005) and Creswell (2014) states that sharing information obtained for purposes of research with other participants or any other person other than the purpose of the research is unethical. The researcher made sure the information from participants was anonymous, because it is unethical to identify an individual participant with the response. After collecting the data, the researcher made sure its
source became unknown. The researcher changed specific details to protect identities (Flick, 2006). To maintain anonymity the researcher did not write names of respondents/participants or their schools on the questionnaires and interview guides. Finally, the researcher kept the recorded data and transcripts in a safe and secure container, allowing no one to tamper with the information.

4.8.2.3 Avoiding harm or damage to participants

According to Kumar (2005) when the researcher collects data from participants, he/she needs to examine it carefully whether his/her involvement is likely to harm participants. If it is, he/she must make sure that the risk is minimal. Minimum means that the extent of harm or discomfort to the study is less than that ordinarily encountered in daily life (Mertens, 2010). In trying to minimise the extent of harm, the researcher adhered to issues of confidentiality as discussed under the section on “right of confidentiality and anonymity”. In this study, the researcher protected anonymity of individuals by assigning numbers to returned instruments and keeping the identity of individuals confidential. Furthermore, the researcher ensured that participants were working in their own offices.

Kumar (2005 p. 214) who notes that harm includes supports the above procedure:

Not only hazardous medical experiments but also any social research that might involve such things as discomfort, anxiety, harassment, invasion of privacy, or demeaning or dehumanizing procedures

What Kumar (2005) implies is that if the information researched is likely to create anxiety or harassment, the researcher should take necessary steps to avert that even if it means discussing further with authorities. During data collection, the researcher ensured that the data is as confidential as much as possible. In an event where the participants refused to take part in the research, the researcher respected their wishes and had to select other people to replace them. However, in this study that never happened.
4.9 Summary

This chapter discussed the research paradigm and its justification, research design and methods, population and sampling procedures, data collection instruments and their design, validity and reliability, data collection and analysis, ethical considerations and limitations of the study. The adopted mixed-methods approach will enable the researcher to collect different types of data from participants. The researcher-collected data was using questionnaires, interviews, observations, document analysis, and focus groups. These tools assisted the researcher to understand how ECD stakeholders assist schools to cater for children with special needs in ECD institutions attached to primary schools. The use of triangulation of instruments helped the researcher to get rich information through interviews, observations, focus group, and document analysis to supplement data, captured through questionnaires.

Data analysis procedures consisted of frequency tables, bar charts, and themes. The researcher discussed Ethical considerations, showing their relevancy to studies of this nature. The sample used was a good representation of the population. The next chapter is focusing on actual data presentation, analysis, and interpretation.
CHAPTER FIVE

5. DATA PRESENTATION AND ANALYSIS

5.1 Introduction

This chapter focuses on data presentation and analysis. The researcher gathered data through quantitative and qualitative methodologies. In gathering quantitative data, the researcher used questionnaires which were self-administered to 19 school heads 31 early childhood development teachers either teaching in teaching ECD “A” and “B” classes.

The researcher collected qualitative data from 10 school heads and 10 ECD teachers including five members from the District Education Office. Furthermore, the researcher collected qualitative data from three non-governmental organisation participants; two participants from the Ministry of Health and Child Care; one participant from the Ministry Labour, Public Service, and Social Services and finally one participant from the Ministry of Local Government and National Housing including three focus group discussions consisting of twenty parents. The researcher gave codes to all groups of participants who took part in this study. The researcher identified participants as shown on the table below:

Table 1: Summary of participants

| TR  .......... Class teachers | 31 |
| HI .......... School heads | 19 |
| DEO..........District Education Officer | 1 |
| DI 1 – 2 .........District Inspectors | 2 |
| MoLGH.... Ministry of Local Government and Housing representative | 1 |
| DE Psych ... District Education Psychologist | 1 |
| DECDT... District Education ECD Trainer | 1 |
| MoLPS.........Ministry of Labour, Public Service and Social Services | 1 |
| MoHCC 1-2...Ministry of Health and Child Care representatives | 1 |
| NGO1-3........Non-governmental Organizations representatives | 3 |
5.2 The sequence of the study

Section “A” of this chapter presents Biographical data on locations and participants that took part in the study on catering for learners with special education needs in the early childhood development programmes, while section “B” of the chapter presents data on sector programmes that are dominant in early childhood development programmes. Finally, the third and final section of the chapter presents data on strategies stakeholders employed to enhance the capacity of teachers and schools in their efforts to work with learners with special education needs. Involvement of other stakeholders in educational programs is a crucial step that ensures effective implementation of new programmes especially those where there are minority groups of children such as young children with disabilities, those coming from minority ethnic groups, including those that have developmental delays, and those with chronic health challenges.

PART A

5.3 BIOGRAPHICAL DATA PRESENTATION AND ANALYSIS

5.3.1 Information on schools

The provision of education in Zimbabwe is a joint responsibility of the state, parents, private enterprises, non-governmental organisations, and local authorities. The 450 schools in Chiredzi District are under different local authorities: the government, the council, churches and the Company (Tongaart Hullet sugar Estate Company). The responsibility of local authorities is to provide facilities that ensure the smooth running of schools in line with government policies. The obligation of the responsible authority is to provide improved school infrastructure such as the outdoor play area and classrooms that promotes child friendly learning environments. Responsible authorities also monitor the implementation of new educational programmes as directed by the government. The implication is that local authorities work with stakeholders to improve learning conditions for all groups of learners, considering that they may be children with special education needs, who might require appropriate services. As articulated in the 2013 Zimbabwe Constitution, parents take
the responsibility of educating their children. In the case of early childhood development, the government has appreciated use of the multi-sectorial approach involving the government, the civil society, the business community, the private sector and parents. The role of the government is to monitor the implementation of the programme, and supporting every learner as stipulated in the government guidelines.

The government educational policy authorises the Ministry of Local Government and National Housing to pay per capita grants-in-aid to all registered schools and approved non-government schools. The funding is for infrastructural development, construction of classrooms, toilets, and learning materials that are supposed to accommodate the needs of diverse learners. In addition, the government has a well-documented policy, through the Ministry of Labour, Public Service, and Social Welfare to provide salaries for all qualified teachers including those teaching ECD “A” and the government pays “B” classes. However, the government does not pay salaries to para-professional teachers who are part of ECD “A” and “B” teaching staff in schools, and the responsibility of paying their (para-professional) allowances is basically on parents. This has some implications on service delivery for ECD children enrolled in schools whose parents would not avoid paying for the Para-professional teachers, especially under the current grinding economic and political experiences.

According to the Zimbabwe Constitution, the government through the Ministry of Labour, Public Service, and Social Welfare supports children with special needs’ education, health services, welfare needs and in some cases, assisting with the their placement in special schools. Regardless of the existing arrangement, the few special schools in the country charge exorbitant fees that are out of the reach of many parents. To alleviate the situation, the government declared that all mainstream schools become inclusive, allowing every child to have access to early stimulation opportunities. However, the policy has its own challenges, which include shortages of learning materials and unqualified human personnel in schools and those who should monitor the programme. In such a situation, the government declared that all schools became inclusive, allowing every child to have access to quality early stimulation opportunities.
According to the data, there were three school administrative structures, which provided data for the study. These administrative institutions were the Estate (company), the rural district council and the urban school. Table 2 below shows the location and the number of teachers and school heads from each of the administrative structures.

**Table 2: No of ECD “A” and “B” educators by location**

<table>
<thead>
<tr>
<th>Variables by location</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Estate</td>
<td>16</td>
<td>52</td>
</tr>
<tr>
<td>Rural</td>
<td>9</td>
<td>29</td>
</tr>
<tr>
<td>Urban</td>
<td>6</td>
<td>19</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Information in Table 2 shows that sixteen (52%) ECD “A” and “B” teachers that participated in the study were teaching in estate schools, nine (29%) of the teachers are teaching in rural schools while six (19%) were teaching in urban schools. It is clear from Table 2 that most participants were from estates schools.

In addition, Table 2 ten (53%) school heads were from estate schools, while six (31%) of them were from six rural schools. Finally, three (16%) of the school heads were from urban schools. It was crucial to understand the location from which participants of the study come because it gave the researcher a holistic understanding of what different schools were provisioning to children with special education needs in the majority of schools in the district of Chiredzi. Table 3 shows data on age ranges of school based respondents that took part in the research.
Table 3: Age ranges for school based ECD “A” and “B” teachers and school heads

<table>
<thead>
<tr>
<th>Age range in years</th>
<th>ECD teachers</th>
<th></th>
<th>School heads</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
<td>F</td>
<td>%</td>
</tr>
<tr>
<td>20-29</td>
<td>6</td>
<td>19</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>30-39</td>
<td>11</td>
<td>35</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>40-49</td>
<td>8</td>
<td>25</td>
<td>16</td>
<td>84</td>
</tr>
<tr>
<td>50-59</td>
<td>6</td>
<td>19</td>
<td>2</td>
<td>11</td>
</tr>
<tr>
<td>Above 60</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
<td>19</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 3 shows the age range of teachers and school heads. According to Table 3, six (19%) ECD teachers were in the age range of 20 – 29 years, eleven (35%) were within the age range of 30-39 years and eight (25%) were within the age range of 40 – 49 years. The table shows that, six (19%) teachers have the most number of years, found within 50 – 59 years. Studies on inclusive education show that teaching in inclusive classes requires highly energetic and mature teachers, with the capacity to attend to children with unique educational needs (Gootman and Gebeloff, 2009). Hence, understanding teachers’ ages was crucial to the study as the researcher was then able to determine the capacity of the ECD teachers to attend to individual needs of the learners.

On the other hand, the above table shows that the majority of teachers, sixteen (84%) of the school heads were aged between 40 – 49 years, and two (11%) school heads were aged between 50 – 59 years. Only one (5%) school head was above 60 years. The age ranges of most teachers show that they were mature and energetic to work in inclusive ECD classes. Most authorities show inclusive education teachers should have high energy levels, to attend to individual needs of learners (Gootman and Gebeloff, 2009). The ages of school heads also gave evidence of professional maturity, necessary for them to attend to the needs of teachers, parents, and learners in inclusive communities. Understanding the age ranges of school heads was important for the current study as age generally is associated with wisdom to
lead. Working in inclusive classes requires leadership and the wisdom to assist subordinates to work with learners with diverse needs.

Understanding the ages of personnel working with children with special education needs, was important to this study in that it showed that the information the researcher received was coming from informed participants that have wealth knowledge and professional experience to work with children with special education needs in inclusive schools. The general belief is that mature and experienced school personnel are better capable leaders to implement inclusive ECD programmes. Gootman and Gebeloff (2009) contend that more-experienced principals are more effective. Below is a table showing the age ranges of the District Education Team.

**Table 4: Age range of the District Education Team**

<table>
<thead>
<tr>
<th>Age range in years</th>
<th>District Edu Officer</th>
<th>District Edu Inspector</th>
<th>District ECD Trainer</th>
<th>District Edu Psychologist</th>
</tr>
</thead>
<tbody>
<tr>
<td>30-39</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>40-49</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>50-59</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Above 60</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 4 shows the age ranges of the District Education Team that participated in the research process. From Table 4, the District Education Officer, and the District Education Psychologist had the highest age ranges of between 50-59 years. The table also shows that the District Education Inspector’s age was between 40-49 years. The District Early Childhood Development Trainer had the least number of age range of between 30-39 years. Understanding the age ranges of key educational stakeholders such as the District Education Team was critical to the research process as their main task is to support and monitor implementation the ECD “A” and “B” programme in schools. The researcher wanted to know if their age ranges could be instrumental to their monitoring and support tasks of the implementation process.
The assumption is that members of the District Education Team should be knowledgeable to offer the necessary guidance to schools heads and teachers about the implementation processes of government educational programmes. The next section shows the academic qualifications of ECD School based stakeholders. The researcher requested participants to state their level of academic qualifications. Below is the table showing participants’ academic qualifications.

**Table 5: Academic qualifications of ECD teachers and school heads**

<table>
<thead>
<tr>
<th>Variables</th>
<th>ECD Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Academic qualifications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>O- level</td>
<td>21</td>
<td>68</td>
</tr>
<tr>
<td>A-level</td>
<td>10</td>
<td>32</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 5 contains the academic qualifications of ECD “A” and “B” teachers and school heads. From Table 5.5, twenty-one (68%) ECD “A” and “B” teachers had “O” level qualifications, while sixteen (84%) school heads also had “O” level qualifications. Furthermore, ten (32%) ECD teachers had “A” level academic qualifications, while three (16%) school heads also had “A” level academic qualifications. It was important to have knowledge of participants' academic qualifications, especially teachers and school heads as this shows the capacity to interpret government policies on how to implement the ECD programme. It is critical and a fact that teachers that are the street level implementers should have the capacity to interpret government circulars and the syllabus if the implementation process has to be effective. Furthermore, it is important for school heads to have a sound academic level, as they are central to the implementation process through leading and guiding teachers and communities to understand the inclusive education. Hence, their ability to read and interpret the circulars from the government puts them at a better position to advice teachers on how to be better implementers of the ECD programme. Furthermore, academically qualified teachers and school heads could be in a better position to assist learners in inclusive classes. Hence, knowing ECD teachers and school heads’ academic level, was a crucial element in the study, as this
authenticated the data that participants provided. The next table shows the professional qualifications of ECD teachers and school heads.

**Table 6: Professional qualification for ECD teachers and school heads**

<table>
<thead>
<tr>
<th>Professional Qualification</th>
<th>ECD Teachers</th>
<th></th>
<th>School heads</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Para-professional</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CE/Diploma</td>
<td>22</td>
<td>71</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>BSc/BA(PGED)</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>11</td>
</tr>
<tr>
<td>BED</td>
<td>5</td>
<td>16</td>
<td>12</td>
<td>63</td>
</tr>
<tr>
<td>MED</td>
<td>1</td>
<td>3</td>
<td>4</td>
<td>21</td>
</tr>
<tr>
<td>Special Needs Education/ Inclusive ed.</td>
<td>2</td>
<td>7</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>31</td>
<td>100</td>
<td>19</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 6 shows that there was one (5%) para-professional teacher, twenty-two (71%) ECD teachers had Certificates or Diplomas in Early Childhood Education while, there were five (16%) teachers with Bachelor of Education degrees in ECD. Furthermore, the table shows only two (7%) teachers had a special education qualification. It is clear that most ECD teachers have a good qualification of teaching in general ECD classes. The lack of special needs qualification among the teachers could have an impact on how schools cater for “A” and “B” children with special education needs in primary schools.

Furthermore, Table 6 shows that twelve (63%) school heads held a Bachelor of Education degree, while four (21%) had a Master of Education degree. The other four (29%) have Bachelors of Education degree, while one (7%) had a Master of Education degree. One (5%) school head had a qualification to cater for learners with special needs. Basing on the information schools heads are qualified to implement new ECD programmes, but however, there is a dearth of personnel with a qualification in special education needs. Since there is only one school head that possesses a qualification in special education needs, there is a possibility that this
might have some impact on delivery of services in inclusive education needs classes.

Knowing professional qualifications of school heads is important for such a study because understanding school heads’ existing skills and knowledge to implement inclusive education programmes is critical in such kind of studies. The only sure way of implementing new programmes is for school heads to have the right and most appropriate qualification. Generally, school administrators with high professional qualifications offer appropriate services that benefit enrolled students. This is because they would be in a position to understand government policies as well as to develop strategies that gain support from stakeholders.

Understanding professional qualifications of both ECD teachers and school heads was important to this study, as the researcher was hoping to elicit information from knowledgeable civil servants whose understanding of government policies was proven over the years. Appropriately, qualified school heads are associated with administrative efficiency and ability to implement effective education programmes and to offer informative decisions to subordinates. School heads with appropriate qualifications influence teachers, parents, and learners’ perceptions (school community) towards creating student friendly environments that benefit all learners (Hanushek, 2003). According to Hanushek, (2003), teacher qualification has an advantage towards improving programme quality and student outcomes particularly in inclusive settings. In the next section, the researcher requested teachers and school heads to offer information on their experiences as ECD teachers or school heads.
Table 7: Experiences of ECD teachers and school heads

<table>
<thead>
<tr>
<th>Experience in years</th>
<th>ECD teachers’ experience</th>
<th>School heads’ experience</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>0 – 4 years</td>
<td>24</td>
<td>77</td>
</tr>
<tr>
<td>5 – 9 years</td>
<td>5</td>
<td>16</td>
</tr>
<tr>
<td>10 – 14 years</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>15 – 19 years</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Over 20 years</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 7 shows experiences of ECD “A” and “B” teachers including the school heads in primary schools who took part in this study on the implementation of ECD programmes for children with special education needs. According to Table 5.7, twenty-four (77%) ECD “A” and “B” teachers had less than four years’ teaching experience as ECD “A” and “B” classes. Five (16%) had between 5 – 9 years teaching experience, while two (7%) ECD teachers had between 10 – 14 years of teaching experience. Basing on the information on the table, most of the ECD teachers had less teaching experience. Few ECD teachers with infant training programme were the most experienced teachers in the ECD section in the schools. Thus, it was necessary for schools to have school heads that have a long teaching and administration experience, to offer guidance to new teachers.

Table 7 also shows that three (16%) school heads’ administrative experience ranges from 0 – 4 years, while six (32%) school heads’ administrative experience 5 – 9 years. Furthermore, the information also shows that five (26%) school heads had administration experience between 10 – 14 years. In addition, two (10%) school heads’ administration experience was from 15 – 19 years. Finally, Table 5.6 shows that three (16%) school heads’ administration staff was over 20 years. There is no doubt that school heads had the relevant administrative experience to lead newly trained teachers to implement inclusive education programmes, at ECD “A” and “B” level. Basing on the amount of years of administrative experience, school heads have had opportunities and experiences to read issues on inclusive education.
programmes. Experience of school heads in both teaching and administration was a crucial case of study in this area as their knowledge of ECD programmes ensures that they are in a better position to guide subordinates on how to implement best educational practices for ECD children with special education needs. In the next section, the researcher requested the District Education Team to provide information on their professional qualifications. The following section shows professional qualifications of the District Education Team.

5.3.2 Professional qualifications of the District Education Team

Three members of the District Education Team are holders of the Bachelor of Education (BEd) degree. The fourth member of the District Education Team holds a Masters of Education (MEd) degree. It was important to know the District Education Teams’ level of professional qualifications because these spearhead the implementation of new programmes such as inclusive education in the district. They supervise and monitor government programmes in the district; hence, it is critical to understand their capacity to implement government programmes.

If the District Education Team is professionally qualified and experienced enough, they will offer appropriate guidance to school heads and teachers on how to put in place appropriate mechanisms to implement inclusive ECD programmes, based on their ability to interpret government policies and to develop strategies to sensitise communities on benefits of inclusive education programmes. In the next section, the researcher requested the District Education Team to provide information on their work experience. Below is what they provided concerning their work experiences.

5.3.3 Experiences of ECD District Education Team

The information from the members of the District Education Team shows that the District Education Officer and the District Education Psychologist have the highest work experience at district level in the range of 9 – 15 years. The District Education Inspector has five years of experience at District Education Offices, while the District Early Childhood Trainer has the least number of experiences of between 0 – 4 years. The experience of the District Education Team shows they are experienced and that might mean they have a wealth of experience on how to implement new
programmes such as the ECD “A” and “B” inclusive education programme. In addition, the experience of the District Education Team was also very crucial in this study, because their task is to offer professional advice to school heads, teachers and to other stakeholders such as parents, non-governmental organisations and private organisations that might be having special interest in ways of implementing an inclusive education programme that benefit all learners. The current researcher wanted to determine whether that critical department of the government, had enough experience to offer supervision and monitoring on implementation of government policies on inclusive education programmes.

The experience of the District Education Team was important to this kind of study because their role is to guide schools to implement and to monitor all educational programmes, on behalf of the government. Given that, the task of the District Education Team includes writing reports on challenges primary school heads face to implement the ECD “A” and “B” programme. Hence, it was necessary to understand their work experience and knowledge relating to the ECD “A” and “B” programme. The next section now provides the data for non-education stakeholders that participated in the study.

5.3.4 Biographical data of non-education participants that participated in the study

The researcher gathered data from stakeholders who represented four differed institutions (Education line ministries and NGOs). These stakeholders were from three government ministries namely, Ministry of Health and Child Welfare, Ministry of Labour Public Service and Social Welfare and Ministry of Local Government including three different NGOs. Overall, the researcher interviewed seven participants who represented the above said key institutions involved in catering for children with special education needs. The current researcher interviewed seven participants, two from the Ministry of Health and Child Welfare, one from the Ministry of Labour and Social Welfare and Public Service and another one from the Ministry of Local Government and National Housing. The final set of participants came from three non-governmental organisations who work directly with children with special education needs. The hope was to elicit important information about how each of the
Institutions provided assistance to schools towards improvement of ECD “A” and “B” children with special education needs. Information from participants clearly shows that, all non-education participants had more than five years’ work experience in their organisations, and they were providing various support systems to vulnerable groups of the society including young children. In addition, all the participants were professionally qualified to work with young children with special education needs, as evidenced by their professional qualifications. The researcher noted all participants were more than 40 years of age, and were senior employees in their institutions evidencing relevant organisational information and maturity to work with children with special needs.

One of the interviewees was the District Nurse in Charge whose age was 52 years with 5 – 10 years working experience in that capacity holding a Diploma in general nursing. Furthermore, he said was leading a team that monitor child immunisation programmes, nutritional needs of vulnerable children and monitoring of health standards in schools and communities. The researcher also interviewed the District Rehabilitation Technician, whose professional qualification was a Bachelor of Nursing Science. Her major task was prevention and management of all forms of disabling conditions disabilities in the district, and had working experience of between 5 – 9 years.

The researcher also interviewed the District Child Welfare Officer from the Ministry of Public Service and Social Welfare, who had a Post-Graduate Diploma in Child Sensitive Social policies. He was responsible for all child welfare programmes in Chiredzi District, and had working experience of between 0 – 4 years. From the side of the line ministries, the researcher also interviewed an Executive Officer from the Ministry of Local Government and National Housing, responsible for community services, who had a qualification of a Masters in Educational Administration. Regarding the focus of the study, he was responsible for all community services, in Chiredzi Urban district as well as inspection construction of school infrastructures.

Finally, the researcher also interviewed three officers from three non-governmental organisations that were providing services to vulnerable groups of children in Children in Chiredzi District. Of these interviewees, one was a learning coordinator,
who holds a Bachelor of Education in Educational Administration. His working experience was between 9 and 14 years. His responsibility in the district was organising teacher development workshops on syllabus interpretation and assisting schools to construct learning materials and equipment. Another participant that the researcher interviewed was the Orphans and vulnerable children coordinator, who holds a Diploma in Counselling qualification, and her working experience, was within the 15 and 19 years. The last interviewee from non-governmental organisations was a Psychosocial Counsellor, whose professional who hold a Diploma in Counselling and was involved in offering psychosocial support to schoolchildren in primary and secondary schools.

The researcher felt those participants were knowledgeable of the services that their institutions offered to learners with special needs, especially at ECD “A” and “B” level. The academic and professional qualifications showed that such participants had a lot of understanding of learners with special education needs, hence they were able to provide credible, trustworthy and reliable information on what actually happens in primary schools concerning experiences of ECD learner with special education needs. Judging from the brief description of their professional qualifications, as well as their job descriptions, the selected participants provided reliable information. It is clear that their professional qualifications equipped them with relevant knowledge understand issues related to young children with special education needs. Participants from the selected line ministries and non-governmental organisations were important because these institutions directly deal with vulnerable young children in communities. Hence, they were aware of government programmes and strategies that assist young learners with special education needs. The researcher understands that participants’ qualifications and experiences are a critical factor in interpretative studies, as these validate the information that participants elicit which is born out of knowledge of what is on the ground. The next section is presenting data on ECD Sector programs for children with special education needs.
PART B: SECTOR PROGRAMMES

5.4 ECD Sector programmes for children with special education needs

5.4.1 Health

Health concerns for young children enrolled in ECD “A” and “B” institutions are a key issue as these determine the child’s growth, development, and wellbeing. Hence, adequate and well-monitored health and nutrition provisions during the early childhood years enhance children’s growth, development, and mastery of concepts during preschool programmes. The researcher requested participants to explain if primary schools attaching ECD “A” and “B” classes had adequate health facilities for the learners as stipulated in government circulars on implementation of ECD programmes. Table 8 presents the adequacy of health facilities.

Table 8: Adequacy of health facilities in primary schools that cater for ECD “A” and “B” learners with special needs

<table>
<thead>
<tr>
<th>Adequacy of health facilities in primary schools for ECDSEN learners</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Adequate</td>
<td>14</td>
<td>45</td>
</tr>
<tr>
<td>Not adequate</td>
<td>13</td>
<td>42</td>
</tr>
<tr>
<td>We don’t have any</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

According to Table 8, fourteen (45%) teachers said health facilities for ECD learners are adequate in primary schools. Thirteen (42%) teachers said their schools did not have adequate health facilities for attached ECD classes. Furthermore, four (13%) teachers said at their schools they did not have any health facilities built specifically for ECD learners. The above responses show that in the majority of cases, primary schools attaching ECD classes do not have health facilities, which are age specific for learners. Lack of health facilities may cause acute health challenges, specifically
to the young children with special education needs, some learners may not be comfortable to utilise the existing health facilities.

In the same way, eight (42%) school heads said they had adequate health facilities for ECD learners at their schools, while seven (37%) school heads indicated that their schools did not have adequate health facilities for ECD learners at their schools. Finally, four (21%) school heads indicated they did not have health facilities meant for ECD learners at their schools. The responses for teachers and school heads were concurring as they indicated schools do not have specific health facilities for ECD learners. A follow-up to the question made through open-ended questions, meant to clarify the answers had one teachers saying:

- We do not have funds to construct health facilities specifically for ECD learners, and the learners are using the existing facilities.

In addition, a school head said:

- Parents were not willing to pay for the construction of toilets for ECD learners with special education needs.

It is clear that, lack of adequate health facilities for ECD learners were exposing young children enrolled in ECD institutions at health risk, and this might be worse for those children with special education needs, who already had fragile health conditions especially waterborne diseases. The researcher further elicited qualitative data, presented below:

HI 9: *We do not have adequate health facilities, and this is against the Ministry’s regulations on institutions that are enrolling ECD “A” and “B” learners. Now we only have one Blair toilet that has 10 squat holes for girls, instead of having three of such toilets. There are no washing facilities for children and that pause a health hazard to the learners.*

TR 6: *Sanitation facilities are not adequate and sanitizers are always in short supply. The water and toilet conditions are bad at the school and they need to improve, to safeguard the health and safety needs of ECD learners. However, we need coordinated efforts from stakeholders, as parents alone cannot do it.*
FGD3: The health facilities in the school need to improve to meet health needs of all learners. The school does not have enough water because the borehole we rely on normally dries up. We also do not have enough toilets and children queue at the toilets especially at break time. This sanitation problem is actually worrisome, as this is a cholera-manifested area; we are putting the health of learners at risk.

DEO: There are health and sanitation challenges in schools. Most schools do not have adequate toilet facilities and classrooms are small and congested, posing a health hazard. It is even worse in new resettlement satellite schools where some children are using bush toilet facilities. The donors and the local authority are no longer supporting health programmes in the schools. Parents do not have resources to resuscitate the health and sanitation programs in schools.

However, participants from the Estate schools said their schools do not have health challenges especially for ECD “A” and “B” classes.

TR 1: We are fortunate that we are an Estate school, and we have adequate toilets. The water system is accessible by all children and the learning environment is safe for every child to learn including those with special education needs. We have also fenced the ECD “A” and “B” classrooms including the outdoor play centre to ensure children’s safety.

It is clear that few schools have adequate health facilities, which address needs of children with special needs. The responses show that schools in Tongaart Hullet Estate Company had adequate health facilities for ECD. These schools do not have specific health facilities designed for learners with special education needs.

However, participants from schools with Resource Units confirmed that ECD “A” and “B” children with special needs well catered for compared to those primary school institutions that do not have resource centres. Hence, because of shortages of health facilities in schools attaching pre-school classes there is potential health risks to young children with special education needs. The responses show that parents who are supposed to fund the construction of toilets in schools do not have resources; this has created health hazards in the schools.
From observations, the researcher noted health standards in primary schools attaching ECD “A” and “B” learners does not promote children’s development, as facilities are either not adequate or are in a mockery state. Although schools with Resource Units had adequate health facilities that are responsive to the needs of children with special education needs, these facilities were few compared to the number of learners enrolled in learning institutions. In the next question, the researcher wanted to find out if primary schools had health facilities specifically for ECD children with special needs. The following is a table showing their responses.

Table 9: Health facilities supporting ECD “A” and “B” learners’ with special education needs

<table>
<thead>
<tr>
<th>Availability of facilities to supporting ECD “A” and “B” learners with special education needs</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Yes</td>
<td>8</td>
<td>26</td>
</tr>
<tr>
<td>No</td>
<td>19</td>
<td>74</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 9 shows eight (26%) teachers indicated that their schools had facilities designed specifically for children with special education needs. Meanwhile, four (21%) school heads said schools, had health facilities meant for children with special education needs. the majority of the ECD teachers nineteen (74%) and eleven (79%) teachers said schools did not have health facilities specifically for learners with special education needs. It is therefore clear that the majority of schools do not have health facilities specifically for learners with special education needs. In an effort to pursue how schools have managed to have resource units, one teacher indicated that,

- We have the privilege of resource units, and children with special needs utilise the facilities.

Schools that do not have resource units had toilets build for those learners who do not have special education needs and those were utilised by the all enrolled learners. However, the situation might have health implications to children with
disabilities, as they deserve special health treatment because of their special needs requirements. In responding to open-ended questions school heads said:

- All children use the existing health facilities in schools, whether they have special needs or not.

A few respondents said schools had enough taps and drinking water jugs, which were accessible by all ECD learners including those with special education needs. Below are responses from participants that answered interview questions:

HI 10: The school does not have any specific health programme for children with special education needs. What we have is for all ECD learners. The facilities are kept clean, and we are happy that this is benefiting also children with special needs. Those children who get sick at school go for treatment at the nearby clinic. We do not have safe water for the learners to drink, and the school toilets and classrooms do not have rumps.

HI 8: We do not have health facility for children with special needs. We have the Blair toilets, and one borehole. We provide soap in the toilets. We encourage the children to wash their hands before they eat.

TR6: We do not meet the health needs of children with special needs because we do not have adequate accommodation for our ever-growing enrolment of ECD children. Toilets are not adequate, and we do not have water sources to provide safe water for the learners. We have also not fenced the learning environment for ECD “A” and “B” and this puts children’s health in danger.

HI3: We have a Resource Unit that has a toilet, for learners with special needs Our ECD “A” and “B” centres are fenced. The school has specific toilets fitted in the Resource Unit especially for children with special education needs. Toilets have no rumps entrances. We also provide soap for children to wash hands after using the toilets, provided by NGOs.

From the responses, schools do not have health facilities for learners with special needs except for those schools that have resource units. In the next, table the researcher requested participants to indicate specifically health facilities they have for children with special needs. Specifically the researcher wanted to know how primary schools attaching ECD “A” and “B” classes where ensuring safety for those young learners.
Table 10: Availability of health facilities in schools

<table>
<thead>
<tr>
<th>Availability of health facilities in schools</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Toilets</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Fencing</td>
<td>16</td>
<td>52</td>
</tr>
<tr>
<td>Safe water</td>
<td>13</td>
<td>42</td>
</tr>
</tbody>
</table>

Table 10 shows that four (13%) of the teachers indicated that their schools have specific toilets for learners with special education needs. Meanwhile, ten (53%) school heads said their schools were fenced to provide safety for all ECD learners, saying this was a requirement from the government that schools should consider ways of providing safety to the ECD learners. Meanwhile thirteen (42%) teachers said their schools were providing safe water for ECD learners. The researcher also interviewed participants who provided qualitative data. The following were the responses on adequacy of health facilities in primary schools that promote young children’s health:

HI 6: All ECD children are using common toilets, built for the normal children. We do not have any toilet specifically for children with special education needs. The school has one water source where all children access the safe water.

HI 7: We have regular health check-ups for all ECD children and educate them on toilet routines, especially during the first days of enrolment. Sanitation facilities are poor as we sometimes do not have water to clean the toilets.

HI 9: We do not have adequate health facilities, and this is against the Ministry’s regulations on availability of health facilities. We only have one girl’s toilet instead of 3. There are no water facilities and that pose health hazards to all the children. We ask children to bring a bottle of water from their homes; again, this is not enough because the place is hot.

From the above responses, few schools in Chiredzi District were not providing adequate health programmes for ECD learners. Schools lack facilities regardless of
the existence of policies that seeking to promote good health standards in schools.

In a situation where ECD centres do not have appropriate health facilities children that suffer most are those with special education needs because of their supposedly frail health conditions. In the next section, the researcher asked respondents to show supplementary feeding programmes in primary schools to feed ECD learners. Table 11 below shows their responses:

**Table 11: Nutrition support for ECD children with special education needs**

<table>
<thead>
<tr>
<th>Availability of supplementary feeding</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Provided</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Not provided</td>
<td>27</td>
<td>87</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Information on Table 11 shows that four (13%) teachers said their schools are providing supplementary feeding to ECD “A” and “B” learners. Furthermore, twenty-seven (87%) teachers said their schools do not provide supplementary feeding to ECD “A” and “B” learners. Furthermore, four (21%) school heads concurred that their schools provided supplementary feeding to ECD “A” and “B” learners. Meanwhile, fifteen (79%) school heads reported that schools did not provide ECD “A” and “B” learners with supplementary feeding. From the above information, it is clear that few schools were providing supplementary feeding to ECD “A” and “B” learners. In their responses in open-ended questions, the majority of the respondents said:

- Schools cannot afford to budget for supplementary feeding for ECD “A” and “B” learners, as parents could not afford to budget for children’s meals.

Other teachers also indicated that

At one school, the respondent indicated that:

- The school agreed with parents and the business community to pay a certain amount of money that goes towards provision of supplementary feeding.

The majority of the schools, which account to fifteen (79%), had no organised supplementary feeding for ECD learners. It is evident that most schools do not provide any food supplementation for children with special education needs. In the
cases of young children with special needs such as those, suffering from HIV and AIDS related illnesses, they require balanced food to boost their immune. Participants indicated the poverty level of most parents in Chiredzi district did not make it possible for parents to provide decent meals for ECD learners. Below are responses from interviews that the researcher had with participants on whether schools were providing nutrition to ECD “A” and “B” learners.

HI 3: *We do not provide nutrition to ECD “A” and “B” learners. The responsible authority is not willing to provide supplementary feeding to ECD learners. We ask parents to provide food for ECD learners. However, some parents do not manage to provide for their children, may be because of household poverty, and this impact on their health. It also affects their school attendance.*

FGD 2: *We are not providing nutritional supplement to the children at school. As parents, we prepare food for our children, but it is not easy because the majority of the parents experience household hardships, and do not afford to offer extra food to children when they go to school.*

H2: *Malilangwe Conservation Trust a NGO provides porridge as food supplement to feed ECD “A” and “B” learners. They also provide supplementary feeding to children enrolled in community-based ECD“A” and “B” programmes. Parents are assisting in preparing and supervising the feeding program for all ECD children.*

HI 4: *We are providing a nutrition drink commonly known as (maheu) traditional energy drink to all ECD “A” and “B” children including those with special education needs. We also offer orange drink (mazoe). Parents pay for the supplementary feeding that children get. In addition, there are well-wishers that donate cash we use to buy the food supplements for the young learners.*

The responses show that while some schools are providing supplementary nutrition to ECD “A” and “B” learners, offered by donors, the majority of schools were not providing supplementary feeding to ECD “A” and “B” learners. Some few schools in rural areas were offering supplementary feeding. There was no uniform way of providing supplementary feeding to learners in Chiredzi District.
At one of the schools, document analysis (school register) showed that in January, the ECD enrolment was 120, but before the end of the first term, enrolment had dropped to 90. The reason for that steep drop of enrolment might be lack of school feeding schemes in schools. School heads that were in schools that were not providing supplementary feeding enrolments fluctuated and there were trails of learners dropping out of ECD “A” and “B” classes.

The data on health programmes, which the researcher accessed from the district education offices, show that the majority of primary schools attaching ECD classes were not having health facilities specifically for learners with special education needs. However, the gathered data showed that children with special needs in schools that had resource units were better off than those in schools that had no resource units. Furthermore, data on provision of supplementary feeding shows that the majority of schools are not offering supplementary feeding to ECD “A” and “B” learners, with the exception of a few. It is clear that schools did not have resources to improve the health and nutritional needs for children with special education needs. The next section focuses on how the social protection sector programme caters for the needs of children with special needs in ECD “A” and “B” programmes.

5.4.2 The social protection and welfare programmes for early childhood development learners

Social protection programmes encompass a range of social protection interventions and social safety nets (Omilola and Kaniki, 2014). As defined by Holmes and Jones (2010), social protection are important strategies implemented to reduce vulnerability of children and their families to economic, social, natural, and other shocks and stressors. It plays an important role in strengthening access to and demand for basic services and social welfare services by the poorest through childhood. Hence, it was necessary to understand how children with special needs access the safety nets.

The section focuses on whether early childhood development children with special education needs enrolled in ECD classes attached to primary schools are accessing early intervention programmes such as psychosocial support, free health programmes and free tuition facilities from government’s Department of Social
Welfare or civil society organisations. In the first question, the researcher requested respondents whether ECDSEN learners accessed social protection facilities such as Cash transfer or fees subsidies. In Figure 5.1, the researcher presents data on whether ECD “A” and “B” children with special education needs access social protection facilities.

![Figure 4: Educators’ response on whether ECD “A” and “B” SEN learners access social protection facilities](image)

Information in Figure 4 shows that 10% of the teachers agree that ECD “A” and “B” learners with special education needs access social protection facilities. Meanwhile, 90% teachers strongly disagree that young learners with special education needs are accessing social protection facilities. The message clearly shows that it is not universal that children in ECD “A” and “B” had access to social protection facilities.

In addition, 5% of school heads say ECD learners accessed social protection facilities. Meanwhile, 95% school heads disagreed that ECD “A” and “B” had access to social protection facilities. One school head said,

- The issue of social protection policy is only on paper and few learners are benefiting from government programmes directly.

It is therefore, clear that the majority of learners with special education needs are not accessing social protection facilities. The researcher requested participants to
provide qualitative responses on whether ECD “A” and “B” learners accessed social protection facilities. Below are responses to that question:

TR: 2: The Ministry of Labour, Public Service, and Social Welfare at times assists SEN children with assistive devices, such as wheel chairs, hearing aids devices, and medication facilities. However, it is rare for them to provide these assistive devices.

TR 4: On paper the Ministry of Public Service, Labour, and Social Welfare, provides learners with special needs with wheelchairs, assistive devices hearing aids. However, at this school we have never had a child with special needs who accessed these facilities.

MoLPSW: Our Ministry does not have a direct responsibility to support the educational needs of ECD learners at “A” and “B” level. We only begin to consider children with special needs when they get to grade one. The ministry only assists children at ECD level, by way of placing the severe to profound children in special schools. The problem is we do not know the exact number of children with special needs in ECD settings because we have cases where children are in unregistered pre-schools.

The government-enacted policies to support children with special education needs but few such children are benefitting from those policies. The geo-politics of the country works against the implementation of social protection programmes in most schools, since the government stopped some NGOs to work in rural communities. It is clear while policies to support the welfare and protection of learners with special education needs are in place, the government lacks commitment to support and monitor the programmes. Although most participants pointed that young children with special education needs get free immunisation, the majority of the underprivileged children, aged 3 to 5 years do not access the medication as hospitals have drug shortages while referral hospitals charge exorbitant fees.

In the next, section the researcher requested respondents to identify the types of social protection programmes provided by the government and nongovernmental organisations to address concerns for young children with special education needs.
Specifically the researcher requested respondents to show whether the government offered Unconditional Cash Transfers, BEAM, supplementary feeding and health and medication facilities to support children with special education needs. The Table 12 below shows the responses.

**Table 12: Social protection facilities supporting ECD “A” and “B” children and their families**

<table>
<thead>
<tr>
<th>Social protection programmes for ECD “A” and “B” and their families</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>%</td>
</tr>
<tr>
<td>BEAM</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Unconditional Cash Transfers</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Supplementary feeding</td>
<td>5</td>
<td>16</td>
</tr>
<tr>
<td>Health and medication</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

As indicated in Table 12, all respondents indicated that ECD “A” and “B” children do not access BEAM and Unconditional Cash Transfers. However, five (16%) teachers said vulnerable children in their schools accessed supplementary feeding. Meanwhile all thirty (100) teachers indicated that the government provided free medication, and immunisation to children at ECD level (all under five years).

Furthermore, Table 12 also shows that five (26%) school heads indicated that children in their schools were accessing supplementary feeding. In addition, teachers and school heads concurred that all ECD “A” and “B” children access medication and immunisation as part of the government’s social security scheme to reduce child mortality. Responses also show that some of the ECD “A” and “B” children got supplementary feeding from a non-governmental organisation called Malilangwe Conservation Trust. Thus, collaboration with non-governmental organisations improves the social welfare needs of children with special education needs. The researcher also sourced information from interviews on social welfare provisions accessed by ECD “A” and “B” children with special education needs. The responses in are found below:
HI 1: The government is not providing BEAM (Basic Education Assistance Module) to ECD “A” and “B” vulnerable learners, unlike with other children in the primary school sector. ECD “A” and “B” learners get social welfare support from Malilangwe Conservation Trust which provides supplementary feeding as well as health doctors to attend to terminally ill children with special education needs. Child-line networks with other special schools that like Henry Murray School for the deaf, Caporta School for the blind, Emerald Hill and many others for placement of the hard to hear and visually impaired learners. They also assist with the payment of fees for those learners.

TR 5: The government does not provide direct assistance towards the education of learners with special education needs. For instance, children in the ECD sector programme do not access BEAM. What the government offer is free medication to all children under five years. However, at times when they go to hospitals they are referred to private hospitals because government’s hospitals do not have medication. Children with disabilities attend rehabilitation programmes, at the District Hospital and are free.

The responses from participants show that in all primary schools, the government does not provide supplementary feeding and neither does it pay BEAM to subside learners’ education. However, in some cases, non-governmental organisations assist learners, paying for their school fees as well as assisting with their placement to special schools. Participants cited Malilangwe Conservation Trust as the only local non-governmental organisation that offers supplementary feeding to ECD learners. The next section looks at the provision of psychosocial support to children with special needs and their families. The researcher requested respondents on whether learners, parents, and teachers access psychosocial support. Table 13 shows the responses.

Table 13: Access to psychosocial support for learners with special needs and their families
<table>
<thead>
<tr>
<th>Are children and parents of ECDSEN children provided with psychosocial support</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Yes</td>
<td>26</td>
<td>84</td>
</tr>
<tr>
<td>No</td>
<td>5</td>
<td>16</td>
</tr>
<tr>
<td>total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

As indicated in Table 13, twenty-six (84%) early childhood development learners with special education needs and their families accessed psychosocial support. Meanwhile, five (16%) ECD teachers indicated that children with special education needs and their families accessed psychosocial support. Furthermore, fourteen (74%) school heads indicated that children with special education needs and their families accessed psychosocial support, while five (26%) school heads said children with special education needs and their families were not offered support. From the responses, the large majority of learners with special education needs and their families are accessing psychosocial support. The researcher also elicited information from interviews on whether children with special education needs accessed psychosocial support. The following are the responses to the answers.

**TR 2:** As teachers, we counsel learners with special education needs and where necessary we provide the same services to parents of those children. Non-governmental organisations such as FACT Chiredzi and Child-line provide psychosocial support and children’s rights education to children and their families.

**HI 9:** Child-on line offers psychosocial support to learners, parents, and teachers on how to accommodate children’s conditions.

From the responses above, there evidence showed that children with special education needs and their families’ accessed psychosocial support. Several participants indicated that the support mostly is from non-governmental organisations and teachers. However, not all children with special education needs accessed psychosocial support, yet this is a critical part of child protection system, which is critical to children’s holistic development.
The next section focuses on the education sector’s provision to learners with special education needs. By their nature, children with special education needs at ECD level require that teachers and stakeholders develop strategies that enable such learners to adjust and flourish to their potential. Therefore, the researcher presents intervention strategies the education sector employ to enhance children’s early stimulation and development trajectories.

5.4.3 The education sector programme for children with special needs

Pre-service teachers are expected to train to teach all groups of learners including those with special education needs. The adoption of inclusive education policies internationally, demanding for the integration of children with special needs in mainstream schools, has always been apprehensive of challenges. However, the educational paradigm shift towards inclusive education has faced many barriers especially from educational stakeholders that doubt the preparedness of educational institutions’ preparedness to accommodate children with diverse learning needs under one roof. Embracing inclusive education approaches stresses that ECD “A” and “B” teachers and institutions are compliant to the national and international frameworks calling for adaptation of content, learning methods and the school learning environments to accommodate learners with special needs. Thus, this section investigated whether ECD “A” and “B” teachers have professional skills to deliver in inclusive classes.

If the foundation phase is not well handled, young learners with special education needs will not adapt to the societal and citizenship expectations and neither will they grow and develop to their full potential. As a result, their growth, development, and early stimulation opportunities are affected. Inclusion of children with special education needs has strong implications for the preparation of both in-service and pre-service teachers. In addition, parents and communities benefit from effective implementation of inclusive education especially during the foundation phase, because that is where citizenship education begins, whose emphasis is on democracy, fairness and social justice. Inclusive education at ECD level, is a necessitates because it can also allow for early identification and assessment of
children with special needs and that could influence ECD teacher training model to equip teachers with skills to implement inclusive ECD programmes.

The issue of class ratios is critical to the outcome poor implementation of inclusive education at all level of education. However, at ECD “A” and “B” level, it is profound, because of the children’s age as well as their nature of learning which demands that teachers are more responsive to the needs of learners. Basing on the need to know the teacher-pupils ratios in existing ECD classes, the researcher requested teachers and school heads to state the current enrolments in ECD “A” and “B” classes. Table 14 shows the responses:

**Table 14: Teacher-pupil ratios in ECD “A” and “B” classes**

<table>
<thead>
<tr>
<th>Teacher/pupil ratios in ECD classes with ECDSEN learners</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>1:10</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>11:20</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>21:30</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>31:40</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>41:50</td>
<td>20</td>
<td>65</td>
</tr>
<tr>
<td>Above 50</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Information on Table 14 shows the majority of schools had very large ECD “A” and “B” teacher pupil enrolments classes. Only two (6%) teachers indicated that they were teaching classes with enrolments in the range of 11 and 20 learners. In addition, two (6%) ECD teachers indicated that they taught in classes that had enrolments in the range of 21 and 30 learners. Furthermore, two (6%) teachers indicated that they taught in classes with enrolments ranging from 31 to 40 learners. Furthermore, twenty (65%) teachers indicated that they taught classes that were between 41 and 50 learners. Finally, five (17%) teachers indicated they taught classes of over 50 learners.
Table 14 also indicate that school heads concurred with ECD teachers that classes are large to necessitate individualised instructions. For instance, only one (5%) school head indicated that his school had an ECD “A” and “B” teacher-pupil class ratio of 11:20 learners. In addition to the above, two (11%) school heads said, their ECD “A” and “B” classes, had enrolments ranging from 21 – 30 learners, while another two (11%) school heads said ECD “A” and “B” class enrolments ranged from 31 and 40 learners. The majority of the school heads, eleven (58%), indicated that class ratios in their schools ranged from 41 and 50 learners. Finally, three (15%) school heads indicated ECD “A” and “B” class ratios were over 50 learners in class. Such large class enrolment are against recommendation of inclusive education by the Ministry of Education which stipulates that the teacher pupil ratios for ECD “A” and “B” classes should be 1:20 in classes where they are no children with special education needs. The Ministry’s policy further says, in classes that have a learner with special needs, enrolments should not exceed seven, and an assistant teacher should assist the qualified teacher.

There is no doubt that in such large inclusive classes, children who were likely to lag behind in terms of development of skills and learning were those with special education needs, as these learners need more attention from teachers if their engagement in learning activities were maximised. Below are responses from participants during interviews on how large enrolments affect delivery of lessons in inclusive ECD “A” and “B” classes.

TR 4: *The philosophy of inclusive education is that class sizes should be small of not exceeding 12 learners manned by two teachers, one who must be an assistant. In our schools, we do not have all these. It is one teacher in a class of 50 learners. This is not attainable at all, especially with these young learners.*

TR 5: *If it was possible, the best method is to use individualised. However this is not possible because class sizes are too large, leaving no space in the classrooms. As teachers, we cannot assist learners who need our genuine attentions because of large class sizes. There is need to have reasonable class enrolments to make inclusive education helpful to learners with special education needs.*
In the next section, the researcher requested teachers and school heads if there were assistant teachers in inclusive education classes, given the large teacher pupil-ratios in ECD “A” and “B” classes. The table below shows the responses of ECD teachers and school heads.

**Table 15: Assistant teachers in ECD “A” and “B” classes that have children with special needs**

<table>
<thead>
<tr>
<th>Availability of Assistant Teachers in inclusive classes</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Yes</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>No</td>
<td>31</td>
<td>100</td>
</tr>
<tr>
<td>total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 15 shows teachers and school heads concurred ECD “A” and “B” classes do not have assistant teachers. Even in large classes where enrolments were over 50 learners, one teacher was manning the whole class. In responding to open-ended questions in the questionnaire, one teacher says,

- It is very difficult to offer individual help to learners with special education needs, in such large classes, because the classrooms do not have enough space to allow us to walk from one child to another.

Below are responses from interviewees on how the absence of assistant teachers affect lesson delivery in inclusive ECD “A” and “B” classes, especially on catering for learners with special needs.

HI 6: *Teachers are doing everything possible to understand the needs of children with special education needs. However, as public schools we do not have such provisions. This is in spite that ECD “B” classes are too large.*

From the above comment, it is clear that large inclusive ECD “A” and “B” classes do not have assistant teachers. This is regardless of the government circular which specifically directs schools to have an assistant teacher in classes where there are 7 learners and one is has special education needs. In the absence of assistant
teachers, most of the learning activities are haphazard, due to lack of proper supervision of activities and overcrowding in the classroom. In the next question, the researcher requested teachers and school heads to indicate whether schools had resource centres or units, meant for children with special education needs.

### Table 16: Schools with Resource Units

<table>
<thead>
<tr>
<th>Schools that have resource centres/units</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>8 26</td>
<td>4 21</td>
</tr>
<tr>
<td>No</td>
<td>23 74</td>
<td>15 79</td>
</tr>
<tr>
<td>Total</td>
<td>31 100</td>
<td>19 100</td>
</tr>
</tbody>
</table>

Information on Table 16 shows that only eight (26%) ECD teachers said they are at schools that have resource units. In addition to the above, twenty-three (74%) teachers said their schools did not have resource units, where children with special education needs would benefit from. In most schools therefore, children with special education needs learn in their mainstream classrooms throughout the year.

Furthermore, Table 16 indicates that four (21%) school heads confirmed that their schools had resource units. Meanwhile, fifteen (79%) school heads indicated their schools had no resource units. Basing on the above responses, schools with resource units are few in the whole District. Children with special needs that may require help from resource unit personnel and facilities are bound to have challenges in mainstream schools where there are no such facilities. The researcher also interviewed participants to get in-depth information on availability of resource units in the schools. Below are the responses on interviews:

**DEO:** Yes, some schools have resource centres but others do not have. Those schools have resource centres that appear to be doing well in catering for children with special education needs. The reason is that the resource centres are better equipped with learning materials used to address the learning needs of children with special needs. The majority of the schools do not have resource centres but are also
enrolling children with special needs. In these schools one finds that the teachers struggle to deliver lessons that benefit children with special education needs, who could be in the classes.

D1: In my circuit, there is only one school that has a resource unit. This means many children with special education needs in most schools that do not have resource units lack specific assistance, which might be important to solve their unique needs.

H3: We do not have a resource unit, and every Tuesday of the week, we send children to a neighbouring school, which has a resource centre so that they can also benefit. However, this is just an arrangement that we have had, but even though the time is not adequate for the learners to receive the benefits, they should.

Therefore, it is clear that ECD “A” and “B” learners in mainstream schools that do not have resource units, have adaptation challenges, as most teachers lack the skills and zeal to commit them to teaching such learners. In the next, section the researcher requested teachers to show how they use Resource Units to benefit children with special education needs in schools and in their clustering schools.

**Table 17: Relevance of resource units to assist learners**

<table>
<thead>
<tr>
<th>How schools use Resource Units to assist learners with special education needs</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>yes</td>
<td>No response</td>
</tr>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Rehabilitation activities</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Speech therapy</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Physical therapy</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Counselling services</td>
<td>4</td>
<td>13</td>
</tr>
</tbody>
</table>

Information on Table 17 shows that four (13%) ECD teachers indicated they had resource units they used for rehabilitation, speech therapy, physical therapy, and counselling. Four (21%) school heads also indicated that in their schools they have resource centres, which they used for rehabilitation, speech therapy, physiotherapy, and counselling services. The information from the table, may be revealing that only
participants in schools where there are resource units responded to the question, as most schools did not have resource centres, hence, it was not necessary to provide responses to the questions.

The researcher solicited responses from teachers through interviews. Below are the responses on how resource units benefit learners with special needs.

TR 1: Our resource unit teachers provide in service workshops to ECD “A” and “B” teachers. Resource unit teachers are also consultants to teachers that have problems in working in inclusive classes.

TR 8: The resource centre provides us with specific learning media to use to learners with special learning needs. Some of us at the school can teach sign language because of assistance from resource teachers. We are also able to do remedial teaching to children that take time to understand concepts.

HI: Teachers get assistance from the resource teachers to make teaching and learning media, which support children with special education needs. In addition, they are educated on how to use them when teaching the learners with special education needs.

It is evident that teachers, school heads, and ECD learners with special education needs benefit from schools that have resource units. However, most school do not have resource units and the situation militates against learners and teachers that require assistance. In the absence of resource units, only few learners attending at schools where such infrastructures were located benefited. The next section presents data on whether ECD “A” and “B” teachers were confident when teaching in inclusive classes. The researcher requested ECD teachers and school heads to indicate whether ECD teachers were confident to handle inclusive ECD “A” and “B” classes where there are children with special needs. Table 5.18 shows the information on whether the ECD “A” and “B” teachers were confident.
Table 18: Teachers’ confidence in operating in inclusive classes

<table>
<thead>
<tr>
<th>Are teacher confident to man inclusive classes</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>%</td>
</tr>
<tr>
<td>Yes</td>
<td>10</td>
<td>32</td>
</tr>
<tr>
<td>No</td>
<td>21</td>
<td>68</td>
</tr>
<tr>
<td>total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Information on Table 18 shows ten (32%) ECD teachers indicated that they have confidence when delivering in inclusive classes. Twenty-one (68%) ECD teachers indicated that they were not confident enough to deliver in classes where they are children with special education needs. Thus, the majority of ECD teachers who directly operated in inclusive education classes were convinced that they do not have the confidence to teach in inclusive classes. This implies the majority of learners with special needs have challenges in inclusive classes.

Also shown on Table 18 is, eight (42%) school heads indicated they were confident to teach in classes where they are learners with special education needs. Meanwhile, eleven (58%) school heads indicated that ECD “A” and “B” teachers did not have the confidence to deliver in classes where there were children with special education needs. Basing on the responses, the majority of teachers lacked confidence considering the response came from the real implementers of inclusive education programme. The researcher also elicited information on whether ECD “A” and “B” teachers had confidence through interviews. Below were responses from interviewees:

TR 6: Teachers lack the confidence. The majority of the teachers are straggling to organise learning activities in a way that benefit learners with special needs. The teachers conduct lessons as if all learners are the same, and as if they comprehend concepts in the same way.

TR 3: Teachers are not confident to cater for children with special education needs. Teachers rarely attend to some groups of learners particularly the slow learners and those who appear to be having mental challenges. Given the big class sizes,
teachers are not in the position to assist each child taking into consideration the child’s individual needs.

HI 8: The majority of the teachers are not able to cater for the needs of children with special education. Observations are that whenever these children show a sign of panic, and the majority of them hardly produce meaningfully lesson plans that show intend to assist children with diverse needs.

From the above responses, it is clear teachers were not confident to deliver in ECD “A” and “B” classes. They were many possible causes of lack of confidence among the ECD “A” and “B” teachers, which include lack of training in dealing with learners with special education needs. As indicated in earlier sections most teachers did not have training on special education needs or any qualification to teach inclusive education classes. Large classes contribute to lack of confidence among the teachers, especially when they are novices. In the next section the researcher requested respondents to indicate whether teachers possess skills to identify, teach, and monitor programmes for ECD “A” and “B” children with special needs. Below is table 19 showing the responses from respondents.

Table 19: Possession of skills to identify assesses, and to teach children with special education needs in inclusive ECD classes

<table>
<thead>
<tr>
<th>Skills for teachers to identify, assess and teach ECDSSEN learners</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>%</td>
</tr>
<tr>
<td>Identification skills</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>Assessing skills</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>Teaching skills</td>
<td>8</td>
<td>26</td>
</tr>
<tr>
<td>Total</td>
<td>12</td>
<td>39</td>
</tr>
</tbody>
</table>

As indicated in Table 19, only two (6%) teachers indicated that they had the skill to identify learners with special education needs, while other two (6%) teachers skills indicated they had the skill to assess progress of learners with special education needs. Furthermore, eight (26%) teachers indicated they had the skill to teach in
inclusive classes. It is clear ECD “A” and “B” teachers did not possess skills to work with children in inclusive classes.

In addition, Table 19 also shows that one (5%) school head indicated teachers had the skill to identify learners with special education needs, while two (11%) school heads indicated teachers had skills to assess learners with special education needs. Four (21%) school heads indicated that teachers had skills to teach classes that have learners with diverse learning needs. Both teachers and school heads indicated ECD “A” and “B” teachers lacked the core skills needed to deliver in inclusive classes. The evidence augments information on Table 5, which shows teachers lack specialised professional qualification to teach in inclusive classes. The information indicated that two teachers had special education needs, which support teaching in inclusive classes. The researcher also elicited information through interviews on whether teachers possess skills to deliver in inclusive ECD “A” and “B” classes. Below are the responses that came from respondents.

HI 2: ECD “A” and “B” teachers do not have the skills to deliver in inclusive classes, and children with special needs are not benefitting. For instance if as a head request to see the individual plan for a child known to have special education needs, I hardly get it. So how do they assess progress of the child? The ECDTIC has a special education needs qualification and she offers in-service training workshops.

ECDTIC 8: Children with special needs, especially those with mental retardation problems are not learning much as teachers are neglecting the children. Teachers do not monitor children’s involvement in learning activities to ensure there is any progress in learning. Children with special needs need more time to master learning concepts and are in most cases neglected and rushed to do work before they conceptualize. I conclude that ECD “A” and “B” teachers do not have the necessary skills to deliver in classes with children with special education needs.

DEO: School heads’ reports show that ECD “A” and “B” teachers cannot deliver effective lessons to assist learners that have diverse learning needs in inclusive classes. I have also observed that, the teachers cannot organize free flowing learning activities that benefit children with special education needs. Teachers hurry
learners to do same activities, and to complete the activities at the same time. These scenarios show that, teachers do not have skills to assess and deliver lessons in inclusive ECD ‘A’ and “B” classes.

FGD3: Teachers do not have skills to cater for young children with special education needs. For instance, teachers beat and scold some children that have special education needs, when they fail to carry out certain instructions on time because of disabilities. This is unjust, considering that children with special education needs cannot operate at the same level like the others. All teachers deployed in schools are trained to teach in regular classes, and they cannot assist these children with special education needs, which require a lot of individual assistance. In short, we do not think there is any learning for our children with special education as the teachers are not patient with them.

It is clear from the above responses that ECD “A” and “B” teachers lacked skills to cater for children with special education needs in inclusive classes. Evidence shows teachers were not able to identify specific learning needs for children. Furthermore, teachers did not offer the much-needed individual help to those children. In the next section, the researcher requested respondents the attitude of the school community towards ECD “A” and “B” children with special education needs. The figure below shows information on how school communities treated children with special needs.
According to Figure 5, 39% ECD teachers indicated that school communities treated children with special education needs positively. In addition, 48% of the ECD teachers indicated that school communities treated children with special education needs negatively. However, as shown on the fig 5, 13% of the teachers were neutral about the treatment of children with special education needs.

Furthermore, Figure 5 shows that 42% of school heads indicated that school communities provided positive treatment to children with special education needs. In addition, 53% of school heads indicated that their school communities were negative about children with special education needs. Finally, fig 5 indicated that 5% of school heads were neutral about the attitudes of school communities on children with special needs. For instance, in open-ended question, one teacher said,

- There are certain parents that do not want to have their children learn in the same class with children with special education needs.

Naturally, behaviour of such children does not promote good learning for children with special education needs in inclusive classes. The researcher also elicited information from different stakeholders through interviews. Below are participants’ responses on how school communities treated children with special education needs.
HI 4: At first, other learners are fearful of children with special need. Some won't like to share learning materials with (the disabled learners). We have also experienced some form of bullying, especially in the early days. The school’s intervention programme is very crucial in changing these negative attitudes. Teachers, act in loco-parentis; they are responsive and supportive. We have parents that are reluctant to have their children learning with children with disabilities, especially when the child has a mental impairment, and is often disruptive. Their own parents are over protective of their, causing a clash with teachers and school authority.

TR 3: Other children are friendly and positive about learning with children that have disabilities. They group share-learning materials during group work activities without hustles, which is a sign of positive behaviour from others. Teachers are non-discriminatory to the children as they act in loco-parentis. Some parents are transporting children with special education needs to and from school. This is because of the school policy that we have designed, does not allow any member of the school community to be negative of other children because of disability.

TR 4: We still have a number of students that are stigmatizing others because of their physical differences. We have children that refuse to share learning materials or sitting next to children that have disabilities. Parents have reported that they are teachers that are discriminating children with special education needs. Even here at school, teachers refuse to enrol Epileptic and Down syndrome ECD learners. This indicates the school community attitudes are not positive. However, we have not heard cases where parents that against inclusivity.

TR 9: Discrimination of children with special education needs in school is there and we are having it in different types. Other children might, be hostile while some children refuse to share learning materials with those children with special education needs, for example during role-play activities. I have also noted that, when teachers ask children to work in pairs or in groups some children would disregard doing the activities when made to work with any of those children with special education needs. This is often the case during Expressive Arts and Language Art activities.
HI 4: Teachers also prefer not to work with children who have certain disabilities. For instance, teachers say they do not want to work with children who have language and hearing impairment, as they have not gone through sign language at college. Some teachers openly scold children with special education needs; to an extent, that one wonders whether they were ever educated about the principle of individuality.

TR10: There are cases of children that abuse children with special needs. Such forms of abuse cause children to withdraw from school. ECD teachers look down upon those children with special needs, openly discriminating them. For example during Expressive Arts activities, teachers do not involve the learners. Some ECD teachers prefer to work with a certain group of children with disabilities. For instance, most teachers are said to prefer to work with the physical and visually impaired as compared to those with mental and hearing impairments.

From the responses provided by school heads and teachers, school communities segregated children with special education needs. There is need for government efforts to sensitise stakeholders to consider education as essential to the development of all children including those with diverse needs. In the next section, the researcher wanted to know whether respondents had learned topics on special education needs during their teacher training programmes. Table 20 shows the data from teachers and school heads.

Table 0-20: Are ECD “A” and “B” teachers trained to teach children with special education needs

<table>
<thead>
<tr>
<th>Are teachers trained to deliver in ECDSEN classes</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>5</td>
<td>16</td>
</tr>
<tr>
<td>No</td>
<td>26</td>
<td>84</td>
</tr>
<tr>
<td>total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 20 shows that five (16%) teachers indicated that during their teacher training their curriculum included topics on inclusive education. Meanwhile, twenty-six (84%) of ECD teachers indicated that they had not had topics on inclusive education or
special needs education. Furthermore, Table 20 indicates that three (16%) school heads indicated they had learned about inclusive education during their training days, while 16 (84%) said their they had not learned topics on inclusive education. In responding to open ended topics, one school head had this to say:

- What is making the situation on inclusive education at ECD level more challenging is that during our college days we did not learn about pre-school education.

This sentiment clearly shows that both ECD “A” and “B” teachers and school heads require in-service training, if implementation of inclusive ECD programme is to be successful. The researcher also solicited information through interviews on whether teachers had learned topics on inclusive education during their college days. The following are responses:

HI 1: During our training days, our college curriculum did not have topics on inclusive education/inclusive education. However, I think that training is very necessary, if we are to offer good services to the learners with special education needs.

TR 6: We learned topics on inclusive education. Our lecturers taught us about individual differences, and the methods to consider when teaching children with special needs. However, we did not learn much, especially on teaching practice.

TR: In our ECD department, we did not learn anything about taking care of learners with special education needs. We were not educated to work in inclusive classes. We also lacked the mentorship on teaching inclusive classes during our teaching practice. As a result, we are struggling to help the learners.

It is clear from the teachers and school heads’ responses that they lacked knowledge of inclusive education curriculum during their training period. Thus, there may be need for a dialogue between school heads (Ministry of Primary and Secondary Education) and colleges (Ministry of Science, Technology, and Higher Education) to look at ways to improve inclusive education understanding of pre-service teachers as well as those in-servicing teachers in school levels. The next section looks at adult education programmes that meant to parents and guardians on how to cater for children with special education needs. In this regard, the researcher
requested respondents how often were schools ready to share the knowledge with parents. The table below shows responses from teachers and school heads.

Table 21: Sharing knowledge between teachers and parents on how to assist for children with special education needs

<table>
<thead>
<tr>
<th></th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Sometimes</td>
<td>31</td>
<td>100</td>
</tr>
<tr>
<td>Never</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

According to information on Table 21, ECD teachers and school heads concurred that they work with parents on how to assist children with special education needs at ECD level. In responding to open-ended questions, one respondent said:

- These programmes educate parents to improve their children’s learning.

Meanwhile another respondent explained that:

- Programmes for parents educate them on the rights of their children with special education needs.

The researcher also sought responses on whether teachers and parents had programmes to share information about children with special education needs. Below are the responses:

HI 5: We have teacher parent programmes where we have selected child-protection committees, which include parents from each of the villages. The idea is to educate these on children’s rights. We educate parents how to prepare balanced diet for children that have illness (e.g., HIV and AIDS). We also share with parents on how they can assist teachers to make child sized learning materials.

TR 7: We have programmes with the school community, and we have home visits, especially at families where we know we have a child who has special education needs. We also involve parents to fund raise programmes for ECD learners. We have child-protection committees in every villages/compound, which work with the school to check on all cases of child abuse in children’s homes. This committee is
also responsible for offering counselling parents and the children with special education needs.

From the above responses, it is evident teachers and parents shared information on how to cater for children with special education needs. Teacher-parent programmes benefit learners with special education needs. Respondents also indicated that, programmes enable teachers to inform parents on how they can assist improving children’s rights. Participants also said that parents get education on best practices of catering for learners with special education needs, in the next section, the researcher wanted to know whether ECD centres attached to primary schools had adequate infrastructure to cater for ECD “A” and “B” learners with special education needs. Fig 6 below shows responses from respondents on adequacy of infrastructure in schools.

**Figure 6: Adequacy of infrastructure for ECD “A” and “B” learners**

Figure 6 shows that 45% ECD teachers indicated schools had adequate infrastructure for ECD “A” and “B” learners. Meanwhile, 55% of the ECD teachers indicated they do not have adequate infrastructure to cater for the ECD “A” and “B” learners. Furthermore, Figure 6 shows 47% of the school heads indicated they had adequate infrastructure for ECD learners in their schools, while 53% of the school heads showed they did not have adequate infrastructure for ECD “A” and “B” learners in their schools. From the statistical data, it is clear schools did not have
adequate learning infrastructure. The majority of teachers said shortages of infrastructure were stifling development and learning of the young learners, especially those children with special education needs that require to learn much involvement in whatever they are doing and use of small groups to learn independently. The researcher also solicited information from interviews, which provided the information below.

HI 6: We do not have the outdoor play centre, but we have enough indoor learning materials, for our enrolled classes. In the absence of the outdoor play centre, it is difficult to achieve holistic development of learners.

TR 5: We have sufficient indoor learning materials that suffice the learning needs of ECD learners at the school. We have a major problem on where to store the learning materials. The school does not have adequate classroom space to organize learning centres. The school has a good outdoor play centre but it does not have enough equipment that suffices the large ECD “A” and “B” enrolments.

TR 8: ECD “A” and “B” classes do not have accommodation, and are learning in community halls and churches that Tongaart Hullet Company is renting. Children do not have decent classrooms. We do not have specialized learning classrooms to accommodate children with special needs. The classrooms do not have rumps on entrances. We also do not have a functional outdoor play centre.

HI 10: The learning materials are not meeting the needs of children with special needs. The school does not have an outdoor play centre. The absence of the outdoor play centre deprives learners from developing gross motor, fine, and social skills. Our indoor learning materials are also not adequate to meet enrolled ECD “A” and “B” learners. Since our school is lacking crucial learning resources, we are not meeting the Holistic development of ECD “A” and “B” learners.

DI: Some schools have resource centres but others do not have. Those schools with resource centres are doing well to cater for children with special education needs. These resource centres are equipped with a variety of learning materials to address
the learning needs of children with special needs. The majority of schools do not have resource centres but are also enrolling children with special needs.

From the responses, it is clear that most schools do not have suitable and adequate indoor learning materials. The majority of schools did not have outdoor learning equipment, and it was detrimental to the holistic development of the learners. It was evident schools did not have infrastructure that supports children with special education needs, especially the physically challenged, as classrooms and toilets did not have rumps. Participants indicated that the visually impaired and the deaf learners did not have learning materials designed for such learners to support their learning. Given the shortages of infrastructure, children with disabilities had challenges. The next section focuses on what schools do for children in incidences where they do not have adequate infrastructure. The researcher requested respondents to show how they assist learners in the absence of adequate learning infrastructure. Figure 7 shows the responses to the question.

![Figure 7: Ways ECD teachers cope with the inadequacies of learning infrastructure](image)

According to Figure 7 above, 65% of the ECD teachers indicated that in the absence of adequate infrastructure they improvise. Meanwhile, 32% of the teachers indicated that in the absence of adequate infrastructure they work with the existing materials. Furthermore, Figure 7 shows that 65% teachers indicated they organised learners to
take turns to utilise the infrastructure, which is available. In other words, learners work in small groups, so that they can sufficiently utilise the learning materials. In addition, Figure 7 shows that 53\% of the school heads indicated that teachers improvise teaching and learning resources so that these can meet the existing class enrolments. Furthermore, 47\% of the school heads indicated that teachers work with existing teaching and learning resources. Finally, 57\% of the school heads indicated that teachers were organising learners in small groups or taking turns as that allowed learners to utilise the existing resources. In answering, open-ended questions one teacher actually, says:

- If the school does not have the means, how can teachers address the problem? The best is to use the resources that are there.

It is evident that given that the majority of the schools do not have adequate resources, teachers do not use any meaningful media to assist learners with special education needs work without any meaningful learning media to enhance children’s development and conceptualisation of concepts. The researcher also sought information from interviews, about how teachers assist learners in an event where they do not have adequate infrastructure. The following are the responses:

HI 6: *We do not have enough learning resources but we are improvising; places like the sand area, the water area for scientific learning activities. In addition, as ECD teachers we request parents to prepare certain learning materials for their kids.*

HI: 5: *We do not have enough space in the classroom but what we do is during free play learning activities, we arrange learning materials outside the classroom. This is because the classroom is small and does not have enough space for full utilization of the learning experiences. However, it takes time to move learning materials and sometimes the weather affects learning.*

TR3: *The ECD “A” and “B” classes are taking turns to use the outdoor play centre, because the equipment that is mounted there is not enough for the large groups of learners that we have. We also put children into groups and they use specific equipment in these small groups. This allows each child to have a chance to use the...*
outdoor play equipment, with teachers assessing use of the equipment by individual children.

The next section presents data on strategies that teachers adopt to deliver in inclusive early childhood development classes.
Part C

5.5 Strategies stakeholders utilize in ensuring inclusive ECD Programmes

5.5.1 Instructional strategies

Teaching strategies used by teachers allow learners to access information which are relevant to the age and diversity of learners. Choice of strategies is depended on other things which included knowledge of teachers, availability of resource materials and above all the outcome of the objectives to be achieved as set in the national goals. However, to a large extent it depends on the support services that the teacher gets from other stakeholders. With regards to the teaching of ECD “A” and “B” children with special education needs, teachers use teaching strategies that accommodate the diverse needs of the learners in the classes. At the same time other ECD stakeholders are expected to support teachers to use intervention strategies that promote teachers engagement with such learners with diverse needs, so that the children develop to their potential.

Various intervention strategies that teachers and other stakeholders employ to assist young children to grow, develop and learn have been looked at on several occasions. Thus, this section presents data that was solicited from teachers, school heads, non-governmental organisations, and other critical stakeholders on strategies they employ to implement an inclusive education early childhood development curriculum.

These areas include accommodating different learning styles of learning, the availability of learning materials and equipment for teaching children with diverse learning needs including teachers’ assessment methods. This section solicited information about strategies used by teachers in ECD “A” and “B” classes to improve development, stimulation, and acquisition of knowledge and skills of children with diverse learning needs in inclusive classes. In some ways too, the researcher sought
to find out how schools had adapted the learning environment to accommodate learners that have diverse forms of special needs.

The researcher requested participant to indicate the strategies that they use to deliver in inclusive ECD “A and “B” programmes. Figure 8 shows the responses of teachers and school heads on strategies used by teachers to cater for learners with special education needs in inclusive classes.

![Figure 8: Lesson delivery strategies in inclusive ECD “A” and “B” classes](image)

Information on Figure 8 shows that 32% of the teachers indicated that they use games as a teaching strategy in inclusive classes. In addition, 45% of the teachers further showed that they use stories to teach inclusive classes. Furthermore, 6% of the ECD teachers indicated that they put learners in small groups (collaborative learning) to deliver in ECD “A” and “B” classes. Meanwhile, 6% of the other teachers said they use individualised teaching methods. However, 100% of the teachers indicated they employ the play way method as a strategy for teaching. It is clear the majority of the teachers did not use individualised methods because *class sizes are too large*. In this regard, teachers also said use of games, storytelling had challenges, and learners wanted close guidance. In the open-ended questions that were a follow-up to the closed questions, respondents said that, they incorporated
questioning to ensure that learners understood the meaning of games and stories in each lesson.

Furthermore, Figure 8 also shows that 32% school heads indicated that teachers use games to teach inclusive ECD “A” and “B” classes, while 42% school heads indicated that teachers use storytelling to teaching in inclusive ECD “A” and “B” classes. School heads indicated that they have not witnessed teachers using small groups including individualised methods to teach inclusive classes. However, all school heads indicated that teachers use the play way methods to teach inclusive ECD classes. From the information on the table, it is evident ECD teachers seldom use differentiated teaching methods. The implication is that teachers use the one size fit all methods where they tend to address all learners at once. Typically, such methods have challenges, as they do not necessitate individual understanding of learners, a situation that does not promote grow and development of skills in learners. From open-ended questionnaire, one respondent said:

- When teachers use games and stories, the idea is to develop specific skills like language and motor skills. It is therefore important that teachers monitor the development of the needed skills during the teaching process.

The researcher also elicited information on strategies teachers employ to teach children with special education needs. The responses are as follows:

HI 8: ECD “A” and “B” teachers use the play way method, which allows them opportunity to attend to diversity. Some also use the storytelling method but because of class-sizes that are too large, they do not use these methods more often.

HI 9: Most ECD “A” and “B” teachers employ the play way method. The method is very popular with teachers in inclusive classes because it accommodates the needs of all young children, as all learners like to learn through play.

TR 1: I prefer using of the play way method as the strategy facilitates understanding of concepts by all learners, without them having hustles. However, for effective teaching of children with special education needs this method need to be combined with differentiated teaching methods where the teacher focus on the needs of each
learner or on a specific group of learners. Nevertheless, this is not possible because of the large groups of learners.

TR 3: As a teacher, I employ the play way method though they are some other progressive methods that are more useful for classes where they are children with special education needs. The use of games and songs and other progressive methods of teaching are most suited to teach children with special education needs but I rarely use them because classes are too large.

From the above responses, environmental factors affect instructional strategies in inclusive classes. However, teachers employ instructional strategies that improve the way they cater for children with special needs in ECD settings. The next table looks whether ECD teachers employ collaborative learning methods in inclusive ECD “A” and “B” classes to develop skills in the young learners. The researcher wished to know whether ECD “A” and “B” teachers use collaborative learning methods to improve skills for children with special education needs. The responses are in Table 22 below:

**Table 21: Whether ECD teachers employ collaborative learning method in classes with learners with special education needs**

<table>
<thead>
<tr>
<th>Whether ECD “A” and “B” teachers employ collaborative teaching</th>
<th>teacher</th>
<th>School head</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Yes</td>
<td>20</td>
<td>65</td>
</tr>
<tr>
<td>No</td>
<td>11</td>
<td>35</td>
</tr>
</tbody>
</table>

Information on Table 22 shows that twenty (65%) teachers indicated that they are employing collaborative learning to improve learners’ participation in learning activities. Meanwhile, eleven (35%) teachers indicated they did not engage learners in collaborative learning activities.

Furthermore, Table 22 also shows that ten (53%) school heads indicated that they engaged collaborative learning methods to teaching in ECD classes. Nine (47%) school heads showed that ECD teachers did not employ collaborative learning as a
strategy to teach in inclusive classes. Teachers who did not engage learners in collaborative learning activities noted that,

- It is not easy to engage large classes in collaborative learning activities, because one has to monitor the outcome of what they do. Teachers divided learners into very small groups where they could work in pairs to develop the needed skills.

The researcher also elicited information from the interviewees on whether teachers were employing collaborative teaching in ECD “A” and “B” classes. The following is what they said:

TR 2: Teachers do not use collaborative methods. The classes are large leaving no adequate space to organise children in small groups where they can work on a particular project. I however, sometimes take them outside the classroom, just to ensure they work in small, but manageable groups.

TR: I sometimes employ collaborative learning, especially when I take my children outside the classroom where I ensure they are sub-grouped in small groups or are working in pairs. I therefore monitor closely to ensure they develop the skills. However, it is challenging because with young learners, one has to support them, giving them clear guidelines on how to find the solutions. Sometimes, when I am employing the strategy I team up with other teachers, to assist in organising the learners and the media to they will be using.

From the responses, it is clear teachers did not employ collaborative teaching method, as a teaching strategy more often, except in situations where they had to take learners outside where there is space. The next section looks at the advantages of collaborative learning as found from respondents. The researcher asked respondents to identify benefits of collaborative learning to teaching ECD children with special education needs.
Figure 9: Treatment of ECD “A” and “B” SEN learners by school communities

How collaborative learning assists children with special education needs

Figure 9 shows 100% of ECD “A” and “B” teachers agree collaborative learning improves socialisation skills to learners. Meanwhile, 39% indicated that they agree that collaborative improves children’s interpersonal skills. They noted that through collaborative learning, children learn to “relate to each other”. Furthermore, twelve (39%) teachers added that collaborative learning methods improve critical thinking skills in young learners. In addition, 65% of the teachers also noted that collaborative learning help young learners to appreciate individual differences. Meanwhile, 81% of the teachers noted that collaborative learning is important in enabling the learners to take an active role in the learning process. Finally, 58% of the teachers indicated that collaborative learning improves children’s confidence as they respond to each other’s contribution. In responding to open-ended questions, one responded said

- To ensure that learners develop the skills, we employ dialogue-teaching methods, and ensure that learners learn in small groups or in pairs.

From the responses, it is evident teachers were aware of the major advantages of collaborative learning methods, although it is the least method used because of large teacher-pupil ratios. The researcher also elicited information from the interviews, presented below.

TR 6: The benefits of collaborative learning on young children with special education needs include improving socialisation, as they interact with each other during group
activities. As a teacher, I use small groups, and I know learners respect each other when they are in small groups.

TR 7: I rarely use collaborative learning strategy although I know it improves children’s language skills, as most activities should be done in small groups. When I use the method, I create space for learners to work in small groups or to enable them to do pair work.

HI 4: I appreciate collaborative teaching in ECD classes, but our classes are too big, so when I use it, I request other teachers to assist me to organise the learners in small groups. I also request other teachers to assist me to monitor the group activities. Teachers should be on the checkout of possible conflicts especially if they are not careful of how to solve their differences.

From the responses from interviews, it is clear teachers and school heads are knowledgeable of advantages of collaborative teaching and learning methods. They also have developed strategies to employ collaborative as a teaching strategy. However, the major challenge to the application of collaborative teaching methods in ECD “A” and “B” classes is large size. The next section focuses on alternative methods that teachers use to deliver lessons in ECD “A” and “B” classes. The researcher wanted to know if they were other alternative methods that ECD “A” and “B” teachers employ in inclusive classes. Figure 9 shows the methods that ECD “A” and “B” teachers employ in their efforts to cater for the existence of ECD learners in inclusive classes.
Figure 10: Instructional strategies employed by ECD “A” and “B” teachers in inclusive classes

Information on Figure 10 shows that 81% of the teachers said they use the demonstration strategy to assist children with special education needs. Meanwhile, 61% of the teachers indicated that they also employ the drill and practice strategy to cater for children with special education needs, 90% teachers indicated that they employed the question and answer strategy to cater for learners with special education needs in ECD inclusive classes. Furthermore, Figure 10 shows that 39% of the teachers employ the discussion strategy in inclusive classes. Finally, 48% of the teachers said they employ the discovery method in inclusive classes to cater for children with different needs. As pointed in the open-ended questionnaire one teacher had this to say:

- We take children to the nature walk to allow them to observe, and have experiences on their own.

From Figure 10, it is evident that ECD “A” and “B” teachers employed several teaching strategies to cater for learners with special education needs in ECD inclusive classes. Teachers also indicated that they used a combination of the teaching methods depending on which one they feel is most appropriate.

In addition, Figure 10 also shows that 68% of school heads said ECD “A” and “B” teachers used the demonstration method. Meanwhile, 84% school heads indicated that the teachers employed the drill and practice strategy in inclusive classes. Meanwhile, 84% school heads indicated that ECD teachers employed the question
and answer-teaching tactic. In addition, 42% school heads said ECD “A” and “B” teachers employed the discussion method in inclusive classes to cater for learners with special education needs. Finally, 53% school heads indicated that ECD teachers used the discovery strategy to deliver lessons in inclusive ECD “A” and “B” classes. The information shows ECD “A” and “B” teachers employed a number of teaching strategies, although they had challenges those classes were too large class. The researcher also elicited information from interviews on ECD “A” and “B” teaching methods teachers employ in inclusive settings. The following are the responses.

HI 1: Teachers use a variety of teaching strategies to accommodate the various groups of learners in inclusive classes. The tactics depend on the skills they want to develop and the complexity of the content. The strategies they employ are; demonstration, which are accompanied by the question and answer methods. They also take children out on nature walk allowing them to discover.

TR3: Many ECD teachers prefer using the drill and practice teaching method. Other teachers’ also use the lecture method followed by the discussion with learners.

From the responses, it is evident that teachers employ strategies that enable children with special education needs to develop skills. However, teachers and school heads indicated that most teachers employ the question and answer methods, which allow the learners to think about the subject matter. The next section turns to the use of language in ECD “A” and “B” classes. The researcher wanted participants explain the instructional language ECD teachers employ, whether it was in line with the language policy.
5.5.2 Instructional language used in ECD “A” and “B” classes

Realising the use of the mother tongue in teaching and learning at the ECD “A” and “B” is critical. However, most caregivers have tended to ignore the essence of the philosophical demand of the mother tongue in teaching young learners. According to the Zimbabwe Language Policy (1987) and amendments in 2004, ECD “A” and “B” (pre-school) classes should be taught in the mother tongue, where English is taught only as a curriculum area. Under the language policy, English becomes a language of instruction from Grade 4 upwards (Mugweni and Ganga, 2010). The policy is the same as that in South Africa, where the official policy of the Department of Basic Education is that Grade R learners be taught in their first language (Department of Basic Education 1997). Although there are policies where preschool classes, which emphasise that preschool classes taught through their mother languages, teachers are accused of teaching these young learners in other languages. Thus, the use of the mother language is a contagious issue, which require attention in ECD “A” and “B” classes, especially regarding multi-lingual classes. Because of the accusations, the researcher requested participants to indicate their experiences the language used to teach ECD “A’ and “B” classes. The following are responses that participants provided.

HI 2: We have problem with ECD “A” and “B” teachers as most of them are Shona, yet the majority of learners speak Shangani. In most cases, the learners taught in Shona that they hardly understand. We try to empower teachers through teaching them Shangani, the language that many of our learners understand.

FGD 3: Our children often complain that they do not understand what the teachers say, especially during the first days of the year. This is because their teacher is Shona and they do not understand the language much. We attach local para-professional teachers to the qualified Shona teachers to assist them to learn Shangani language. We have also developed a chart with common names in our language.
FGD 1 concurred with FGD 2 saying:
*We are very pleased with what our children are able to do within a short space of time since enrolling grades ECD “A” and “B” because these young learner can recite poems in English, they can understand simple English instructions. We however, do everything possible to help teachers learn and use the language, which ECD learners would understand best. Teachers are encouraged to utilise learning materials known with the learners.*

It is evident that the issue of language is not what the Education Act of 1987 directs schools to do. Maybe it is high time that Teachers’ Colleges, train teachers from minority cultures to service young children through the language, known to learners.

The next section focuses on whether learning materials are suitable to improve the development and learning of ECD “A” and “B” learners with special education needs. Learning materials play a critical role in ensuring that children are actively involved in the learning process. Furthermore, learning materials are critical to the development of learning skills. Thus, their suitability in terms of matching children’s age texture, colour, and ability to develop the skills is critical. The researcher requested respondents to indicate if learning materials in ECD “A” and “B” were suitable to necessitate development of skills in learners. Table 5.23 shows the responses.

**Table 22: Suitability of learning materials to accommodate all learners including those with special education needs**

<table>
<thead>
<tr>
<th>Variables: suitability of learning materials</th>
<th>Teachers</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Yes</td>
<td>14</td>
<td>45</td>
</tr>
<tr>
<td>No</td>
<td>17</td>
<td>55</td>
</tr>
<tr>
<td>total</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 23 shows fourteen (45%) teachers indicated learning materials in ECD “A” and “B” centres are suitable for the development of skills for learners in inclusive settings. Meanwhile seventeen (55%) teachers indicated learning materials were not suitable
and appropriate for use by some children with special needs, who required specialised learning materials.

Furthermore, as indicated on Table 23, eight (42%) school heads indicated ECD “A” and “B” classes had suitable learning materials used by all learners, including those children with special education needs. Meanwhile, eleven (58%) schools indicated that learning materials in ECD “A” and “B” centres were not suitable for use by different groups of learners, especially some groups of learners that have special education needs. From the above information, it is evident the majority of ECD “A” and “B” centres were lacking quality and suitable learning materials to sustain skill development. The researcher also gathered information from interviews on whether ECD “A” and “B” classes had suitable learning materials that develop skills, specifically for some groups of learners. The following are some of the responses from teachers and school heads:

HI 3: *The learning materials are relevant, adequate but lack the suitability for use by some groups of children with special needs. For instance, the school does not have a functional outdoor play centre. The equipment mounted is either too high for the learners, pausing danger to the learners.*

HI 6: *Indoor learning materials are not suitable to develop the needed skills in young learners with special education needs. For instance, the young learners do not easily access the learning materials. Furthermore, learners cannot grasp some learning materials, making it very difficult for learners to benefit from the learning materials. We are modifying the learning materials to enable learners to grasp the materials. The outdoor play centre does not serve a purpose because it does not support curriculum. Learners with physical disabilities cannot use it without support from colleagues. Thus, we encourage learners to work in pairs so much that they can assist each other.*

TR 6: *The major challenge is the unavailability of learning materials. Children do not have picture books and practice books where they constantly practice and improve fine motor skills. For instance if we want them to practice the left to right skills they*
need constant practice of the skill, but if they do not have the resources these vulnerable learners are left behind. We use bond papers as practicing materials.

TR 5: The learning materials are supportive to learners in ECD “A” and “B” classes. They have the capacity to develop children’s: physical, socialisation, cognitive through direct interaction with the materials. They are accessible, child sized, and with our small teacher pupil ratios, every learner can utilise the materials that fits him/her. The problem is where to store these learning materials as there is no space for the full utilisation of the materials.

It is evident most schools do not have functional outdoor play centres, as well as suitable in door learning materials for holistic skill development. Participants indicated they have learning materials, but further noted that these lack the capacity to develop the necessary skills in learners. However, participants indicated that they modified the learning materials and improvised. In the absence of suitable indoor teaching materials, and outdoor learning equipment the researcher requested participants to explain how teachers adapted learning materials to suit use by with special education needs. It is crucial that activities and materials in ECD “A” and “B” classes are adapted to meet the needs of learners with special education needs. The researcher requested what ECD “A” and “B” teachers do to ensure that the existing materials cater for the needs of those learners with special education needs.
Figure 11 shows that 48% of the teachers indicated that they adapted teaching materials, ensuring that they are easy to grasp, especially by all children including those that might be having physical challenges. Furthermore, Figure 11 indicates that 74% of the teachers ensured that learning materials were accessible to all learners. Meanwhile, Figure 5.8 shows that 39% of the teachers indicated that they adapted learning materials to ensure they have visual clarity.

Furthermore, Figure 11 shows that 42% of the school heads indicated that teachers were adapting teaching materials to meet the needs of all learners. Meanwhile, 13 (68%) school heads indicated that teachers adapted the accessibility of learning materials, ensuring that every learner accessed them. Finally, Figure 11 showed that 47% of the school heads indicated that teachers adapted learning materials to benefit children with special education needs. The researcher also elicited information from the interviews on how teachers adapted teaching and learning materials to cater for children with special education needs, in inclusive ECD programmes. The researcher elicited information from teachers through interviews and below are responses:

HI 2: Teachers are doing everything possible to understand the needs of children with special education needs. They improve accessibility of teaching materials so
that those learners with learning difficulties can access them. Teachers encourage learners to that have problems of accessing learning materials to seek help from the teacher and from other learners.

TR 10: Teachers have adapted few learning materials so that they fit the needs of learners with special education needs. Sometimes teachers offer individual learning assistance to learners who struggle with new content and skills. However, with the problem with large classes it is not possible to ensure that learning materials are adapted to suit every learner with diverse needs.

HI 9: The teaching and learning media is colourful to lure the young learners to use them more often. This is more so with indoor learning materials, and learners are usually attracted to those learning centres where materials are brightly coloured. As a school, we are in the process of constructing an outdoor learning centre, which is child friendly.

The researcher observed that teachers adjusted learning materials to ensure it allowed ECD “A” and “B” learners to master developmentally appropriate content and skills. There was evidence that teachers were planning for some learners with learning needs. This was evident in the way teachers evaluated the learning process. The information also augmented what the researcher observed about the teaching media in ECD “A” and “B” classes, where he noted that media was organised to fulfil the different needs of learners, though it was inaccessible to most of the learners.

From the responses, it is evident schools were improving teaching and learning materials to ensure they meet the needs of learners with special education needs. In situations where ECD centres did not have equipment such as the outdoor play centre, participants indicated the facility could be in place soon. This shows efforts by the ECD “A” and “B” teachers and school administration to enhance development of learners under their dominion.

The next section focuses on class supervision of ECD “A” and “B” teachers by school heads to ensure they deliver quality services in inclusive classes to benefit
children with special education needs. The researcher requested respondents to indicate the number of times school heads supervised them as they deliver lessons.

5.5.3 Assessment procedures

5.5.3.1 Assessment of learners by school heads

Researches point out that assessment in ECD classes must clearly communicate the nature of expected learning outcomes. In inclusive classes, on-going assessment techniques ensure that the teacher keep a close eye to the learning process, so much that he can be in the position to provide personalised learning opportunities to learners with unique needs( Price, Pierson and Light, 2015). A combination of formative and summative assessment is important in ensuring that teachers appreciate the learning differences that of learners in his/her class. Furthermore, such types of assessment provided teachers with insights of tools and strategies that address those learning gaps. Below the researcher requested teachers to indicate the assessment strategies that they were employing in inclusive ECD “A” and “B” classes. Figure 12 below shows their responses.

![Pie chart showing assessment methods](image)

Figure 12: Assessment methods employed by ECD “A” and “B” teachers

According to Figure 12, 33% of the ECD teachers indicated that they used observation as an assessment tool/strategy. Meanwhile, 42% teachers indicated that they used portfolios to assess ECD “A” and “B” in inclusive classes. However, 25%
teachers showed that they used content recall to assess children with special education needs. From Figure 12, it is clear the majority of teachers used portfolios, followed by observations to assess learners in inclusive classes. The least method of assessment employed by ECD “A” and “B” teachers is content recall. The researcher also solicited information from participants that answered interviews. The following are their responses.

TR 6: *Ideally, we must use the observation assessment method because it is more informative and it gives us a holistic picture of what and how each of the children in the class learns. However, given the class sizes, it is not possible to observe what and how each learner performs and we end up resorting to content recall.*

TR 2: *We use the portfolios to assess progress of learners in these inclusive ECD programmes. This is what we consider, as learning in ECD learners is mastery of skills. Therefore, we record every work that learners produce during the learning process and in the end; the work provides feedback to parents and school authorities.*

The information above shows that assessment techniques employed mostly by teachers in inclusive ECD “A” and “B” classes were observations and portfolios. Each of these strategies was important for teachers, school administrators to and parents as they showed how learners developed new skills. One teacher who responded to open-ended questions on how the strategy assisted teachers said:

- The strategies inform teachers on ways to assist those individual problems, which might also have shown specific learning challenges as indicated through observation.

In the next section, the researcher requested ECD “A” and “B” teachers and school heads to indicate if schoolteachers used Individual Work Plans (IWP) to mark progress of children with special needs. The responses are on Table 24 below.
Information presented on Table 24 shows that only four (13%) of the teachers showed that they construct individual work plans for learners that have learning challenges. Meanwhile, twenty-seven (87%) teachers indicated that they do not design individual work plans for children that have learning challenges. Furthermore, Table 24 shows that four (21%) school heads indicated that in their schools ECD teachers used Individual work plans to support those children that have learning challenges. Meanwhile, fifteen (79%) school heads indicated that ECD teachers in use Individual Work Plans. From the data provided by teachers, the majority of the ECD “A” and “B” teachers were not using Individual Work Plans for learners with learning barriers.

This had implications on the abilities of teachers to cater for unique needs of the learners, since the majority of them would not be able to learn at the same pace with counterparts. The researcher also gathered information on whether schools design individual work plans for children with special education needs. The following were responses participants that they provided:

TR 5: Teachers do not employ Individual Work Plans for children with special education needs. We lack the skills because we do not have special needs qualifications. However, where possible we benefit from resource unit teachers, who have taught us to use cards to inform parents what and how they could assist their children. In our school, we do not have the resource unit.
HI 2: *The ECD teachers do not have Individual Work Plan for learners with learning challenges. They complain of time to plan for individual assessment of learning outcomes because of class large sizes. We however request schools with resource units to send consultancies to our teachers. At times, we request the Schools’ Psychologist to assist with information of assisting learners with special needs.*

From the information above, schools were not designing Individual Work Plans for children with special education needs. What came out is that teachers and school heads are lacking knowledge regarding how to design individual work plans or special programmes for children with education needs. The next section focusses on assessment of teachers by school heads and the school management team to ensure that teachers implement inclusive education.

### 5.5.3.2 Assessment of teachers by school heads

Assessment is an integral part of teaching and learning, and it has gained currency globally in line with policies to promote effective teaching. School management teams (school heads, deputy heads and TICs) play a crucial function to assess teachers to ensure quality services are provided to learners. It was for this reason that the researcher was interested to know the number of times school heads and their teams assess teachers. Figure 5.10 summarises the responses, by respondents on the number of times ECD “A” and “B” class teachers were assessed by the school management teams.
According to information on Figure 13, (94%) of the teachers indicated, that school heads assessed them three times per term, while 6% of the teachers indicated that school heads supervise teachers once per term. Meanwhile, 89% of the school heads indicated that school heads assess ECD “A” and “B” teachers three times each term. Furthermore, (11%) of the school heads indicated that ECD “A” and “B” teachers are supervised at least once every term. Thus, there is evidence school management teams supervised ECD “A” and “B” teachers to ensure quality schooling of children with special education needs. The researcher also elicited information from participants that responded to interviews. The following were some of the responses that they provided regarding the number of times that school heads supervised ECD teachers.

HI 2: *We assess these teachers at least three times per term made by the school deputy head and ECD teacher in charge and one by me. However, as school heads we do not have confidence on what to assess, because we have limited knowledge on inclusive education.*

HI 1: *I assess ECD “A” and “B” teachers on how they deliver in inclusive classes and later on, I discuss my findings with the teachers. However, as a new program, there is a lot to learn as the school head.*
DEI: We receive reports from school heads showing that they assess ECD “A” and “B” teachers at least twice each term.

Information from school documents show that school heads and teachers discussed after supervision about how the lesson went on and possible for improvement. The duplicates of reports, which the researcher read gave evidence to this.

It is clear that school management teams supervised teachers on a more regular basis, which may improve teachers’ ways of catering for children with special education needs. In the next section, the researcher wanted to know whether the supervision visits equipped teachers with skills to assist learners with special needs. Below Figure 5.11 shows the responses of the ECD teachers on whether they are benefiting from the supervision held by the school management team:

![Image](image.png)

**Figure 14: Evidence of effectiveness of supervision visits**

Figure 14 shows that 24% of the ECD “A” and “B” teachers indicated that they were benefiting from the feedback that the school management did after each supervision visit. On the same issue, 8% of the ECD teachers indicated that feedback was informative. Finally, 18% of the ECD teachers were neutral about the outcome of the
heads’ supervision visits. It is clear most teachers are not benefiting from supervision visits conducted by the school management team. Maybe this reflects lack of knowledge of the management team, regarding special needs education. The researcher also sought information from the interviews on whether supervision from the school management team was helpful to teachers. Below is what the participants said.

TR 4: We are not benefiting from School Management Supervision Team, because school heads do not have knowledge about inclusivity in ECD classes. As teachers, we are not benefiting from supervision visits. However, the District Education Team is supporting school heads through workshops, and hiring of resource persons.

From the above responses, it is evident that in a number of schools, ECD teachers were not benefiting from the school management teams’ supervision visits. These responses have a critical implication on the way inclusive ECD “A” and “B” was implemented in primary schools. The next section focusses on networking as a strategy, which improves collaboration of ECD stakeholders on their efforts to improve ECD “A” and “B” teacher capacity to implement inclusive education.

5.5.3.3 Networking/collaborative strategies

Networking is an effective strategy that promotes ECD policy implementation. ECD networking develops through effective sensation programmes and home visits. Networking focus on zonal/circuit and district level, targeting stakeholders wishing to improve successful ECD programmes. It is critical that networking targets national and international organisations to empower teachers, and communities so that they can support learners in inclusive ECD programmes.

Therefore, collaborative programmes that respond to the demands of holistic inclusive education at ECD level should be in place to allow involvement of role players. ECD teachers require support because they deal directly with the everyday needs of children with special education needs. However, this is only possible when there is collaboration with stakeholders, where the school moves towards progressive ecosystemic values, which promote sustainability through alliance with
the major, stakeholders which include parents, non-governmental organisations, and the government (Engelbert, Forlin, Eloff and Swart, 2015). ECD stakeholders should engage in networking to gain varying support systems through a comprehensive and coordinated way that comes through the government, the regional office, the district office to the school. It also entails that the parties involved are at equal par, working towards sustainability of inclusive education programme, sharing the responsibilities and accountabilities for improving the outcome. Given these facts, the researcher requested school heads to indicate institutions they collaborate with to promote inclusive education programmes at ECD level in the Chiredzi District. Figure 15 shows responses from school heads.

Figure 15: Collaboration with schools to promote inclusive education

Information on Figure 15 shows that 15% of school heads indicated they worked with non-governmental organisations to improve inclusive education in their schools. Furthermore, 27% of the school heads indicated that they collaborated with parents whose children are attending ECD “A” and “B”. In addition, 27% of the school heads indicated that they worked with line ministries on cases of children with special
education needs. In addition, 4% of the school heads indicated they worked with church organisations to help them cater for children with special education needs. Finally, 27% of the school heads noted that their schools were working with international agencies to cater for ECD “A” and “B” children with special education needs. The information shows schools collaborated with other institutions to ensure they improve the way they cater for children with special education needs. Below is qualitative data from participants:

HI 6: We inform parents about what learners with special education needs learn and how they learn. We engage them in meetings on children’s rights. We also work with the ministries of Home Affairs, Local Government and Labour, Manpower Development and Social Services. In addition, we are working with the non-governmental organisations. These institutions provide financial and material support that goes towards learners with special needs.

HI 4: Specifically we have had support from UNICEF through the training of ECD “A” and “B” para-professional teachers with the support of college lecturers. We have also worked with FACT Chiredzi a local non-governmental organisation, which assists schools by training health masters, and teachers who teach children rights. We allow teachers to attend workshop on children’s rights and eventually teachers use the information to teach schoolchildren

HI 1: Plan International works with school communities to establish outdoor play learning centres. Another organisation that also plays a crucial role in the establishment of ECD “A” and “B” is UNICEF and SAVE the Children Norway, which, constructed ECD classrooms and outdoor play centres at selected schools. These organisations train teachers and parents to construct learning materials.

From the above quotes, schools were collaborating with government departments and non-governmental organisations to improve early stimulation opportunities of children with special education needs in inclusive settings. However, not all learners with special education needs benefit from the services of other government departments and non-governmental organisations. Thus in these circumstances, it is important that service providers offer a uniform treatment to all schools, so that
vulnerable learners can access the interventions. In the next section, the researcher requested participants to explain structures that were in place from the district office up to the schools and communities to cater for children with special education needs.

5.5.3.4 Collaborating with other stakeholders

ECD teachers should address social determinants of children with special education needs through working with individual groups and organisations to assist these groups of children. Researches support the development of teacher-teacher, teacher-parent, and finally teacher organisation collaboration to enhance the development and education of young children with special education needs (Jayaratne, 2010). Collaboration implies to a dynamic relationship among people of diverse capacities and responsibilities. The researcher requested school heads to indicate structures in schools meant to empower parents, teachers, and learners to improve service delivery to children with special education needs.

Table 24: Structures to protect children with special education needs

<table>
<thead>
<tr>
<th>Variables: structure in place to protect children at risk</th>
<th>School heads</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>School-based child protection committee</td>
<td>16</td>
</tr>
<tr>
<td>Involvement of parents in the Child Protection Committees</td>
<td>16</td>
</tr>
<tr>
<td>Involvement of a teachers in the child protection committees</td>
<td>14</td>
</tr>
<tr>
<td>Reporting cases of children that are abused</td>
<td>10</td>
</tr>
</tbody>
</table>

In Table 25, sixteen (84%) school heads acknowledged that schools had established child protection committees. Furthermore, table 25, shows that three (16%) schools indicated that they did not have child-protection committees in their schools.
Furthermore, sixteen (84%) school heads also acknowledged that in their schools a parent was part of the child-protection committee. In the same way, three (16) school heads, pointed out that they did not collaborate with parents in running child-protection committees in their schools. Fourteen (74%) school heads indicated that in their schools, a teacher was part of the school’s child-protection committees. In contrast, nine (26%) school heads said that they did not engage teachers in child-protection committees in their schools.

Finally, ten (53%) school heads indicated that they reported cases of child abuse, and neglect to authorities. However, nine (47%) teachers said they had not reported cases of child abuse and neglect to authorities. From the above statistical data, it is clear the majority of schools established child protection committees. The implication is that regardless of child protection committees in schools, teachers reported few cases to authorities. This leaves the researcher with the conclusion that child-protection committees require concerted efforts from stakeholders, if they are to serve specific purposes to curb child abuse cases. To augment quantitative data the researcher also solicited information from interviews. Below are responses from participants.

**HI 6:** I write termly reports to the District Education Inspector on children with special needs. We also share with parents problems of learners with learning needs, through the child protection committees, targeting child abuse, and victimisation. If they are serious cases at school on child abuse and neglect, they share those in the District Child Protection Committee meetings. However, we have not yet reported any abuse case because we fear victimisation.

**HI 4:** We have school based child protection committees, made of a parent, a teacher, and children from all school grades. These report cases of child abuse that occur in different wards. This committee helps to compile reports send to the District Education offices about problems of children with special education needs. The district Child Protection Committee made up of representatives from all major children protection groups, which comprise of traditional Chiefs, different ministry representatives, NGO representatives church organisations and other organisations.
interested in children’s rights. In this way, we ensure all stakeholders share the various issues that affect children with special education needs.

HI 5: The school has a team of teachers, led by the resource unit teacher that does awareness campaigns. The department of Health and Safety Environment (SHE) also sensitises teachers on how to reduce discrimination of children with disabilities. At school level, we do not have an active child protection committee; the company’s department of social welfare does most of the sensitisation work.

MoPLSW: concluded:
We have the Children Protection Committees in all wards. Note that these are also similar to the Auxiliary Social Workers, the isibindi model). These are champions in villages. We also have the Child Protection Committees at village level and in addition, we train Child Care Workers at ward level to identify children with special needs (difficult circumstances) and then link them to where they can get assistance.

From the above information it is evident some schools in Chiredzi District had child protection committees, meant to report cases of child abuse and neglect to authorities. Through the District Child Protection Committee, it was necessary to harness all energy giving providers in the District to address ECD “A” and “B” children with special needs.

5.5.3.5 Psychosocial support

In the ECD sector programme, psychosocial wellbeing is about how the child and the immediate family/caregiver feels and thinks about the self and about life “psycho”. The child with special needs requires support, from stakeholders so that he/she begins to feel good about him or herself. The concept psychosocial support relates to the African philosophy of “UBUNTU” which states, “I am because we are, and we are because I am”. The concept psychosocial support in inclusive ECD “A” and “B” programmes therefore implies to too many different aspects of children and their families/guardians’ lives (e.g., provision of physical and material aspects and psychological, social, cultural and spiritual aspects). Stakeholders provide necessities to children with special education needs, so that they can grow and
develop in confidence just like other children. The focus for psychosocial wellbeing is not just on the individual learner but also on his/her peers, siblings, households, families, and communities. The researcher requested participants to explain psychosocial support programmes stakeholders engage in, to support learners with special education needs, including support to their families.

**NGO 1:** Early childhood education teachers teach about inclusive education. We employ the integrative approach as one-way learners help learners improve their well-being through the curriculum areas. We also teach civic education at early childhood level, ensuring that children understand their rights and the rights of others. This allows young children to be democratic learning to appreciate other children who are different from them and realizing that they also can contribute to the society and education.

**NGO 3:** We encourage local communities to form the Child led “Child Protection Committees” which comprises the village head, Councillor, VEDCO, and children picked across the primary school grades. These committees ensure concerns of children with special needs across the primary school grades, taken care of, and are referred to the right personnel to address them.

**HI:** We teach the young learners to understand their rights, so that they can claim them whenever, they are breached. The activities equip learners with confidence to develop a positive self-concept, regardless of the physical or material differences.

From the above quotes, it is clear that stakeholders offered psychosocial support to learners, families, and children with special needs. Schools there, developed numerous strategies were employed to ensure families and those children with special education needs developed a positive self-concept. ECD curriculum therefore, helps every member of society to appreciate the differences that exist among young learners.
5.5.3.6 Sensitization programmes

According to history, children with special needs did not have access to schooling facilities, in mainstream schools. There were also very few of these children that attended special schools. These remnants of culture seem to be prevailing amongst most families and communities. Hence, there is need for sensitisation campaigns that promote the rights of every child to access social services. However, across the globe, evidence shows that communities have a number of children with diverse learning needs ranging from mental retardation, physical disabilities, sight, hearing, deafness, and visual impairments, including multiple disabilities. However, based on culture most children are a burden where “other” members of the families such as grannies should take care of them. As such, the researcher requested participants to indicate if stakeholders carried out sensitisation programmes to parents and children on the rights of children. Table 26, shows school heads’ responses on whether stakeholders provided sensitisation programmes on rights of children in general.

Table 25: Whether stakeholders engage in human rights awareness

<table>
<thead>
<tr>
<th>Human rights awareness campaigns by stakeholders</th>
<th>School heads</th>
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<tbody>
<tr>
<td></td>
<td>f</td>
</tr>
<tr>
<td>Yes</td>
<td>17</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
</tr>
</tbody>
</table>

Table 26 shows that seven (89%) school heads indicated that stakeholders engaged in sensitisation programmes to promote inclusive education in communities. Meanwhile, two (11%) school heads indicated that they were not holding sensitisation programmes in school communities on ways to promote children with special education needs. Overall, stakeholders were involved in awareness campaigns, in school communities on how to promote inclusive education programmes. The following were responses from participants on whether they were engaging in awareness programmes the rights of learners with special needs to enrol in mainstream schools:
HI 1: Schools hold awareness campaigns in community, trying to make every parent and peers realise that education is a human right. We encourage these children with vulnerabilities to take part in school activities (e.g., music and dance, percussion and band) to make parents appreciate that disability does not mean inability. Our hope is to ensure that every child has the opportunity to develop in the same way with other children. We also educate students to report cases of child abuse through the child protection committees that operate in every village.

HI 2: The responsible authority (Tongaart Hullet Company) has a department known as Safety Health Environment (SHE) whose personnel carry out advocacy campaigns to promote an inclusive society. We encourage our children to take part in every activity that we are teaching them children (e.g. music, physical education to name just a few).

HI 4: We utilise the Resource Unit personnel to lead community campaigns, about the importance of education as a right for every child. We also ensure that nearby pre-school centres send children with special needs to our Resource Unit so that our resource unit personnel can assist them.

MHCW 1 commented that:
We educate the school community, which include children, parents, and teachers not to stigmatize children with special education needs. We also educate stakeholders with knowledge that some disabilities are preventable. This education is important because it enable stakeholders to strive to prevent some disabilities.

NGO 3: We hold meetings with parents in the community as a sensitization and awareness campaign. The idea is to advocate for the right of children so that each parent has a child with special needs. We also advocate that parents must show their responsibilities by ensuring that every child enrolls in school. Sometimes we approach the parent and talk on one on one. This could obviously lead to a series counselling sessions on both the parents and the child.
MoLPSW: commented:

*We have what we call the Child Case Care Workers who monitors that money or any other services rendered to the child is put to good use. Moreover at village level, we have the village Child Protection Committees, (VCPC), headed by the village head who ensures that everything that the government offers to support vulnerable children must be put in use. Where there is a misuse of funds that is supposed to enhance the lives young children with special needs, these committees report such cases.*

It is clear that stakeholders were sensitise communities on the rights of children in general, and specifically to the rights of learners with special needs to enrol in mainstream schools. Stakeholders ensured that parents were educated to embrace issues on children’s rights.

**5.5.3.7 Home visits**

Home visit programmes aim at preventing child abuse and neglect (UNICEF, 2013), and are meant to respond to a need for community health workers, psychologists and teachers so that they could have first-hand information and assess accurately the emotional needs of all family members and, especially those with special education needs. Thus, home visits are child-centred assessment strategies, based on the need to assist the development of learners, but also done in partnership with parents or guardians. It is crucial to realise that home visits enable parent education programmes to strengthen relationships by improving the emotional availability of parents/guardians as primary caregivers. Successful home visits imply that the programme is child focussed and engages parents and children as well as the parent and the educator. As noted by Browne, Douglas, Hamilton-Giachristis and Hegarty (2006), home visits were based on the belief that the parent is the most consistent and pervasive force that shape the lives of young children, especially where the child has special needs. The major role of home visits is to provide the framework of for parents to become aware of emotional development and attachment towards their children that leads to accountability of their parenting practices. The following responses came from interviewees on whether stakeholders engaged in home visits.
MoLPSW: As a government department, we carry out Child Protection Workshops where we sensitize all parents regarding the services that we offer as a ministry. We also inform parents and guardians of the procedures that need to be done by parents/guardians to access government assistance. We move around the communities sensitizing stakeholders that the government support children with special education needs.

NGO 2 also added that:
We do sensitization meetings targeting parents and community leaders. We also work with EHTL (Environmental Health Technicians) whose responsibility is to offer health education to school institutions. The role of EHT is also to monitor the health (hygiene) status of institutions to ensure that they do not pose any threat to children’s health needs in the homes. Organisations build toilets to improve the hygiene life for children with special needs.

In line with the above responses, the researcher concluded that stakeholders employ strategies targeting, not only learners with special needs in schools, but also parents and children registered in ECD settings. In some schools, the researcher found minutes on meetings that showed that teachers engaged in home visit programmes, with the aim of “Sharing with parents’ educational challenges of children with disabilities”. There was parental/adult education that brought parents/guardians together to look at improving growth, development, and education of children ensured that efforts were child and family specific. However, the researcher did not find any plan that reflected what teachers and hospital personnel did when they engage in home visits. The next section focuses on the third research question of the thesis, which looks at support and monitoring offered to ECD “A” and “B” teachers by other stakeholders to support learner with special education needs.

5.5.3.8 Support and monitoring by stakeholders in the delivery of ECDSEN programmes

According to Underwood (2015), a critical factor in inclusive ECD programmes is support and on-going monitoring from stakeholders. Ensuring that all children fully participate in ECD programmes requires that ECD teachers are supported and
provided with on-going support and monitoring experiences. High quality inclusive ECD programmes have three major components which are that: they should be accessible by all learners and their families regardless of diverse needs; that they are meant to accommodate each learner in spite of special learning needs; and that they need to have on-going assessment to ensure there is full participation by school authorities (Underwood and Frankel, 2012). In other words, support and monitoring of ECD programmes comes from government departments (e.g., health, education, and social welfare services). In the Zimbabwean context, support systems come from the Ministry of Health, the Ministry of Education through the District Education Team and non-governmental organisations. Therefore, the researcher requested these organisations to indicate the kind of support that they offer to teachers, to promote quality learning of children with special education needs.

5.5.3.9 Support provided by school heads

School heads are critical personnel that run the day-to-day needs of ECD programmes in their schools. In the case of ECD “A” and “B” programmes in schools, school heads offer administrative and management services. They provide guidance to teachers and disseminate information on how teachers could implement inclusive ECD programmes. As such, their responsibilities include planning, organisation, supervision, and evaluation of the entire ECD programme; so that when they write reports to regional offices these reports have meaning.

5.5.3.10 ECD Budgeting

Budgeting is a process of preparing and using budgets to achieve management objectives, and it is a coordinated plan, expressed in financial terms, for the future (Olufidipe, 2003). According to Ama (2001) as cited in Oboegbulem and Kalu (2013), a budget is a planned quantification of items expressed in monetary terms prepared, and approved prior to a defined period. In any school situation, budgeting therefore is a useful part of school administration strategy to control financial behaviour of administrators (Oboegbulem and Kalu, 2013). For this reason the section, the researcher wished to find out whether school heads (budgeted): planned for the ECD “A” and “B” educational trips, teachers’ workshops and the supply of learning and teaching resources for ECD departments. The researcher requested school heads to
indicate whether schools design their own budget for ECD “A” and “B” programme in their schools. Below is Table 5.2 showing the teachers’ and school heads’ responses.

**Table 26: Whether schools budget for ECD, “A” and “B” programmes**

<table>
<thead>
<tr>
<th>Whether school make budget for ECD “A” and “B” Programmes</th>
<th>School heads</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
</tr>
<tr>
<td>Yes</td>
<td>19</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
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</tbody>
</table>

Information on Table 27 shows that all 19 (100%) school heads indicated that schools made budgets to cater for ECD “A” and “B” programmes. Government did not provide funding towards the education of ECD children. Hence, it was from the school budget that schools bought stationery, teaching and learning resources, including travelling for teachers to attend ECD workshops. It is clear that school heads supported teachers making sure the ECD department had money to purchase the necessary teaching and learning materials, as needed. The researcher also solicited for qualitative data from school heads. Below are the responses that they provided.

**HI 6:** Schools budget for the needs for ECD “A” and “B” section; in the same, way all other institutional needs done. The school provide for basic needs like paints, crayons newsprints for Art and so forth.

**HI 4:** The school budgets for the ECD department as they do to any other grade. The school provide the money to help teachers whenever there is need. For instance, teachers require teaching and learning materials. In addition, teachers require money to attend ECD workshops held at the District and they might need to visit other schools to get information about how to implement the inclusive education at ECD level.
From the responses above, it is clear schools are supporting ECD “A” and “B” teachers, and making sure that money is available for the mobilisation of teaching and learning resources. Thus, the capacity of the schools to budget for teaching resources is vital since it ensures that the teacher acquire skills to deliver in ECD programmes. The next section looks at the types of support programmes that school heads use to support ECD “A” and “B” teachers to enhance the way they cater for ECD “A” and “B” with special education needs. In this regard, the researcher requested teachers and school heads to indicate how much of the listed services they were providing to teachers improved the way they cater for children with special education needs.

**Figure 16: How school heads support ECD "A" and "B" teachers**

Information on Figure 16 shows that 84% of ECD teachers indicated that they engage in in-service workshops. Forty-two percent of the teachers said they visit other schools to source for information to deliver in ECD programmes. Meanwhile, 100% of the teachers indicated that school heads sourced instructional materials for the teachers. It is clear ECD teachers got support from school heads in a variety of ways. Meanwhile, 63% of school heads also confirmed that they initiate workshops for ECD “A” and “B” teachers. Furthermore, 47% of the school heads indicated that they arrange for exchange visits for their teachers to learn new ways of delivering in inclusive classes on ways of improving lesson delivery. Hundred percent of the
school heads indicated that they support ECD teachers with learning and teaching materials, to ensure teachers assist all learners in inclusive ECD “A” and “B” classes. The researcher also interviewed participants through interviews on how schools support teachers to deliver in inclusive ECD classes. Below are participants’ responses.

HI 4, made the following comment:

*The school is improving teachers’ capacity to work in ECD classes, by arranging for in-service teachers workshops where we invite resource persons. We also ensure that our teachers attend all ECD “A” and “B” workshops arranged with the ECD District Trainer or by any member of the District Education Team. The school sponsors these trips from the money we budget for the department. Finally, we ensure teachers have working tools to support all learners in their classes.*

TR 8 also commented saying:

*We have monthly staff-development meetings for ECD teachers to discuss the various issues that affect implementation of inclusive ECD “A” and “B” programmes. It is from these staff development workshops that we discuss methods, strategies, and resources needed to handle children with special education needs. The school supports us with the resources to improve our knowledge. However, sometimes the money they have is inadequate and we end up not attending some critical workshops.*

From the information provided in the responses below, it is clear that school heads are doing their best to support ECD teachers to improve the way they cater for learners in inclusive classes by allowing teachers to attend in-service training workshops held at school as well as at district level. However, regardless of the budgets that schools are designing for ECD departments, teachers felt that the funds were limited, as it did not allow them to attend to all the necessary workshops.
5.5.3.11 Continuous professional development programmes

The role of continuous professional development programmes in schools is to provide support to new or beginning teachers. At the same time professional development programmes can also be very critical in ensuring that teachers both new and old teachers can also share their understanding of the new programmes. In most schools, continuous professional development programmes also known as staff development programmes or in-service programmes are very critical in offering induction to new teachers in certain aspects of their work. In the case of ECD “A” and “B” teachers, continuous professional development programmes on inclusive education programmes, seek to offer teachers with opportunities to build skills whose purpose should be to result in young learners learning in non-discriminatory and democratic classes and that promote development of skills that are potential to children’s development and educational attainment. It is also through teacher induction into continuous professional development programmes that school heads produce reports that are every teacher would appreciate the benefit of inclusive education programmes and ways to deliver it in such that improves the education system entirely. Thus, researcher asked teachers and school heads to show whether they were engaged in continuous professional development programmes in their schools to enhance the implementation of inclusive ECD “A” and “B” programme. The following is a table that showed the responses of teachers and school heads on that issue:

**Table 27: Specific staff development workshops on inclusive education in schools**

<table>
<thead>
<tr>
<th>Staff development workshops for ECD teachers on inclusive education</th>
<th>Teachers</th>
<th>School heads</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Yes</td>
<td>26</td>
<td>84</td>
</tr>
<tr>
<td>No</td>
<td>5</td>
<td>16</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
</tr>
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</table>

Table 28 shows that twenty-six (84%) teachers indicated that they hold staff development programmes in their schools. Meanwhile five (16%) indicated that they
do not conduct staff development workshops on inclusive education. One of the responses provided by the teachers on open-ended questions was that: “We have had other kinds of staff development workshops but for inclusive education we have never had one.”

Furthermore, Table 28 shows that sixteen (84%) school heads indicated that they do hold staff development programmes on how teachers could deliver in inclusive ECD classes. Meanwhile, three (16%) school heads indicated they had never had any staff development programme on delivering lessons in inclusive ECD “A” and “B” classes. One of the responses was that school heads were “not well versed in ECD lesson delivery.” There is evidence that there are professional development programmes focusing on inclusive in primary schools. However, it is also clear that, school heads are facing challenges to implement them.

The researcher also solicited information from participants on whether schools were engaging in professional development programmes that were focusing on inclusive education. Below are responses on staff development workshops.

**TR 7:** We hold departmental staff development workshops. We also have class demonstration lessons, where other teachers observe a lesson and commend on the flaws and strengths of that lesson, particularly when children with special education needs are not assisted.

**TR 8:** We have staff development workshops at schools level e.g., first for teachers operating in ECD classes. Sometimes the teachers request for assistance from junior teachers that have knowledge of teaching children with special education needs. We also visit neighbouring schools to observe how they deliver their lessons. This arrangement helps teachers to learn from other schools especially on lesson delivery, organisation of activities. When teachers bring new ideas, they share that with others at school.

**TR 8:** The school has monthly staff-development meetings for ECD teachers to discuss implementation of the ECD “A” and “B” programme. In staff development workshops we discuss issues on children with special education needs. We also
have demonstration lessons at departmental level, which is part of the staff development programmes. After the demonstration lessons teachers discuss outcomes of lessons, and what needs to be done to support implementation of ECD. We also have had teachers from other schools that have come to learn what our ECD teachers are doing to support learners with special education needs.

It is clear most schools are engaging in teachers in professional development programmes. As indicated schools are doing everything possible to make sure that teachers are equipped with new skills to work with children that have special education needs. It is critical to note that schools heads have also ensured that teachers have first-hand information on how other teachers are implementing inclusive education programmes in their schools. It has also been noted that, as part of continuous professional development programmes teachers attended meetings that are led by the District Education Psychologist and the District Early Childhood Trainer on implementing inclusive education programmes at ECD “A” and “B” level.

The researcher also consulted schools minute books, and evidence shows that in the majority of cases, schools hold staff development workshops, where teachers deliberated on special needs education programmes, least once every school term. Both schools and departmental minute documents showed that where resource units were established, the resource unit teachers contributed much to the success of staff development programs. These staff development programmes were crucial for newly qualified staff who indicated they lacked such orientation at college. The researcher also perused documents at the District Education Office also, which provided evidence that schools hold termly staff development workshops on inclusive education programmes. However, there was a possibility that in the majority of schools, where teachers that did not have prior training on special education needs these staff development workshops were not very effective. In the next section, the researcher requested teachers and school heads to indicate the types of continuous professional development programmes they hold in their schools. Below figure 17 shows the responses.
According to Figure 17, 81% of the teachers indicated that they engage in departmental workshop as part of continuous professional departmental programme at ECD “A” and “B” at level. Meanwhile 6% of the teachers said they invite resource persons to assist them on how they can effectively engage children with special education needs during delivery of lessons. Furthermore, 32% of the ECD teachers indicated that they engage in peer reviewing workshop, as a part of their professional development programme. Finally, 16% of teachers indicated that they learn from what happens in other schools known to be delivering inclusive education better.

In addition, Figure 17 shows that 89% of the school heads indicated that in their schools, teachers engaged in departmental staff development workshops. Meanwhile, two (11%) school heads teachers indicated they invited resource persons (the District ECD Trainer and Education Psychologist) to in-service ECD teachers. Furthermore, 26% of the school heads indicated that teachers at their schools engaged in peer reviewing each other as a form of continuous professional development programme. Finally, 26% of the school heads indicated that their teachers visited other schools where they could also learn about implementation of inclusive ECD programmes. It is clear that most of the schools engage in staff development programmes done at departmental level at school level. Maybe, schools have realised that such staff development workshops are easy to conduct since they do not entail movement of teachers. The researcher also solicited
information from participants through interviews. The following are data segments from the participants on continuous professional development for teachers.

HI 5: We also have peer reviews where we focus on classroom displays, looking at whether the displays benefit children with special education needs. Peer reviews also take into consideration issues such as lesson scheming, planning, and planning for individual work for children with special education needs including organization of learning activities. The school also send teachers to other schools to learn how other teachers implement inclusive education programs. These strategies have assisted teachers and they have improved their understanding of inclusive education.

HI 3: We encourage teachers to learn from one another on teaching methods that influence their day-to-day interactions of children with special needs in inclusive classes. We hold staff departmental workshops designed to share good practices that other teachers have learned during their training days. We also organize ECD trips for teachers to schools that we have heard have teachers doing well in delivering to inclusive classes. Furthermore, we sponsor teachers to attend District Education workshops on inclusive education. Upon attending such workshops, a report back of the outcome of meeting is shared with other staff members is done to benefit those teachers that are left at school.

TR 4: As ECD, teachers we hold departmental workshops on how deliver in inclusive classes. Teachers also engage in demonstration lessons where they highlight how they can deliver lessons in inclusive ECD classes to benefit children with special education needs. Our Resource Unit teacher led most of the continuous professional development programmes relying on his professional skills of handling children with special needs.

From the above evidence, it is clear schools promote implementation of the ECD programme by in-servicing teachers, through a variety of workshop programmes. Regardless of the above, participants showed that there are shortages of teaching and learning resources in most schools.
According to Figure 18, 32% of the teachers say staff development programs on inclusive education are benefiting them. Furthermore, 52% of the teachers indicate that they were neutral about the benefits staff development programmes on teachers. Furthermore, 16% of the teachers’ show they are not benefiting from staff development programmes held in the schools.

Also in Figure 18, 37% of the school heads show they think teachers are benefiting from staff development programmes. Finally, 63% of the school heads indicated they were neutral to the benefit of staff development programmes on teacher. All school heads felt staff development programmes were crucial in improving teachers’ performance.

From the above information, respondents have mixed feelings on whether they benefit from staff development programmes. Many teachers and school heads are sceptical on whether they are benefiting from staff development programmes. It is clear that since schools lack teachers with special education needs qualifications, then it affects the quality of in-service programme in certain cases. The researcher also solicited information from interviews, whose responses are below.
TR1: *We are not benefiting from staff development programmes because of shortages of teaching and learning resources. Most of the issues we discuss are theoretical, and that way we need practical ways of delivering in real inclusive classes.*

TR3: *Even when we get new ideas on how to implement inclusive education, the problem is our school does not have the resource unit. Therefore, we are unable to offer help to the learners when we do not have the necessary tools to assist individual learners. Hence, in as much as the ideas discussed in staff development programmes are good, we lack the means to put it in practice.*

HI8: *There are many positive signs that I am seeing because of staff development programmes. Teachers are now using concrete media on each learner. Furthermore, teachers have improved the way they are working with parents. I attribute all this to the good effect of staff development workshops*.

It is clear teachers and school heads engage in staff development workshops, but they were not benefiting much. Maybe it is the case of shortages of resources affect success of staff development workshops in schools. Another reason that made staff development unsuccessful in schools was lack of motivation. Although staff development workshops meant to enrich underqualified teachers on new models to implement inclusive education, schools were lacking qualified facilitators to mount effective staff development programmes.

Teachers wanted to be equipped with practical skills to use braille, do lip and sign reading and to assess diverse learners during learning activities. Maybe if inclusive education programme should benefit children with special education needs, staff development workshops should have a component of practical experiences, to enable teachers to have a practical feel of what exactly it is like to work in inclusive settings. The next section focuses on support strategies that stakeholders provide to teachers to enable them to assist learners with special education needs.
5.5.4 Support and monitoring by the District Education Team

The District Education office is born out of the decentralisation process made from the central government. The concept originates from the view that local education offices are best placed to play a critical role in promoting quality teaching and learning (Mavuso, 2013), in a specific district. The District Education Team; comprises of the District Education Officer (DEO), District Education Inspectors (DIs), the District Education Psychologist/ Remedial Tutor (DE Psych) and the District Early Childhood Education Trainer (DECDT) offer support and monitoring to school heads, teachers, and where necessary to parents and learners, on ways schools implement government education policies (Lagaz and De Grauwe, 2010). Furthermore, the District Education Team disseminates government/national educational resources to schools and to other stakeholders (e.g., syllabus, circulars government statutes, and policies). This provision of support is critical for appropriate implementation of educational programmes. In this section, the researcher wanted to find out the support services that the District Education Team was providing to ECD “A” and “B” teachers to ensure they appropriately implement inclusive education.

DI: Our role as inspectorate is to supervise and monitor these programmes, so that every child who is learning adequately benefits from the learning. The ECD Trainer and District Education Psychologist make mount in-service workshops with teachers to assist them to care for children in inclusive classes. We also make sure that schools have syllabi and educational circulars that assist them to teach meaningfully.

DSO: When we get to schools, we assess ECD “A” and “B” teachers. We take these assessments as very important and as a way of finding areas where we can improve continuously professional development for teachers in the district. When we assess the teachers’ professional documents such as Individual Work Plans for those children with special education needs, the idea is to assist the teachers to make meaningful individual programmes for children with special education needs.

The DE Psych concurs with the ECDT saying:
We are holding a series of workshops with teachers so that they understand the needs of children with special education needs. The whole idea is to make teachers
appreciate the needs of these children with special education so that they can offer appropriate services as needed. We also intend to have a few selected teachers train as specialists in special needs education at early childhood development level.

From the above responses, it was evident that the District Education Team was supporting and monitoring teachers so that they could improve their delivery of services to inclusive ECD classes. As noted, workshops ensured that teachers were equipped and they improved their appreciation of inclusive ECD programmes. However, the District Education Team said they held school supervision tours to assess teachers’ documents, and infrastructure to inspect if they cater for children with special education needs. The above information therefore, shows that the District Education Team supported teachers with information on better ways to cater for learners with special education needs. Furthermore, they also monitored what happened in schools with regard to the implementation of inclusive education.

Other support services by the District Education Team included coordination of local and external partners, provision of policy guidelines for the ECD programme and registration of new ECD “A” and “B” centres. It emerged that the major services of the District Education Team were supervision and monitoring of inclusive ECD “A” and “B” Curriculum implementation, making regular and continuous monitoring of activities in the schools as they visited schools to assess achievability of curriculum goals. The District Education Team also engaged in supporting both development and education of children with special education needs in inclusive settings, encouraging of child sized learning materials and modification of curriculum. The District Education Team compiled reports from schools and sent them to the Ministry of Primary and Secondary Education to strengthen the implementation process of inclusive ECD programmes. They were also involved in compilation of information regarding current infrastructure, teachers’ qualifications, class enrolments, and the capacity of teachers to deliver of lessons. These are critical elements for the evaluation and feedback of the entire ECD programme, and naturally, they require knowledgeable personnel.
In the next section, the researcher requested participants to indicate major challenges that Chiredzi District schools faced in its effort to implement inclusive education.

5.6 Challenges faced in the District to implement Inclusive education programme

Many educational programmes fail to reach their expected sustainability level because of many challenges that include lack of vision (Hopkins, 1990), of educational leaders. The implication is that learners should foresee challenges that include work force challenges and funding, as these are critical in implementing new educational programmes. Basing on that knowledge, the researcher requested participants from the District Education Team to explain the challenges they are experiencing as impinging implementation of inclusive education, especially at ECD level. Below are the responses on possible challenges.

DSO: Schools are lacking government support. We do not have transport to do all plan school visits. Another problem that affects implementation of programmes for children with special education needs is lack of qualified human personnel to support teachers to carry out the designed activities. Schools do not have the qualified personnel to implement the inclusive EDC programmes.

DI: Most ministries are underfunded. Early childhood Development is lacking financial support for the purchase of teaching and learning materials. Shortage of properly qualified personnel to implement inclusive education appears to be our problem number one. We also do not have the personal with the expertise to monitor what is happening in schools concerning implementation of inclusive education. Ministries that should support inclusive education lack appropriate coordination, and rarely address problems of children at ECD level. We also have problem of the out of school young children who are not attending the early stimulation programmes for various reasons. Hence, there must be need to establish community based ECD programmes.
It is clear that implementation of inclusive education at ECD level faces a multitude of challenges at school as well as at district level. However, concerted were necessary to address the challenges. The next section looks at support and monitoring services provided by non-governmental to ECD teachers to ensure they support learning of children with special education needs at ECD level. The researcher requested school heads to show whether they work with non-government ministries to improve the lives of learners with special education needs.

5.7 Non-governmental organizations’ support to ECD teachers

In most countries, nongovernmental organisations (NGOs), support inclusive education programmes. Because of these initiatives, NGOs target learners and teachers to improve families and children’s education. Save the Children (UK) and (Sweden), Plan International, Christian Blind Mission and a host of local non-governmental organisations initiate programmes that support teachers, learners and families of children with special education needs (UNESCO, 2009), so that they can grow, develop and achieve their potential. Some non-governmental organisations target schools to ensure children with special education needs in early stimulation programmes get support, and develop to their potential (Erradu, 2013). This enables communities change attitudes, by initiating favourable and child friendly policies that are non-discriminatory (UNESCO, 2009). With this in mind, the researcher requested participants to explain how non-governmental organisations support teachers, parents and communities to improve support for learners with inclusive classes where they are children with special education needs. Below are some of the responses of participants.

NGO 3: Our organization is offering psychosocial support, in cases where teachers and parents are failing to deal with the child’s unique needs. For instance, in the case where children have mental disabilities or might be hyperactive that causes teachers to discriminate children. Our organization offers psychosocial support to such children, teachers and the parents, because these people need counselling. We provide linkages to teachers with organizations that can assist them with learning materials and adaptable methods in inclusive classes.
NGO1: We offer in-service teacher training programs for ECD “A” and “B” teachers, focusing on identification of learning gaps for children with special education needs. The programme is the Performance Lag Address Program (PLAP). We are also working with the District Education Psychologist assisting teachers to identify children with special education needs, both in communities and those enrolled in ECD settings.

NGO 2: We engage teachers so that they form the child protection committee at school. We also see teachers as patrons of the Girl Empowerment Movement. We have constant meetings with teachers to ensure that they are meeting the goals of children with special needs and that of the girl child. In meeting the needs of children with special needs, teachers get manuals that they use to monitor the programs of the children. It is unfortunate because we are not operating in all schools in the district but in only a few schools.

There was evidence from the quotes that non-governmental organisations are collaborating with schools to teachers, parents, and learners with special education through provision of psychosocial support to children affected. It was also revealed by school heads in the questionnaires that international agencies like UNICEF also supports ECD teachers, through the provision of ECD learning kits and learning devices such as those for hearing impaired and the physically handicapped for children with special education needs. All school heads concurred that UNICEF trained Para-professional teachers trained at Teachers’ Colleges. Teachers and school heads also prophesises that UNICEF supplied schools with indoor learning materials and learning kits.

5.8 Empowerment programmes for parents and teachers by NGOs

Non-governmental organisations improve schools and communities’ service delivery to children with special education needs through empowerment projects that target both teachers and parents. Such income generating projects meant to improve the livelihoods of parents and learners with special needs through gardening and lending projects intended to make them self-reliant. Participants on empowerment programmes provided to parents provided the following responses.
NGO 2: We have a department called ISAL, which introduced money saving and lending, programmes to parents who have children with special needs. The aim of the programme is to ensure that profits can be utilised to support children with different forms of special needs, either providing transport to and from school.

NGO 3: We encourage local communities to form the Child led “Child Protection Committees” which is formed by village head, Councillor, VEDCO, and a composition of children picked across the primary school grades. This committee ensures that concerns of all section of children with special needs are taken care of and are referred to the right people who can address them.

NGO 2 further asserted that:
We have initiated the income-generating project such as the; the pass on goats’ project at Ndali primary school. The gardening project at Jekero primary school and the poultry project at Mwenje primary school. The profits are going towards the payment of fees for children with special education needs.

From the above data, it is clear NGOs are playing a very critical role to empower parents as primary caregivers for children, so that they mobilise resources to support learners with special education needs. The next section focusses on the support that the government through different departments (ministries) provide to teachers to improve their effort to cater for children with special needs.

5.9 Support and monitoring by government ministries

Governments play a critical role to support early childhood programmes. The role of the government is to put all elements that support learners with special needs together, to ensure that learners benefit from inclusive education programmes. Thus, the researcher requested school heads to indicate the government ministries that worked with their schools to improve inclusive education. Figure 5.16 shows data on what school heads said about government ministries that collaborate with their schools to support inclusive ECD “A” and “B” programme.
Information on Figure 19 shows that 38% of school heads indicated that the Ministry of Health and Child Welfare is supporting and monitoring implementation of ECD “A” and “B” programmes. Meanwhile, 10% of school heads indicated that the Ministry of Labour, Public Service, and Social Welfare also supported ECD “A” and “B” programmes. Furthermore, 28% of school heads indicated that the Ministry of Home Affairs also supported programmes for vulnerable children. In addition, 24% of school heads indicated that the Ministry of Local Government and National Housing also supported ECD programmes. The responses show that many ministries support ECD programmes, showing evidence of the inter-sectorial activities in supporting children with special education needs. The following responses show responses that participants provided regarding government ministries that support schools to improve catering for children with special education needs.

HI 10: *The Ministry of Health and Child Care, carry out immunisation programme, where all children below the age of 5 years get free medication. The Ministry also monitors the environmental health of schools focussing on adequacy of toilets and their general cleanliness. The Ministry of Home Affairs works with teachers in schools sensitising school communities and learners on child abuse cases.*

The following interviewees support the above assertion:
MHCC 1: The Ministry of Health and Child CARE has a department called Environmental Health Department, which inspects the health facilities at all educational institutions. We work closely with school health teachers who were trained by the Ministry of Health and Child Care personnel on general health precautions. We also work together with the Ministry of Education and the Ministry of Labour, Public and Social Services, of Rural District Council (Ministry of Local Government and Housing) with whom we discuss health and education issues.

MHCC 2: We do school inspection visits. When we find out that the health situation in the schools is compromising the health of children, we write reports to the District Education Offices and District Health Offices as well as to the District Child Protection Committee. When we receive such reports, we investigate the causes of poor health condition. In some cases, it might lead to the temporary closure of the school or ministries can source funds to improve the situation.

MLPSSW: also commented that:
Usually ECD “A” and “B” children with special education needs require physiotherapy. When the child at that age group goes to the physio-therapy we pay for the medical bills. Other children who require medical care also benefit from such services, especially children infected with HIV and AIDS whom we offer AMTOS (Assisted Medical Treatment Orders).

From the above responses, government ministries/departments were working with ECD teachers to assist them to cater for children with special education needs. This was regardless of the challenges that ministries were facing, we inspect and monitor health facilities in institutions where ECD children spend most of their time. In the next section, the researcher requested teachers and school heads to explain how parents support teachers to cater for children with special education needs.

5.9 Supporting and monitoring roles by parents to ECD institutions

International authorities documented the crucial role of support by families and guardians towards early childhood development (ENESCO, 2004). The United Nations urged governments to develop policies that strengthen family support and
early childhood development networking and partnership with parents. Though there is a realisation that most vulnerable children lack committed families (Vargas-Baron, 2011), studies show that their support is a necessity. For children with special needs to be visible parents and communities need to play a more active role in supporting and monitoring programmes for their children. Furthermore, families need to advocate for the right to social services of learners with special education needs. Owing to the above, introductory remarks, the sections below focuses on support and monitoring provisions by parents towards ECD “A” and “B” teachers and classroom teaching.

The researcher inquired teachers and school heads on whether parents provided support to ECD institutions for the support of learners with special education needs. Below is the table, which shows the responses that came out of the question.

**Table 28: whether parents are supporting ECD teachers**

<table>
<thead>
<tr>
<th>Parents support to inclusive ECD “A” and “B” programmes</th>
<th>Teachers</th>
<th></th>
<th></th>
<th></th>
<th>Schools heads</th>
<th></th>
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<tbody>
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<tr>
<td>Yes</td>
<td>29</td>
<td>94</td>
<td>19</td>
<td>100</td>
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<td></td>
<td></td>
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<tr>
<td>No</td>
<td>1</td>
<td>6</td>
<td>0</td>
<td>0</td>
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<td></td>
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<tr>
<td>Total</td>
<td>31</td>
<td>100</td>
<td>19</td>
<td>100</td>
<td></td>
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</table>

Table 29, shows 29 (94%) teachers acknowledge that parents supported teachers to implement inclusive ECD “A” and “B” programmes. Meanwhile, 19 (100%) school heads said parents supported ECD “A” and “B” teachers’ efforts to implement inclusive ECD classes. Given the responses that indicated, that teachers and school heads provided, it was true that parents supported inclusive education programmes at ECD “A” and “B” level. Maybe teachers and school heads reached at that conclusion because parents were enrolling young learners in pre-school programmes including those with special needs. Hence, this implies that they supported inclusive education at ECD level. The researcher also solicited information from participants. The following were some of the responses that came from participants regarding the support that parents offer to ECD “A” and “B” teachers.
FGD1: As parents, we are helping with learning materials, especially indoor learning materials. We also at times pay money for the construction/ repair of the outdoor play centre. We do resource mobilization, networking with non-governmental organisations and private partners who have been training us to make learning resources.

FDG2: We support teachers, taking part in preparing nutrition and subsequently feeding learners. We are in the School Development Committee, where were tackle challenges of the ECD “A” and “B” programme.

FGD 3: We assist teachers because we help learners with homework. Although our teachers are not including us in how they teach learners with learning challenges, we enjoy assisting them in whatever work that the learners get as homework. We provide funding, inform of levies is used for infrastructural development (i.e., classrooms and toilets), that can also accommodate children with special education needs.

From the above, it is clear parents are supporting the ECD “A” and “B” teachers in a number of ways which include assisting with homework, mobilisation of resources and monitoring of the programme especially for those who are members of the school Development Committees (SDC). The final section of this data presentation is now focussing on support and monitoring responsibilities by the government as provided by participants who answered interviews. The researcher requested participants to explain support the government provided to ECD “A” and “B” institutions. The following were answers that they provided:

DEO: The government formulates ECD “A” and “B” policies including the syllabus and ensures that they are disseminated to all provinces/regions, districts and schools. The government also ensures that supervision and monitoring mechanism is in place to ensure there is implementation in the school. In this regard monitoring of programmes is provided by the District Education Team, assisted by the Provincial Education Team, in the cases of identification and assessment of children with special education needs. The District Education Team is also responsible for Quality Assurance and Standards Control (QASO) in all schools.
DECD: The government monitors and supports the adaptability of learning environments to ensure all children enrolled in ECD settings are benefiting from the resultant environmental changes. However, the government is not funding ECD “A” and “B” programmes directly as is done with other vulnerable children in other grades across the school curriculum.

From the above responses, the government supports the implementation of ECD programmes as the District Education Team supervises what happens in the schools regarding provision of services to ECD “A” and “B” learners. The core responsibility of the District Education Inspectorate team is to ensure teachers and schools heads are adhering to the rules and regulations as set by the government. The government ensures schools have access to national documents (syllabi and circulars) relating to the delivery of the ECD “A” and “B” programme.

The District Education Team is the heartbeat of inclusive education implementation in the district. It ensures that fundamental issues on government policies are put in place and schools fulfil children’s legal rights. The District Education Team ensures school heads engage in continuous supervision of the ECD curriculum. Participants noted that lack of qualified human resource and transport to reach all schools for supervision curtails the mandate of the District Education Team.

5.11 Summary

The chapter presented data on the implementation of inclusive Early Childhood Development programmes for ECD “A” and “B” classes attached to primary schools in Chiredzi District. The first section of this data presentation focused on data on the biographical data of the respondents that provided quantitative data. The researcher presented data on participants’ gender, academic and professional qualifications, and work experience. The next section presented data on ECD sector programmes, which include the Health and Nutrition, the Child Protection, the Social Protection, and the Education sector programmes in Chiredzi District. Specifically in the Health and Nutrition Sector programme, the researcher presented data on immunisation of ECD children, general hygiene programmes in primary schools and provision of supplementary feeding for ECD learners.
The second section presented data on strategies that stakeholders are employing to ensure that inclusive ECD programmes comply with international requirements. Specifically, the study presented data on advocacy, home visits, continuous professional programmes, collaborations, and capacity building strategies. The final section of this data presentation was on support and monitoring that is provided by stakeholders to teachers to ensure the teacher improves the way he/she caters ECD “A” and “B” learners with special needs. Specifically, the study presented data on the support and monitoring services provided by the different stakeholders, who include supplying teaching and learning resources, engaging teachers in continuous professional development programmes and budgeting specifically for teachers, to have peer review programmes in other schools. The researcher also attempted to present data on some of the challenges encountered by the District Education Team in their effort to implement an inclusive ECD programme. While this chapter has presented data, the next (Chapter 6) discusses and analyses the same.
CHAPTER SIX

6. DISCUSSION OF THEMES EMERGING

6.1 Introduction

This chapter provides a discussion of the data presented in Chapter 5, on the delivery of early childhood development programmes for inclusive ECD “A” and “B” programmes in Chiredzi District. The discussion lays the backbone of the study, and grounded in the research questions.

6.2 Health and nutrition


The findings reveal that the government provides specific health services towards vulnerable children in Chiredzi District. The health personnel make domiciliary visits/home visiting to ECD children with special education needs, where in most cases they immunised the children. The findings are consistent with similar programmes in Sweden on immunisation for young children, where domiciliary visits boost their psychosocial well-being (Almqvit, 2011). The study also found that some children with special needs are not immunised, as some parents deny their children immunisation, because of culture and fear that community may discriminate them. Basing on their culture and poor education backgrounds, parents deny children opportunities to be immunised, and this affects growth and development of these children. These parents’ actions could expose children with special needs to childhood diseases (El-Sayed, Mohamed, Nofa, Mahfouz, Zeid 2001; Fatso, Kuate-defo, 2005).
Furthermore, the findings revealed that schools do not have adequate health facilities that are specific for children with special needs. The researcher found that some schools hardly have any decent health facilities, with some schools actually lacking the recommended toilets. Gunhu et al. (2012) in Zimbabwe, noted similar results when they found out most schools that attach ECD “A” and “B” classes have poor health and nutrition, water, sanitation and hygiene (WASH) facilities. The situation is not healthy for young children who are likely to catch waterborne diseases, particularly that the district has the highest rate of prevalence of cholera, typhoid, and malaria.

There is evidence that the Ministry of Health and Child Care, through the Department of Environmental Technician inspects the availability of health facilities in schools including adequacy of learning space (UNICEF, 1986). Regardless of the clear guidelines, the current study found that young learners are learning in unhygienic conditions, which render them to poor health and diseases. Considering that, Chiredzi is in Zimbabwe’s climatic region five, which is extremely hot and known for outbreaks of water-borne diseases such as cholera, typhoid, and malaria, thus the learning centres pose risks to the young learners. Hence, poor health facilities compromise children’s growth, and development. In addition, these might have long-term ramifications to children’s health. If the situation is not controlled, it might lead to high child mortality deaths. In a study similar to this one, Almqvt, (2011), in Sweden found that the government ensures that children with special needs enrolled in ECD programmes have improved health facilities. Such children benefit from psychosocial and well-being programmes that are provided by the government and non-governmental organisations. Treatment of children with special needs in Zimbabwe differs with what happens in other countries, where governments see their support as a priority. If ECD “A” and “B” learners lack access to decent health facilities, and are exposed to diseases. According to the rights-based model, whether children have mental, physical, or are in rural schools they deserve respect and should access all service delivery systems: health, and nutrition, which are not in schools (UNICEF, 2006). Similarly Bronfenbrenner (1998), stresses that the exosystemic layer is influential in providing improve health facilities in communities for children with special needs. Bronfenbrenner (1998) and Almqvt (2011), emphasise the critical role of governments and non-governmental organisations in
improving health and nutritional facilities for children with special education needs. In this study, the government introduced policies to facilitate health and nutritional needs for children with special needs, but the policies were hardly implemented. Where health programmes were implemented hospitals did not have the medication and children would end-up buying the medication, which is out of the reach of many. It is clear that lack of access to health facilities affects children’s growth and development, especially those with special needs who can become worse vulnerable to diseases because of their fragile health conditions.

The findings of the study showed that most schools did not provide supplementary feeding, except for a few schools, which get assistance from Malilangwe Conservation Trust. Supplementary feeding is important if we consider that preschool centres enrol students infected with the HIV and AIDS virus, who require well balanced diet. Furthermore, most Zimbabwean children go to school without proper feeding (Nyamanhindi, 2015). Without provisioning of supplementary feeding, the health condition of children with special needs deteriorates. The findings show that 80% of the parents provide snacks to children enrolled in ECD “A” and “B” classes. However, some children were not affording to bring snacks to ECD centres because of household poverty. Failure by parents to provide balanced nutrition to ECD “A” and “B” learners when they go to pre-school has a detrimental effect to children’s growth and development because these children might be from poor families that do not afford to offer them with adequate feeding (Global Monitoring Report, 2010). Nyamanhindi (2015: 9) also made similar remarks, “Many of the young Early Childhood Development (ECD) children turn for school on empty stomachs”.

In similar studies, Vegas and Silva (2010) found that in Panama, supplementary feeding programmes target all pre-school learners from disadvantaged communities as a complimentary feeding scheme to improve their health. Furthermore, Eagle et al (2007) found that in Denmark effective supplementary feeding programmes target all children from disadvantaged communities. In the current study, the findings are contrary to how supplementary feeding is provisioned above, given that only few ECD centres benefit while many more young vulnerable learners who might require the facility are not accessing it. However, the context of development in Panama and Denmark are different to that in Zimbabwe, given the fact that Zimbabwe is a
developing country while others are middle income and developed nations. Thus the economic base is different, which result in different results.

Furthermore, Denmark and Panama governments collaborate with non-governmental organisations to offer supplementary feeding to young learners from disadvantaged communities. In South Africa, National Development Agency (NDA) (2012) reports, that all registered ECD centres benefit from food intervention programmes provided by non-governmental organisations and private organisations. The report on the National Development Agency in South Africa shows the government is committed to assisting learners with special needs with supplementary nutrition, and procedures are in place to ensure all learners are accessing the facility. Furthermore, while in other countries many non-governmental organisations support supplementary feeding programmes, in Chiredzi, it is only Malilangwe Conservation Trust, which is involved in food intervention programmes.

Contrary to other studies, this study notes that the government is not involved. There are some economic and political implications to that but the situation is threatening the health and nutrition needs of ECD learners in disadvantaged communities that are not accessing supplementary nutrition (BBC News, 2004). The results concurs with UNICEF, (2013)’s findings who found that that lack of nutritional support is one reason why some ECD parents not to enrol vulnerable children in ECD centres. Without intervention programmes, targeting vulnerable learners there is a possibility that the district may lose many children to childhood diseases and malnutrition. Yet, the Convention on the Rights of the Child (CRC) sees health and nutrition as rights that all children should access as these guarantee children’s survival and development (UN, 1990). Malnourished children have lowered resistance to disease infections and they are more likely to die from common childhood ailments like diarrheal diseases and respiratory infections (Fatso and Kuate-defo, 2005).

However, the current results show that some learners with special education needs in inclusive ECD “A” and “B” centres in primary schools are benefiting supplementary feeding while others are not. Thus, the rights based model fits well in this study because it sought to find out if there was equity in the distribution of social services in schools to support learners’ with special needs.
6.3 Social protection programmes

6.3.1 Policy implication

The major aim of social protection policies is to reduce poverty as well as improving child health and education outcomes. The findings on Social protection programmes revealed that the government works with non-governmental organisations, to assist communities to support children with special education needs. In Peru, in a programme called Vaso De Leche researchers Armecin, Behrman, Duazo, Ghuman, and King (2006) found that non-governmental organisations target young children in schools to improve their health and education outcomes. In the current study, non-governmental organisations provided supplementary feeding as social protection facility to learners that are affected with household poverty as a clear sign affecting their growth and development. When learners who suffer from household poverty, fail to access social protection support, it certainly affects health as well as their psychosocial and well-being. However, it is not always prudent that communities over rely for social services to access health and other social service provisions from external support such as non-governmental organisations, but also to be empowered to support the learners with special needs.

In addition, the findings were that Malilangwe Conservation Trust also assisted children with health challenges by engaging visiting doctors from USA to provide medication. Britto et al., (2013), found out that it is common for different NGOs to be working in the same area, and benefiting from the same clients. The researcher concluded that the majority of learners with special needs that accessed social protection benefited were from the same project area. The implication is that few learners accessed social protection facilities while most of the children from other schools who also deserved social protection facilities were not accessing them. The tendency to incorporate one group of the population (elite capture) was because of influential people manipulating the decision-making arena. Hence, the study found that few learners with special needs in few schools benefited more than other learners, a situation that needs redressing by stakeholders. As observed in Bronfenbrenner’s macrosystemic layer of the ecological systems theory, the well-being of children with special education needs may be affected by subcultures and
general beliefs and values of culture, that regulate other institutions (Bronfenbrenner, 2005). In the context of this study, it was clear there were other forces that regulate which schools are supposed to benefit from social protection services. However, this is unjust, as other children who also needed to benefit from the same services because of similar challenges do not access those services.

Furthermore, the findings of the study show that the government is not providing any form of social protection benefits to ECD children with special education needs or their families. For instance, the government is not providing Unconditional Cash Transfers to boost household poverty. According to Martorano and Sanfilippo (2012), social protection services seek to reduce poverty through poverty alleviation programmes that target families or their children with special needs. However, as evidenced by the findings, most social protection programmes do not reach those families and children that mostly need the services. This is in-spite of the fact that the government in the five year plan (2009 to 2015) promises to provide unconditional cash transfers to all vulnerable groups of children.

According to Britto et al., (2013), without Cash Transfers, young children that are vulnerable would not have a perfect start in life, since parents/caregivers do not have enough means of livelihoods because of poverty. These results are in contrast to those found in Latin American countries that offer Cash Transfers to families and ECD children with special needs (Vegas and Silva, 2010). Also in South Africa, the Child Support Grant (CSG) a form of Unconditional Cash Transfer support children’s rights to nutrition, health, shelter, and social protection. Without such facilities as cash transfers, to alleviate household poverty, most learners with special needs are likely to be withdrawn from ECD programmes.

As a social protection measure, access to unconditional Cash Transfers, improves growth status in early childhood, and ECD “A” and “B” attendance among those who benefit would be higher than those non-beneficiaries would. According to the rights-based approach, every child has a right to social services, based on equity of opportunities, without discrimination (UN, 2002). It is clear that, while other children with special needs are accessing social services some are not. Thus, access to social services is not the same among learners with special education needs.
In addition, the findings show that even though Zimbabwe has a school social protection programme known as Basic Education Assistance Module (BEAM), the service does not cover learners with special needs that are in ECD “A”, and “B” classes. Unlike Uganda, where the government’s Universal Primary Education policy targets all young children to access free education and free health facilities (Deveraux, 2004), ECD “A” and “B” learners do not have free education opportunities. Without accessing BEAM, and the per-capita grants, early childhood learners that are supposed to enrol in ECD “A” and “B” programmes may be either drop out or parents not enrolling the children in ECD programmes. In their study, Martorano and Sanfilippo (2012) in Chile, found that where social protection programmes like supplementary feeding and cash transfers target vulnerable learners, these reduce absenteeism, and dropping out of school. In addition, when poor household families fail to access social protection benefits, the likelihood is that young children with special education needs are likely the victims of education enrolment (UNICEF, 2007).

In the context of the ecological systems theory, implementing an intervention programme for learners aged three to six years at grassroots level, which target the family and the schools benefit the children (Herman, et al., 2004). Basing on results of the situation of children with special education needs, in relationship to their different socio-economic and cultural relationships in schools, the distal community values as well as the proximal influences of the ecological theory are not providing some significant intervention support programmes to assist these learners to grow, develop, and benefit from early stimulation programmes.

Furthermore, the findings further show that few children with disabilities have assistive devices like wheel chairs, direction rods, and braille technologies. Mainstream schools had no Braille facilities, while most schools had not modified classrooms to be accessible by all groups of learners. Without assistive devices, special needs learners enrolled in ECD “A” and “B” may not be benefiting from early stimulation programmes. According to Hook et al., (2002), when children with special education needs have assistive devices, there is a possibility that such children will benefit from their learning. In the context of this study, children with special needs were not benefiting from learning experiences, because they lacked leaning devices.
that make it possible for them to benefit from learning experiences. According to the transformative function of the Social Protection policy, the aim is to promote and advance social justice to young ECD learners with special needs.

Meanwhile, the Rights-Based approach stipulates that *education must be available for, accessible to and inclusive for all children* (UNICEF, 2006; 2). Although early childhood education is available to the majority of young children aged 3 to 6 years, but without providing assistive devices to learners with special needs, such learners would not be benefiting from the early stimulation programmes. For children with special education to benefit from early stimulation programmes, they need support of assistive devices from local communities, civil society, and parents to ensure they benefit from early stimulation programmes. Without the support of assistive devices, learners with special may only make numbers in the education for all, but without really benefiting.

Finally, the study found that non-governmental organisations empowered communities through projects to benefit young learners with special needs, through programmes similar to the in-kind Cash Transfer in Kenya where families lend each other money to improve the lives of young children and families (Britto et al, 2013).

In a similar study, Afori-Addo (2014) found that empowerment projects benefited urban learners more than rural communities. However, in the current study, the results showed that empowerment programmes were in rural communities where social protection programme support learners with special needs through the goat and the vegetable garden projects. In the goat-pass-on project for instance, a child with special needs receives a goat from a non-governmental organisation, which he/she keeps until it has a kid, then he/she passes it to the other child with special needs, and it goes on and on like that. The idea behind these projects is to sell the goats during time of the child’s need. Similarly, the garden project, non-governmental organisations provide vegetable seed and chemicals to families for the garden. Families with children with special needs work in the garden, and upon selling the vegetables, money supports ECD “A” and “B” programmes at school. In kind, cash transfers foster poverty alleviation on parents of vulnerable learners and improve children’s stay in early education programmes. Whatever the challenges,
empowerment through cash in-kind, cash transfer programmes have an advantage in that parents for children with special needs claim ownership, of the ECD programme, as they are involved in the programme. When families and the larger society support the ECD programme, there is a high degree of programme sustainability. According to UNICEF, (2007) rights based approach, requires a high degree of participation from the targeted beneficiaries, including local communities. Thus, such programmes ensure local communities engage in ECD programmes that improve the child’s growth and development. Below are programmes that the current researcher found the different sector programmes were involved.

6.4 Integrated programmes for children with special needs

6.4.1 Psychosocial support

The findings revealed that the Ministry of Health and Child Care in collaboration with NGOs train school health teachers about basic hygiene practices in schools. Training of health teachers is good for children with special needs, as they benefit positive health practices. School health teachers promote the psychosocial and well-being of learners. Furthermore, school health teachers provide psychosocial support to children with special education needs, including to their families. In line with the Minister of Health and Child Care (Dr.Parirenyatwa2014) who pleaded in the media that:

As a State, let us put great commitment to the well-being of our children by creating supportive and child friendly environment. This is everyone’s responsibility (Parirenyatwa in Herald, 25 November 2014).

In line with that push, the researcher found that schools revive the school health programme that incorporates regular medical check-ups on pupils by health professionals and the general provision of the psychosocial support. In a similar study, UNICEF and the World Health Organisation (2014) note intervention programmes that include health and nutrition education and psychosocial programmes were successful in assisting vulnerable ECD learners in countries such as Bosnia. Nevertheless, the study shows that, although stakeholders provided health, nutrition, education: psychosocial support was very important to learners, and their families as learners require warm attention, smiling and talking to the
caregivers. However, as noted in most studies, parents rarely value the importance of psychosocial care for their young children; often they violate children's rights to protection and security. In emphasising the importance of the integrated services UNICEF and WHO, (2014), give an example of how Uganda in 2006/7 integrated early stimulation, health, and nutrition, psychosocial provision to assist mothers be responsive to the needs of their children. The results showed that the mothers were engaged their children in early stimulation programmes and they were responsive to their needs.

However, while psychosocial opportunities are the best for children with special needs, families need adult education understand how their role is important to children’s growth and development. According to UNICEF, 2013), effective psychosocial support requires one on one with the child who as a problem. However, opportunities for one on one are hardly available because of large class enrolments and the distances involved. Hence, the findings show that children in most schools lack the much-needed emotional support, which is very critical for young learners’ development. In support of the critical role of the psychosocial programme the rights-based approach to ECD, Article 24 of the Convention on the rights of children guarantees health care and nutrition as a right for all learners, including healthy mother-child relationship. However, the current study established that although psychosocial programmes are important to children’s development, many parents are sceptical about non-material assistance and hence, the importance of home visits to strengthen its significant role.

6.4.2 Home visits/domiciliary

Home visiting programmes target communities with the aim of informing them about children’s rights (UNICEF, 2013). The visits gave first-hand information to psychologists, teachers, including community health workers on the emotional and psychological needs of learners with special education needs. Home visits hinge on the concept that parents are the most pervasive force in up-bringing children (Bierteker, 2010). The home visiting teams educate parents on all aspects of children’s development: behaviour and social adaptation including children’s
cognition so that parents understand the behaviours of their children in their everyday life.

The findings show that teachers, school heads, NGOs, and representatives from other ministries often engage parents through direct home visits. The integrated programme through home visiting seeks to encourage the practice of good neighbourliness as the underlying principle to build community-based intervention programmes. According to Cowley, Whittaker, Grigulis, Malone, Donetto, Wood, Morrow, and Maben (2013), health visitor relationship is the key aspect of working with families. While stakeholders engage in home-visits, not all domiciliary visits produce the much-needed benefits. In some cases, families are sceptical about the visitors and may not buy their ideas. This is more realistic in the context of Zimbabwe, where the geopolitics can create mistrust with the home visitors. In this cases relationship is the context behind success of any successful home visit (Cowley, et al., 2013).

While it is clear that stakeholders hold home/domiciliary visits, there is no guarantee that a stakeholder first carryout needs assessment on challenges that societies experience with learners who have special needs. Accordingly, Davis and Day (2010) note that without needs assessment, it is likely home visits may not tackle challenges of children with special education needs. The study found that parents are not consulted about what domiciliary visits hope to achieve. While it is important that parents and communities are educated on children’s rights, involving them in planning can go a long way in creating a culture of ownership amongst the recipients. However, when effectively planned domiciliary visits are helpful, especially where facilitators know what they want to tackle. In the context of this study, teachers, school heads prophecies little understanding of implementation of inclusive education. Hence, it may be a challenge to present, information that convinces the parents on children’s rights, especially given the context that the philosophy on children’s rights is a new phenomenon in the African culture and context. These findings also confirm Cowley, et al.’s (2013), study where they found that additional training for people who do home visiting is important for its success, and that there should be accountability that are considered ahead of time. In other words, they stress the need importance of needs assessment and planning as
important to provide accountability. Such intervention programmes benefit learners with special education needs, but they also depend largely with the available knowledge that stakeholders have about the phenomenon. Home visit create bonds among stakeholders towards a common cause (Engle et al., 2007).

However, Khan (2013) found out that communities in Pakistan often expected much more than information from domiciliary visits. In other words, home visits should work on mechanisms that incorporate pragmatic challenges that society’s experience. For example, parents indicated that they wanted training on identification of challenges and assessment of early symptoms of special education needs. In Bangladesh, Britto (2012) concluded, children in difficult geographical locations were lacking up-to-date health information; the results affected those children’s growth and development. To improve intervention through home visiting, the government should increase its budget so that these domiciliary visits are regular.

The ecological systems theory encourages collaboration of various layers of the ecology system to assist learners with special education needs. The ecological systems theory therefore influences the aspect of home visiting by helping programmes recognise influences and resources beyond the immediate family (Bronfenbrenner, 1979). For instance, when NGOs, teachers and the Ministry of Home Affairs make home visits, the idea is to provide social support, which plays a significant role in the well-being of individual family members. When social support is strong, as when parents and the extended relative have with the family the child resides, the child will benefit from close caring. As cited by Wasik and Bryant (2015), Rees (1983) noted that families that report four or more close friendship cope better with rearing their children with special needs than families with fewer close friends. What is clear is families with children with special education needs who receive home visitors from influential organisations were coping with challenges of rearing child with special needs. Furthermore, the researcher found out that, those school communities that had their schools benefiting non-governmental support prophesised that they were benefiting from home visits. Although home visits were designed to help families engage in problem management and problem solution, to address daily challenges of children with special needs, there is need for new
approaches and new ways of thinking to tackle children and parents’ problems situation.

6.5 Programmes to reduce child abuse and neglect

The findings show that non-government organisations work with the Ministry of Home Affairs and schools to improve the lives of families and children with special education needs in the 145 schools in Chiredzi District, providing psychosocial support, educating and advocating about children’s rights. Some non-governmental organisations target teachers, schoolchildren and their families, educating them about children’s rights. The Constitution of Zimbabwe (2013) is committed to promote and protect the rights of every child, as enshrined in the international frameworks such as the United Nations Human Rights and the United Nations Child’s rights (UN,1990). Specifically care and protection of ECD children focus on the intellectual, psychological, emotional, and physical. They assist schools by training teachers work with learners in school-based child protection committees (CPCs) whose aim is to protect children from neglect, abuse, and violence (Faneli and Mushunjie, 2007). The children in the CPCs report all cases of child abuse that they hear in their communities. Article 28 of the South African Constitution, deliberates on the safety, well-being, care and protection of children through the multi-disciplinary approach. The Department of Department of Social Development and non-governmental organisations work together to reduce child abuse, neglect and exploitation (UNICEF/BANA, 2013).

While all countries work towards protection of children, this study found that there are procedures to protect learners with special needs from, abuse, neglect and violence are clear. However, there, there is no specific law, which binds offenders of child abuse, neglect, and violence. Without an enforcement arm on perpetrators of child abuse, child abuse cases will continue likelihood. The rights-based approach to the study fitted well in this study, because it emphasises on child protection rights. The current researcher was keen to know the strategies in place in ECD “A” and “B” institution that support children’s protection against abuse and neglect. The current study shows that stakeholders collaborated to sensitise and educate communities on forms of child abuse. However, there are pockets of good practices in the strategies.
that stakeholders are employing, as they are involving the children in advocating against child abuse, neglect. This enables them to understand their rights, and to be confident to stand for their rights (Save the Children, 2013).

6.6 The education sector programme for children with special needs

This section discusses findings on the education sector on the implementation of inclusive education at early childhood development level. The findings on qualification of teachers and instructional methods used in inclusive early childhood classes and issues on class size are discussed.

The findings revealed that ECD “A” and “B” teachers lacked specialised training to work in inclusive classes. According to OECD (2012b), teachers who lack specialised skills under perform in inclusive classes. In countries such as; New Zealand, Chile, Denmark, France, Israel, and Korea: inclusive ECD teachers possess specialised skills to handle unique needs of diverse learners (New Zealand, 2009-2010; OCED, 2012b). The implication is that teachers must employ child centred methods of teaching which allow them to assist ever child as any individual. This means that that teachers must cease to employ the traditional method of teaching, the one method fit all. The implication is that teaching methods should allow learners to develop critical thinking that allow learners to thrive in society.

Given that in inclusive education classes, learners have different learning challenges; teachers should have the charm to improve children’s psychosocial resilience, to enable them to deal with social and emotional experiences. It implies that inclusive teachers, have skills to develop the holistic development of learners, through organising learning activities that address all aspects of learners’ development needs. The implication is, teachers should be equipped with communicative skills to assist them to relate to children’s families and organisational skills that enable them to organise teaching activities in a way, which benefit every learner. However, without teachers that have special education needs qualification such skills may not be there in most ECD teachers. Regarding the qualification of teachers, Deleon and Deleon (2001) emphasise that in the bottom-up approach,
local officials must be more responsive to their constituents. In this case, teachers must have specialised skills to serve learners with special education needs.

In the whole of Chiredzi education district, only one teacher has a specialist educational qualification to teach children with special education needs. As witnessed by the district management team, teachers lack passion and organisational skills and knowledge to deliver in inclusive classes.

Without specialised teachers to work with diverse learners in inclusive classes, teachers are unlikely to offer appropriate lesson delivery services. Specialised teacher qualification is critical for teachers working with young children that have special education needs. According to OECD (2013), teacher training has major implications to effective curriculum implementation for inclusive ECD classes. Five 2003 in OECD (2013), who assets that improved teacher training for ECD teachers is necessary to equip them with skills to work in inclusive classes, supports these knowledge claims. Without appropriate qualifications, teachers demonstrate poor the knowledge, skills, and competencies and in the end, these have ripple impacts on the way they organise and deliver in inclusive ECD classes.

In addition, the findings of the study show, schools have very large class enrolments with some schools having as large class enrolments as 1:60. According to Shonkoff and Phillips, (2000), inclusive education curriculum depend on a number of factors, which include a well prepared environment, well trained teachers and small teacher pupil ratios. Small teacher pupil enrolments allow teachers to employ individualised teaching and learning methods. Such methods are not possible when inclusive classes are large, especially at ECD level where learners require large learning space. The implication is that inclusive ECD classes should be small enough, with at least a ratio of 1:12 learners to allow teachers to the diversified needs of children with special needs. According to UNICEF (2006), the rights-based calls for inclusive settings, which are respectful, of children’s health? Children’s health is not attainable when class ratios are too large, as some learners might be suffering from respiratory problems. Hence, large class ratios do not respect and recognise learners’ rights to good health. Furthermore, large class sizes do not provide a student friendly environment, especially for young children with disabilities because naturally they
need to learn in spacious classrooms, where they can explore what is in these learning rooms without fear of bumping against one another.

The study established that ECD “A” and “B” classes did not have assistant teachers. Regardless of the large class sizes, there were single teachers in operating inclusive classes. The current findings vary from findings by Giangreco and Doyle (2007) in Australia who noted that internationally, teacher assistants to support the education of learners with disabilities manned inclusive education classes. However, it might be that the results are contextual based, given the nature of the socio-economic realities of the two countries. However, the services of teacher assistants are important to inclusive classes; as such, assistant teachers are a necessary mechanism to support inclusive learners with learning challenges. It is not professionally feasible to operate in a large ECD class of over 30 learners without an assistant teacher as one teacher can hardly have the time and energy to assist individual learners (Giangreco and Doyle, 2007). The implication is children with special needs are unlikely to access individual support in large classes, as the numbers of learners overwhelm the teacher and this does not go quite well with the ethos of inclusivity.

Furthermore, the findings showed that most schools had no resource units, to service learners with special needs. To be specific, only four schools had resource units. Schools that lack resource units also lack relevant materials for use by learners with special education needs. Charrema (1990) in Zimbabwe found similar results that some mainstream schools, had no resource units to assist learners with special needs enrolled in the schools. Without resource units, where specific children with special needs stock learning aids for use, it would is a challenge for teachers to make meaningful contribution to the learners’ education. As such, schools that do not have resource units to assist learners with special needs hardly have the capacity to help children, in their need areas. The rights based model, necessitate entitlement of every child to education, together with a systematic approach to identifying and removing the barriers and bottlenecks that impedes access (UNICEF, 2012). In mainstream schools, barriers and bottlenecks that impede access to quality education are lack of resource units with adequate facilities to cater for children with diverse learning needs. The implication is schools that do not have resource units do not meet inclusive standards and do not offer quality education to learners with
diverse needs. In other words, schools that do not have resource units, are more of dumping educational sites for learners with special needs, as such learners do not benefit from the existing education system.

In addition, the findings of the study showed that the majority of ECD teachers did not have confidence to operate in inclusive ECD classes. One of the major factors for teachers to lack confidence in inclusive settings was lack of adequate skills and knowledge about inclusivity. According to OECD, (2005) teacher quality plays a decisive role in developing the confidence of teachers. When teachers are aware of their existing shortcomings normally, they do not feel the confidence to work with certain groups of learners. The implication is effective teacher education brings about teacher confidence in inclusive classes. OECD (2013) concludes that teacher training has major implications to teacher performance in inclusive education classes. Inclusive ECD teachers lacking confidence have ripple effects on their classes, as they are likely to produce learners that also do not display confidence.

Given that, young learners are good imitators of the adult behaviours, if they have teachers who are disorganised they will also be like that. The government of New Zealand (2009–2010), notes that teachers’ confidence play a decisive role in their ability to handle learners in inclusive ECD classes. According to the bottom-up approach, discretion of agents is the underlying premises, of any policy implementation process, because those that implement the programme are actually crucial for its success (Elder, 2011). The implication is that teacher’s expertise is important to bring about the confidence to operate in inclusive classes. In the current study, mechanisms are in place to build the confidence of the teachers.

Furthermore, the findings showed that teachers lacked skills to identify, assess, and teach learners with special needs. It is critical that teachers possess these skills, because they are necessary for them to operate in inclusive classes (Epstein, 2004). Without the ability to identify learners with special education needs, it would be difficult for teachers to assist learners that deserve help. Similarly, without the ability to assess learners with special needs, it is difficult to assist such learners. However, in UK, Scotland, and Norway, teachers train to detect warning signs or symptoms of children with delaying delays as well as to handle issues of children’s special needs.
cases (Baird, 2001: NCSE, 2013). The implication is that, initial teacher training equips teachers with the capacity to identify those learners that need extra help. Given the role of schoolteachers in inclusive classes, and their services for children with special needs, identification and assessment of developmental challenges in young learners is very critical (Woodhead, 2014).

Furthermore, findings revealed that the majority of ECD teachers did not use individualised Education Plans for children with special education needs. As pointed in the literature review, individual work plans necessitate a one on one between the teacher and the learner (Holdsworth, 2013: DfES, 2001). An Education Work Plan necessitates feedback to the school administration and parents about the learning programme of the child. When class teachers do not have Individual Education Plan, it implies that the teachers do not follow the principle of differentiated curriculum. However, individual Education Plans ensure that ECD teachers are accountable for each learner with diverse learning needs (Woodhead, 2014). According to McTighe and Brown (2005), Education Work Plan ensures teachers focus on developing specific skills on the learner depending on the challenges that the learner has. At the same time, Education Work Plans ensures teachers are responsive to the unique needs of the individual learners. However, when inclusive ECD teachers do not develop Individual Work Plans, for individual learners with special education needs, it implies they are not incorporating assessment into instruction. The implication is that learners may not benefit from ECD programmes and they do not develop to their potential. The result that may have a negative implication to the entire education sector, as the aim of education is to see each learner develop to his or her potential regardless of learning challenges.

When ECD “A” and “B” teachers do not develop Education Work Plans, it means they do not employ individualised instruction. This is a challenge as it is evident that teachers do not attend to individual needs of learners. In any case, although teachers had said earlier on that they employ individualised teaching methods, with the evidence that they do not have the individual work plans for learners, it shows teachers do not attend to individual needs of learners. Without engaging special education needs learners it is difficult to figure out how teachers are improving children’s thinking skills and self-esteem (Waldfogel and Washbrook, 2011).
However, results of the current study clearly show teachers do little to care for the needs of individual learners.

Schoolers like Gadzikowski (2015), urge inclusive teachers to employ the principle of differentiation, where the teacher plans for the learners’ individual work. However, in the absence of Education work plans, it shows teachers do not value inclusivity. According to the Salamanca Conference, curricula should be adapted to learners’ needs and not the other way round. The Salamanca Statement should guide inclusive ECD teachers to provide curricula opportunities to vulnerable learners that match the operational level of each learner regardless of learning differences. However, as pointed by McTighe (2008), lack of teaching resources is a major obstacle that affects differentiated teaching.

From the findings, it emerged that ECD “A” and “B” teachers did not have initial teacher training to work in inclusive classes. Successful inclusive education classes require well-trained teachers who can work with learners with special education needs. Otherwise if teachers are not qualified enough; they were likely to compromise the quality of children’s development and education. Jimerson and Hansen (2006) point that appropriate teacher training is vital for teachers if they should understand children with special education needs’ behaviours. Without initial teacher training on special education needs, it is very difficult for teachers to deliver meaningful lessons. In the same way, Drame and Kamphoff (2014) notes that successfully, effective teacher training is necessary for teachers to adapt instructional materials to the needs of individual learners. Without specialist teacher training, on how to handle learners with special education needs, teachers were unlikely to deliver effective lessons. Regardless of situations in ECD learning environments, well-trained teachers can provide a learning environment where every child can learn, develop, and thrive in a holistic manner (Drame and Kamphoff, 2014).
6.7 Treatment of learners with special education needs

The findings show that teachers lack knowledge to implement inclusive ECD “A” and “B” programmes. Some school heads and teachers corroborate with teachers to deny enrolling ECD “A” and “B” children. The behaviour shows that school communities have negative attitudes towards children with special education needs. As provided for in the Salamanca Statement, school heads have a special responsibility of promoting positive attitudes throughout the school community (UNESCO, 1990). The present study shows that teachers were not comfortable to have children with special education needs in mainstream classes, especially the deaf and dumb. It was clear that teachers were discriminating learners on condition of vulnerability. Unlike the findings of this study, Tindall, Whitney, MacDonald, Carrol, and Moody (2015), reported that in Ireland teachers are changing their attitudes towards children with special needs. However, Mpofu, Kasayira, Mhaka, Chireshe, and Maunganidze (2007), who found that inclusive class teachers preferred to work with certain groups of learners with special education needs, noted similar results. However, contrary to the above studies, the current study found that ECD teachers were quite fearful of working with learners with special education needs. What is clear in the studies is that teachers and schools were not comfortable to teach learners who are deaf and dumb. This is regardless of the fact that the Zimbabwe Education Policy directs teachers to understand all languages including sign language and braille writing (Zimbabwe National Language Policy, 1987). Without a follow-up on the Zimbabwe National Language Policy, minority groups of learners with special needs remain disadvantaged. Furthermore, despite a clearly tabulated account of the rights of children where there are repeated calls on non-discrimination as the cornerstone on the rights of education for all, empirical evidence still shows social institutions are segregating other groups of children. Thus, understanding of treatment of learners with special education needs by school communities is central to explaining how stakeholders engage and facilitate learning activities in inclusive settings.

It emerged from the study that teachers lacked experience to work in inclusive classes, which was the main challenge. In a study in Aulistralia, Kearns and Shevlin (2006) noted that experience in inclusive classes was a determining factor for
teachers to accommodate learners with special education needs. However, while the issue of experience is important, teachers attain that over time. Meanwhile, staff development programmes would improve teachers understanding of inclusive education programmes (Rolla et al., 2011).

It also emerged that parents had mixed feelings on whether to have their children enrolled in mainstreams classes or special schools. These mixed feeling shows the society still has some pockets of bad feelings towards children with special needs. A study by Aolabi (2014), in Botswana, found that parents have mixed feelings about educating children with special education needs in inclusive settings. While some parents see inclusive education as a positive educational movement for some they feel threatened by what society will say about them. The implication is parental beliefs about inclusive education is actual a determining factor for the support they provide to young children’s education in inclusive programmes. However, this study found out that parents have mixed feelings about whether it is good to send learners to ECD programmes. Thus, Bronfenbrenner’s theoretical framework, which highlights the important role of the microsystemic layer, is crucial to determine their support of children with special educational needs. In this regard, parents and school communities’ beliefs about the children either promote or hinder their schooling (Bronfenbrenner, 2008). However, regardless of the socio-economic or cultural status of parents whose children have special education needs, it is evident that they see education as a critical factor to improve growth, and development of their children.

6.8 Adequacy of infrastructure for ECD “A” and “B” primary schools

Infrastructure plays a critical role in establishing a student friendly environment, particularly in inclusive classrooms. According to Gallagher, Clifford, and Richard (2000), infrastructure enforces standards, and supports quality and accountability of all the activities that takes place. Without proper infrastructure ECD, institutions cannot provide maximum developmental and educational curriculum to the children (Azzi-Lessing, 2009).
The data showed that primary schools do not have adequate infrastructure that supports learners with special education needs. Without appropriate infrastructure, schools may not be in a position to offer inclusive early childhood programmes. Vulnerable children in mainstream schools need additional provision and support to benefit socially, psychologically and educationally.

DoE (2012) also reports that ECD centres in South Africa lack infrastructure to support growth and development of learners. Shortages of infrastructure: classrooms, playgrounds learning equipment and learning materials, affect growth, development, and learning of learners with special education needs. Most inclusive ECD facilities function without basic infrastructure and the situation is detrimental to children’s growth, development, and health. Outdoor play centres for example, assist learners to develop gross motor muscles, fine motor skills, and socialisation skills. Infrastructure determines the quality of care for ECD learners, where the foundation of basic principles of learning is provide. However, most ECD centres in Chiredzi were failing to provide learning environments that benefit children with diverse learning needs, because of lack of infrastructure. Similar situations concur with what Hlupo, Kufakunesu, Denhere, Chinyoka and Ganga (2013), in Mwenezi, observed where the authors found that schools attaching ECD “A” and “B” classes lacked proper infrastructure to promote growth, development and quality early stimulation of children with special needs. Similar findings by Mukhopadhyay, Nanty, and Okechukwu (2012) in Botswana, also found that ECD centres did not have adequate infrastructure. On the overall, the findings in the above studies seem to confirm that in developing countries ECD institutions lack appropriate accommodation, that support learners with special education needs.

It also emerged that, schools do not have adequate and child friendly learning materials to improve early stimulation programmes for children with special education needs. The researcher found that while most ECD classes had quite a large amount of in-door learning materials, they lacked quality to develop the needed skills. The quality of the physical space, teaching and learning materials in ECD centres motivate learners to interact with the materials. However, in centres where infrastructures are not adequate or responsive to the needs of learners, children would not develop to their full potential (NEER, 2007: DfES, 2001).
In addition, the study found out children with special education needs lack learning devices. In most schools, classrooms, and toilets did not have ramps to service learners with physical disabilities. In a study in Botswana, Mukhopadhyay, Nanty, and Okechukwu, (2012), found out children with special education needs, lack assistive learning devices. Charema, (2005), in a study in Zimbabwe also noted that inadequate facilities and lack of relevant assistive devices was a major obstacle to the implementation of inclusive education in developing countries. Given that the findings are identical to those in earlier studies, the implication is stakeholders have not made meaningful efforts to improve learning outcomes of learners with special education needs. Notwithstanding, the educational rights of learners with special education needs is not something that school authorities are seriously thinking of. Without assistive devices, especially at an early age, it is hard to believe that the young learners are accessing quality education (Weeks and Erradu, 2013).

In addition, the researcher found that ECD centres attached to primary schools do not have adequate classrooms in these primary schools that have attached ECD classes. In some cases, learners were doing hot sitting, while other situations rented church buildings to accommodate ECD classes. Hlupo et al., (2013), in Mwenezi, also found out that ECD children share classrooms while in some schools they are doing hot sitting. This has some negative implication to the development and learning of young children, particularly those with special needs who might be having challenges to walk from one learning place to another. When ECD “A” and “B” learners do not have classrooms, it influences their learning as teachers are likely not organise learning centres that effect transfer of learning (NCSE, 2013). The rights-based approach, stipulates that schools should ensure quality education is available for all children by putting in place positive measures to allow children with special education needs opportunities to benefit from it (UNESCO, 1990).

It is clear ECD “A” and “B” learners with special education needs experience barriers since schools have not adapted buildings and learning materials to the needs of all children. However, what is in schools is contrary to the Salamanca Statement, which declared that curricula should be adapted to meet children’s needs and not vice-versa. According to the Salamanca Statement, schools should provide curricula opportunities that match the operational level of each child. Thus, teachers are
required to introduce differentiated curricula to enhance individual educational growth and development (Western Cape Government, 2013). Hence, such children are not benefiting from inclusive classes/schools experiences.

6.9 Strategies Adopted by ECD Teachers and Stakeholders to Assist ECDSEN learners

6.9.1 Instructional strategies

The findings show that teachers adopted a variety of teaching strategies that they know accommodate learners with special education needs. Schools employ a range of teaching methods that are useful in inclusive classrooms. However, the good practice that the current researcher found was the employment of those methods that allow teachers to employ multi-senses, which stress on use of multiple senses stressing on; hearing, and physical touch or activity yet offering opportunities for active participation. Weeks and Errandu (2013) also found that they are specific methods that are appropriate for use in inclusive classes to benefit children with special education needs like individualised teaching methods. However, in the current study, teachers indicated they use the play way method more often. While the play way method has its advantages of embracing the natural way young learners develop and learn, the method may have some disadvantages in large inclusive classes as teachers will not have the opportunity to attend to individual needs of learners. As noted by Stainback, Stainback and Stefanich (1996), if teacher should support children with special needs in mainstream schools, the ways in which instruction is delivered need to be flexible to respond to the individual needs of learners. According to the rights-based approach, inclusion does not disregard the fact that learners are individuals who need specific methods. Hence, over relying on the play-way method disadvantage some learners with special education needs, who might require specific assistance to enable them to learn and develop the needed skills (Alur and Bach, 2009).

The study also found that schools use child-centred methods of storytelling and use of games in inclusive ECD classes. Gafu and Badea (2011) and Kizlik (2015) support the use of the child-centred methods such as story-teaching methods and
games in inclusive ECD classes, as young learners naturally enjoy listening to stories and play games. Such teaching methods develop children holistically: listening, vocabulary, communication skills, creativity, concentration and physical skills that are critical to the development of young learners. However, if storytelling and games have to be effective, teachers need to develop skills of designing different learning activities that support individual learners. As pointed by Gafu et al., (2011), storytelling as a teaching method should allow individual learners to reach a higher order of thinking. However, using games and story-telling methods in itself is not sufficient to improve the quality of learning experience available to children with special needs, but rather supporting learners as individuals who require specific support. Thus in large classes, the story telling as a teaching method requires close monitoring which may not be possible where there are no assistant teachers.

It also emerged that teachers said they rarely employ the individualised instruction. The concept of individualised method embraces differentiation curriculum, which is fundamental in providing effective support to children with special education needs in mainstream classes. If teachers differentiated their curriculum, they would be in a position to employ various strategies to support learners with diverse learning abilities. Differentiation teaching methods imply teachers rethink about teaching methods that support each learner or a group of learners in inclusive classes. Although Gadzikowski (2013) see the use of the individualised method as a more appropriate method necessary in inclusive classes ensuring that learners with special needs benefit from what they learn, the study found that the method was the least used in schools. It was clear given the large classes; teachers could not employ the method, as they could not support individual learners in classes where they had not assistant teachers. This is regardless of the fact that the method allows for independent thinking, and development of confident learners, allowing independent thinking. However, based on the rights based approach, Article 23, of the CRC, addresses the right of children with special needs, as needing assistance to ensure that they access education in a manner that promotes their social inclusion (UNICEF, 2011). The implication is education should implement individualised teaching methods in inclusive classes to assist groups of learners to develop according to their ability. However, in situations where teachers rarely employ
individualised teaching methods, it is clear they lack commitment to support growth and development of children with special education needs (Moloney, 2011).

It emerged in the findings of the study that teachers employ a variety of teaching methods, which support learners with special education needs. One such method is collaborative teaching, which allow groups of teachers to work with each other. In employing the method, learners learn in small, but manageable groups regardless of the differences in learning abilities. Findings specifically show that schoolteachers employ peer/class teaching and consultancy as the major collaboration methods. According to Young & Knestriic (2013), collaborative teaching requires mutual goals voluntary participation and shared resources. However, in the current study, few schools had no of those requirements to employ collaborative teaching and learning.

Schools do not have qualified personnel for inclusive education; neither do the teachers show any enthusiasm of improving their understanding of inclusive education. The implication, is although schools engaged in collaboration teaching methods, the model was unlikely to achieve inclusive education success given that schools lacked critical resources in the form of human and teaching and learning resources that are necessary to assisting learners with special education needs. Furthermore, large class sizes also negatively effective use of collaborative teaching methods. For instance, use of group work requires space, in which cases classrooms do not have, as learners would want to consult each other. Hence, in schools/classes which have large teacher-pupil ratios collaborative methods would not be the most appropriate. However, in the case of the schools where the study was conducted teachers lacked the skills to work with learners with special needs, which even make the employability of collaborative method very questionable.

It also emerged from the study that teachers employ a variety of teaching techniques in inclusive ECD classes depending on what they want to achieve. It is clear teachers employ holistic methods that develop independent thinkers. One such technique teachers employ is the question and answer. This technique is appropriate in inclusive classes because it allows improves concentration in ECD learners. According to NAEYC (2009), probing and posing questions motivates learners, and allows them to exercise a sense of success. As noted by Westwood (2003),
successful strategies in inclusive classes are those that provide learners maximum opportunities to learn. Therefore, it is not coincident that teachers engage learners with questions, which provoke their thinking and raise other lesson dimensions like debates and discussion. In the reality situation where ECD “A” and “B” had large school enrolment question and answer technique appear to be one of those strategies that would keep the learners busy but at the same time concentrating.

However, success of such a strategy depends on close assessment and feedback by teachers, hindered by the issue of large class sizes and inadequate learning materials. Agran, Alper and Wehmeyer (2002) observe that larger class sizes are detrimental to proper teaching of inclusive classes as some learners are likely not to receive adequate attention. Successful inclusive education teaching depends on the amount of time teachers interact with each learner, but without losing focus of the whole class teaching. Given that therefore, the question and answer technique provide teachers with opportunities to interact with learners.

In addition, the findings also show teachers employ the drill and practice techniques. Young children learn best when they imitate instructions Therefore teachers have to have a perfect way of ensuring that they demonstrate specific skills that allow learners to develop particular skills. According to Westwood (2003), inclusive education lessons require a lot of guided practice. Learners require opportunities to practice to master these skills. NAEYC (2009) points out that modelling and correcting techniques are encouraged because they shape how learners display a particular behaviour, pronounce words or shaping of letters. However, success of such teaching techniques depends on a number of factors, which include the ability of teachers to monitor students learning and to provide accurate feedback to learners. According to the bottom-up approach on programme, success of teaching instructions in inclusive classes depends on commitment and consensus on inclusion: made possible through involvement in decision-making, collaboration, and communication of the stakeholders (Westwood, 2003).

Schools engage in continuous meetings on how to implement inclusive education. However, there were no indicators showing that street level programme implementers showing they held prior meetings on how they were to establish
inclusive ECD classes. Such meetings would have been critical for school administrators to design timetables and putting in place infrastructure that support inclusive teaching instructions (Jenkin et al., 2006). In the case of the present study, teachers, school heads, and the District Education Team indicated they had no prior meetings on implementation of inclusive education at ECD level. Thus, while teachers and school heads have the commitment to implement inclusive strategies as shown by their willingness to make changes and sharing of experiences, evidence show they lack skills, which are critical in ensuring all learners are benefiting.

6.9.2 Adaptation of teaching and learning materials

The findings were that most schools do not have suitable learning and teaching materials. This was a serious barrier to learning and development of special needs education learners who were had difficulties in accessing learning materials. Hence, schools were adapting these teaching and learning methods to suit learners with special education needs. Modification and adaptations of learning materials is an intervention support for students with special needs to be part of the entire school learning processes such as extra-curricular activities, including the everyday learning and teaching procedures (Phillipson, 2010).

The Salamanca Statement of 1994, urged schools to provide curricula modifications that match operational level of each child, with different abilities and interests (UNESCO, 1990). Modification of teaching and learning materials implies teachers and school administration agree on particular curriculum changes. It also implies that children with special educational needs are entitled to receive additional instructional support within the context of regular curriculum and not to have a different curriculum. The current researcher noted that, teachers were making efforts to adjust their teaching timetables and modified some learning materials making them accessible to learners so that they develop to their full potential. However, adjustments of teaching and learning materials was limited to a few learning materials. The findings show there is little in schools regarding modification and adaption of teaching and learning materials so that every child can use them. Similar studies by Phillipson (2010), in China, also found out that responsible authorities
have done little to modify teaching and learning materials (infrastructure) so that it could service learners with special education needs. In a study by Mukhopadhyay et al. (2012) in Botswana, schools also lacked infrastructure and other learning resources to improve the learning of children with special needs. The current study shows that, while teachers make efforts to adapt curriculum: teaching methods and learning resources, there is an obstacle of large class sizes, which makes it impossible to differentiate teaching methods to benefit the learners. Nevertheless, the current study noted that schools have not modified the existing classrooms and toilets to accommodate children with special needs although schools with resource units have modified facilities. While schools have existing policies regarding access, equity and quality to early childhood stimulation programmes, evidence show that children do not have equal opportunities to the educational facilities (Britto, et al., 2011; Moore, McDonald, and McHugh-Dillon, 2014).

6.9.3 Assessment of learners by teachers

Teachers always choose the best assessment tools that provide reliable learning behaviour for children in ECD classes. Assessment tools help teachers to bridge the gap between learners and to grade them according to their capabilities.

It emerged from the findings ECD “A” and “B” institutions use a national syllabus, which guides teachers on the content and the general methods to teach particular age groups. However, assessment based on the national syllabus had challenges as evidence showed that, ECD “A” and “B” teachers have problems of interpreting the national ECD syllabus. With such challenges, it is evident the majority of learners with special education needs may not be benefiting from the assessment. In Chile, teachers use the national curriculum that guides them on what skills to develop in learners, the methods to employ and the content to teach to the young learners in inclusive classes (Ministrio de Educacion de Chile, 2011). While there are similarities on the use of the national syllabus in ECD classes, the current study further shows that teachers utilise other teaching methods such as Portfolios, observations and to a less extent content recall.
It is clear that teachers use on-going (formative) assessment to keep track of the developmental changes that take place on each child in inclusive classes. Formative assessment is vital to ECD learners because it provides personalised learning opportunities, especially for learners with unique needs that require individualised attention (Price, Pierson and Light, 2015). However, the researcher notes that although teachers employ formative assessment, it lacks depth (document analysis). As noted by Epstein, Schweinhart, DeBruin-Parecki, and Robin, (2004), the choice of assessment strategy influenced by many variables such as time, money, and staff.

The use of observations and portfolios provides holistic approaches towards identification of the child’s learning needs. However, formative assessment requires more time and resources to assess the learning gaps that exist in individual children, and subsequently allowing individual learners to improve develop the skills as identified through assessment. Notwithstanding, formative and summative assessments should be used for teachers to provide a holistic picture of each learner in inclusive settings because they complement each other, so they provide a thorough evaluation of children across their cognitive, emotional, social, and biological strengths and needs (UNESCO 2009; Epstein, 2004). However, the bottom up approach clearly explains that teachers are the most critical element in the programme implementation. In the current study, teachers lack training on children with special needs.

Therefore, there is a possibility that they do not have necessary knowledge of what to assess about children with special education needs. At ECD level, assessment may require, both formal and informal means, for programme evaluation purposes, yet it should not ignore domains (Social, emotional, language, physical, and creativity). The implication is teachers should be systematic to collect an array of developmental indicators such as, systematic observations during peer play, sessions. They need recording about children’s socio-emotional development, at the same time understanding the child’s fine-motor and creative development by collecting their artistic products for placements in portfolios, and understanding the child’s language development through recording oral presentations (National Council for Curriculum and Assessment 2009). Thus, the Bottom-up approach fit well in the study as it provides the basis for teacher empowerment through adequate training, so that the teacher can be critical in assessing learners’ development.
6.10 Support and monitoring provided to teachers by education officials and other support service providers

According to Underwood (2015), support and monitoring are critical factors in achieving quality inclusive ECD “A” and “B” programmes. Without support from educational officials, non-governmental organisations, the business community, the government and parents to assist ECD “A” and “B” teachers to handle inclusive classes, children will continue suffer from physical and psychological exclusion from social services providers (WHO & World Bank, 2011; Underwood 2015).

The results show that school heads support teachers to deliver in inclusive classes/schools. Specifically these school heads carry out at least three supervision visits to monitor and guide teachers to organise meaningful lessons. Furthermore, school heads and the School Finance Committees budget for all ECD requirements, including staff development workshops, and learning resources.

School heads support their classroom teachers in selecting and implementing formative (classroom or classroom-based) assessments (Day, et al., 2009). To execute their tasks, school heads ensure they have knowledge about how the young children learn in inclusive ECD classes. According to Chapman, et al., (2011) school heads should be knowledgeable about assessment techniques teachers employ to assess learners with special needs. Furthermore, Ofsted (2006), state that in America, school heads systematically make observations of classrooms, assessing the quality of teaching and the social context, using their own available measure (Chapman, et al., 2011).

According to Alister, Munthali, Peter, Mvula and Silo (2014) where there is informed and close monitoring of teachers; school heads, and teachers learn from each other, and this can lead to development of innovative ideas, which can lead to improved teaching methods that assist all children to develop to their full potential. However, for this study, the researcher found that schools heads lacked knowledge about what to assess in inclusive ECD “A” and “B” classes and teachers were sceptical about classes assessments. Similar observation were noted by Dyson et al., (2004) who
noted that world-over the major challenge is that school heads do not have knowledge about inclusive education issues.

Regardless of the fact that school heads should have a straightforward vision about the nature of early stimulation programmes, in relationship to national goals, indicators were that, they lack the vision. It is possible school heads do not provide informative guidance to ECD “A” and “B” classroom teachers. The implication is school heads as the nerve centre of the implementation process should be knowledgeable, where possible trained to meet clear expectations of administering assessments at ECD level. There is no doubt that, teachers may improve their lesson delivery services if knowledgeable supervisors carefully supervise those (Dyson et al., 2004). From the standpoint of the current researcher, school heads do not have reliable checks and monitoring in place to ensure adherence to approved procedures.

The current study found that the District Education Team support inclusive education programmes in schools. The District Education Team encourages in-service workshops for school heads and/or teachers, based on the professional gaps that they would have found through school based reports. According to Khan (2012), the District Education Team should ensure availability of professional development programmes to support teachers and school heads (programme personnel in interpreting and using information from assessments and in selecting the appropriate classroom-based or curriculum-based assessment to guide their own continual improvement. Continuous professional development programmes are based on improved training and education of teachers to learn new skills that help them adapt to new challenges (OECD, 2013). Professional development programmes targeting teachers and schools administrators are in place in China (Holdsworth, 2013), USA (Ofsted, 2006) and in Zimbabwe (Mpofu, 2004) to improve their understanding of inclusive education.

The researcher also found that school heads in well-resourced schools, with knowledgeable resource unit teachers support other schools in the district where they offered in-service training to other teachers to improve their catering of children with special education needs ECD “A” and “B” level. Similarly, in Germany
(Winterman and Sapona. 2002), found that teachers from special schools spend time in mainstream schools, undertaking consultancy work with class teachers, and sometimes directly supporting children with special education needs.

Furthermore, the study findings show that schools engage in exchange programmes where teachers visit other schools to learn from fellow teachers known to implement inclusive education better. The idea of sourcing knowledge from schools that are doing well in implementing inclusive education is good, in situations where teachers are implementing a new programme. However, even if teachers visit other schools to learner from those understanding inclusive education, it does not necessarily imply that they will translate the information in the same manner to their classes or schools. The implication is teachers would still find it difficult to implement inclusive education programmes in their schools even after observing lessons in these schools known to be doing well (Regio Children, 2008). However, success of continuous professional development programmes depends on a number of issues, ranging from availability of teaching and learning resources to implement knowledge shared in staff development. In this study, teachers, and school heads have no professional qualifications on children with special needs. As provide in the Salamanca Statement (1994), local administrators and school heads should have necessary authority and adequate training to develop skills to support and monitor Programmes for children with special education needs. While the findings show that, there are specific staff development workshops that are intended to improve their understanding of ECD and special education needs, findings suggest that school heads are not benefiting from the workshops. However, the implication of the challenges shows the quality of continuous professional development programmes from the district to those held in schools is not promoting effective inclusive education (Alur and Bach 2009).

The District Education Team compiled reports that assist the government to evaluate the ECD programme. Their reports provided the basis for informed decisions, seen as feedback to stakeholders interested in inclusive ECD programme. However, resources at district level are not adequate to carryout meaningful supervision and monitoring programmes. According to Ervin and Schaughency cited by Feuerborn and Tyre, (2012), successful monitoring requires that the District Education Team
make frequent visits to schools to restructure the existing school practices. Furthermore, the findings show that the government does not allocate any financial incentives towards improvement of ECD departments in schools. However, all school finance committees are now allocating funds to support ECD “A” and “B” needs. With the funding ECD, “A” and “B” departments in schools acquire learning resources, and for continuous professional development workshops.

The researcher employed the bottom-up theoretical framework to guide this study. However, considering the role of the District Education Team, utilising the coalition framework (which combines both the top-up and bottom approaches in programme implementation (Sabatier, 2005). While it is important that policies are established from the top, these policies also need financial, transport and qualified human support, monitor the programmes. However, in the current study school heads, teachers, and parents are more involved in programme implementation.

6.11 Support from other government ministries

It emerges from the study that other government ministries support ECD centres and teachers in a variety of ways. The Ministry of Local Government and national housing for instances, supports ECD programmes managing levies collected from ECD “A” and “B” learners. Of the money collected, 60% of the money goes towards construction of the ECD infrastructure (classroom construction and outdoor play centre). Although that is what the participant provided in the interview, the current researcher notes that on the ground the Ministry was not doing specifically for learners with special education needs. For instance, there were no new ECD resource unit centres in any of the schools (observation). In the Scandinavians countries of (Sweden, Denmark, and Finland), local government authorities directly support all children with special needs enrolled in pre-schools, by paying for their levies being (Klibthong, Fridania, Ikegamia and Agbenyega, 2014). The study found that in Zimbabwe the Ministry of Local Government is not providing any specific service towards children with special education needs. The probability is that without modified classrooms and outdoor play centres, the situation affect not only development of skills but also learner motivation, especially those with special education needs who need more play time.
Furthermore, the study found out that the Ministry of Health and Child Care support ECD teachers by way of training them to have an understanding of primary health care. The Ministry of Health and Child Care also checks on whether the ECD centres are meeting health standards as expected in the health guidelines. Regardless of those clear guidelines, The Ministry is only involved in some sporadic supervision of health facilities in ECD “A” and “B” centres. The Ministry of Health and Child does not fulfil some of its obligations. This has some implications, to teachers and ECD learners, as ECD centres require regular check-ups to ensure learners are safe, secure and health in learning environments (UNICEF, 1986).

6.12 Advocating for the rights of children

Study findings show that schools are collaborating with non-governmental organisations, parents, government ministries, to promote understanding of children’s rights issues. Through networking, teachers are empowered with skills to work in inclusive classes, where they can assist learners with special education needs. The Ministry of Health and Child Welfare in corroboration with non-governmental organisations assist to train members of the Child protection committees to protect the rights of children with special education need.

The Ministry of Home Affairs officials collaborate with schools to provide psychosocial support to learners and families of learners with special education needs. According to the new Constitution (2013), the state has a commitment to defend the rights of children through various forms of assistance, which include proper care, and nutrition and special protection from all forms neglect, abuse, cruelty, exploitation and other conditions, which affect their development. Thus, schools have formation of child protection committees in schools seeks to fulfil the state obligation to teach the rights and duties of citizenship. Furthermore, creation of child protection committees in schools is in line with the demands of the Convention on the Rights of the Child (CRC), whose major obligation is to protect children from all forms of physical, or mental violence, injury and abuse, neglect or neglect treatment, maltreatment and exploitation, including sexual abuse (UN, 1989). The current researcher noted that while child protection committees in schools protect learners from forms of abuse, schools lacked policies. This is despite child friendly
schools policy urges schools to formulate policies and guidelines for the prevention of violence against children in schools (Government of Zimbabwe, 2007).

It emerged that school communities also have child protection committees, whose purpose is to sensitise others on the rights of children. Teachers and parents are leaders of child protection committees, consulting each other whenever a parent or neighbours abuse a child. However, regardless of the existence of child protection committees in the schools few cases of child abuse reported to responsible authorities for fear of victimisation.

Sensitising parents is a noble idea to necessitate progressive thinking amongst community members. It also ushers new ways of thinking about the plight of children with special education needs (Moore et al., 2014). In a global village were respect of individual rights is now the norm, sensitisation of communities enables them to appreciate that all children are the same. In studies held in Latin America, children who participated in child protection groups valued their own rights as well as fighting for other children’s rights (Vagas and Santibanez, 2010). By directly involving peers to change community’s attitudes about vulnerabilities, the young learners are equipped with responsibility virtues. Most importantly, sensitisation programs enable young children with special needs to participate in their (child’s) rights and to associate with those that stand for their rights when they are still young. Such association is critical for building children’s self-esteem, as they will learn to appreciate that the society has many people who are like them who have also made it in life (UNESCO, 2014).

The study also revealed that education stakeholders engage in sensitisation programmes in school communities on children’s rights to access social services. Awareness campaigns that target learners and their families on civic education are good in that they assist learners to claim responsibilities from the government as a duty bearer. In USA, the central government carries out awareness programmes on inclusive education through advertisements (National Technical Assistance Centre (NECTA) 2011). Similarly, in the Philippines the government through the Ministry of education denounces and support advocacy campaigns and capability building activities on the prevention of child abuse, violence, exploitation, and discrimination,
bullying and other forms of abuse (Department of Education) (DepEd Order No40, s. (2012).

Furthermore, the findings reveal that school communities are also sensitised to identify and assess early signs of special education needs cases in young learners. However, successes of sensitisation programmes depend on the amount of incentives that the government offers to families of learners of special needs. An amount of training on identification of learners with special needs is necessary, yet participants have noted that ministries do not have enough funding. In situations where schools communities are not, incentivised awareness programmes normally fail. For instance, where families are not receiving unconditional cash transfers, they are likely not to support inclusive programmes.

6.13 Summary

The chapter discussed the research findings of the study. The major findings of the study were that there are Health and Nutrition; Social Protection Programmes that support learners with special needs. Specifically the major health and nutrition programmes are, immunisation, psychosocial, and supplementary feeding programmes. The study also revealed that, in the education sector, the major programmes is adult education programme and pre-school programmes. Furthermore, the study found out that, in the Child Protection Sector, the non-governmental organisations assist learners and parents of children with special education needs by offering supplementary feeding programmes. The study revealed that, the government does not have Cash Transfers for parents and children with special needs regardless of that being part of the national policy.

The findings of the study show that the government and other stakeholders developed different kinds of strategies to support children with special needs. Examples of the strategies include advocacy for children’s rights, sensitisation of communities on the importance of inclusive education and modification of curriculum to suit the needs of children with special education needs. These strategies embrace the major theoretical principles of the three theoretical frameworks that guided this study. For instance, through the Ecological Systems Theory, the researcher found
out that the ecosystemic layers put in place legal frameworks to support growth, development, and learning of young children with special education needs. The government has put in place legal frameworks for educational institutions not to deny enrolling children with special education needs. Different ecosystemic layers provide support to teachers and to learners with special education needs, but there is need to access those vulnerable learners in the hard to reach communities. The findings further reveal that, educational institutions are complying with the regulations although in the majority of schools learning resources and infrastructure are yet to accommodate children with diverse needs. In addition, the study shows that schools are complying with the Rights Based Model, which directs all educational institutions to enrol all children in mainstream classes/schools including those with special needs.

Furthermore, the study revealed that there are many supervisory and monitoring mechanisms in place to support teachers to cater for children with special needs. Such support comes from various stakeholders, ranging from school heads, the District Education Team, and non-governmental organisation. However, despite the support, the study showed that many learners that require support are yet to access it.

The next chapter provides a summary of the study, the major conclusions that were drawn from the study as well as some recommendations that could be adopted by policy-maker, government, education institutions and parents in an effort to address the problems facing implementation of inclusive education in ECD “A” and “B” (pre-school) programmes.
CHAPTER SEVEN

7. SUMMARY OF THE FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

7.1 Introduction

The chapter draws together the major elements, gaps, findings and lessons learnt from the study. The chapter is summarising data on findings on early childhood sector programmes, strategies used by early childhood stakeholders as well as support and monitoring mechanisms in place that are provided for teachers that are teaching to inclusive ECD “A” and “B” teachers. The chapter is also providing the recommendations of the study, based on the findings of the study. Finally the study presents a model that emanated from the gap that exists between the literature review and the findings.

7.2 Early childhood development sector programmes implemented in Zimbabwe to cater for learners with special needs

There are a number of health programmes initiated to support ECD children with special education needs. The department of Environment and Technical Services supervises and monitors health facilities in all educational institutions, following properly laid down procedures. However, schools do not have adequate and appropriate health facilities such as water and sanitation, with most of them not fenced to provide health, safety, and security to young learners. These finds show that primary schools attaching ECD classes are not child friendly environment as laid in Director’s Circular No 41 of 2006. Schools in rural areas have the worst health facilities as they do not have standard toilets, clean and safe water, and classrooms as directed by the child friendly environments policy. The rights based approach, stipulates that all children have the right to appropriate social facilities.

Furthermore, the study found that the Ministry of Health and Child Care carries out national immunisation programmes to vaccinate young children aged five years and below. However, the government does not have a legislation forcing parents to
immunise their children, and as a result, some parents because of culture deny immunisation opportunities to children risking child mortality. The Ecological systems theory fits well in this study because it points that attitudes, and ideologies of society have some impacts on children with special needs. The findings were that children with special education needs' opportunities to grow and develop to their potential are disadvantaged by culture and attitude of society. As a result, their development trajectory is affected.

However, there some pockets of good practices, in the health sector in schools. Findings show that some schools have health teachers trained by the Ministry of Health in collaboration with NGOs to promote Child friendly practices. Trained health teachers offer primary health services to vulnerable children. However, in the majority of schools health situations did not have First Aid kits, a situation that the researcher feels, schools may need to improve on.

The study further found that only 20% schools provide supplementary feeding to ECD children in attached primary school centres courtesy of Malilangwe Conservation Trust. In 80%, of the schools, there are no organisations providing learners with special needs with any nutritional supplementation. Each child had his/her parent providing snacks and eats for recess and lunch to ECD “A” and “B” learners. Most parents do not afford to provide additional food because of household poverty, and the situation affect enrolment of children with special education needs, as families hardly manages providing their children adequate meals. This is threatens children’s development naturally it affects their enrolment in ECD programmes.

Lack of provision of nutrition facilities in ECD programmes affects children’s attendance in schools that do not provide supplementary feeding; unlike in schools parents were providing snacks for learners. In schools where children had supplementary feeding, the study found that children were actively engaging in learning activities, unlike in schools where parents provided leftovers as children’s snacks.
In addition, the findings clearly show that the government is not providing specified social protection policies towards young children with special education needs. Malilangwe Conservation Trust, a non-governmental organisation provides supplementary feeding and hires medical doctors to assist children with special education needs in those schools they provide supplementary feeding to the learners. The organisation also pays medical fees for those children if referred to specialised hospitals.

The findings also show that the government was not providing Cash-Transfers to either children with special education needs or their families. In addition, ECD “A” and “B” learners with special education needs are not receiving tuition subsidies from the Basic Education Assistance Module (BEAM) unlike children in other classes across the education system. This has a major bearing on children with special needs’ enrolment in ECD “A” and “B” centres attached to primary schools. The implication is learners with special needs are discriminated, yet the rights based approach, stresses on equality of opportunities.

Furthermore, findings show that they local non-governmental organisations and government ministries provide psychosocial support specifically to abused and neglected children. To this effect, schools have selected the child protection committees, whose responsibilities include advocating for children’s rights and reporting child abuse to the District Child Protection Committee through their school channels. Furthermore, schools have trained teachers by non-governmental organisations work with learners with special needs to provide psychosocial support for the well-being of such learners. The researcher concludes that non-governmental organisations play a critical role in improving the psychosocial well-being of children with special needs.

The findings show that most ECD “A” and “B” teachers are qualified to teach the normal developing ECD learners but no one is qualified to teach in inclusive classes, nor qualified to teach children with special education needs. This has great implications on the quality of early stimulation support for learner with special needs resulting in learners dropping out or absenting themselves from inclusive classes. Thus, teacher quality plays a decisive role in inclusive education systems.
Furthermore, findings show that teachers, health personnel, and NGOs organise parent education programmes through home visits/ domiciliary visits. Specifically teachers educate parents on how to take care of children with special education, as well as on how as parents they can assist children with special education needs with homework and on preparation of learning materials. However, the findings show that teachers do not have Individual Education Plans for children with special education needs. This has some implications, as they do not share with parents how they can both work together to improve learners with special needs’ development of skills. It also implies that teachers do not differentiate their curriculum, which has implications to learners with special education needs.

The findings further show that teachers are not attend to children with special education needs that are not enrolled in ECD “A” and “B” centres attached to schools. This is regardless of the fact that there communities have disadvantaged children who have not enrolled in public pre-school centres attached to primary schools because of various challenges, like that of distance to and from school.

Furthermore, the findings reveal that schools do not have proper infrastructure to support ECD learners with special education needs in inclusive settings. In most schools, ECD “A” and “B” do not have classrooms while toilets were in deplorable conditions. The situation has critical implication to the health of learners with special needs who are already vulnerable because of their fragile age and biological conditions.

The study also found that schools had critical overcrowding, which compromised the quality of competencies of learners to develop in public early stimulation programmes. Overcrowding affects children with special needs as young learners naturally require spacious learning environments, which allow them opportunities to work independently. Furthermore, some learners might be experiencing respiratory challenges. It was difficult for teachers to organise learning activities for learners because of overcrowding classrooms. ECD departments in public pre-schools faced critical infrastructural challenges, which affected children’s holistic development. Furthermore, ECD “A” and “B” classrooms required modification to accommodate learners with physical difficulties.
In addition, the findings show that schools have inadequate outdoor mounted learning equipment. Out of 19 schools, only five (26%) had functional outdoor play equipment, while other schools had virtually nothing. From such schools that do not have outdoor play centres, it is clear learners cannot develop holistically; especially those with special needs who require opportunities to play on out-door play equipment to develop gross motor skills.

The current study shows that while schools have many indoor learning materials, these materials lacked quality to bring about genuine development in learners. The existing learning materials require modification to fit their use by the different learners with diverse learning needs. Modified indoor learning materials are important for challenging young learners develop critical and creative skills, as well as fine and gross motor skills, necessary for individual children’s development. While ECD departments need to have lots of learning materials for ECD “A” and “B” learners, it was important that they improve quality of development of the learners. Furthermore, the study found that school heads lack knowledge and skills to assist teachers implement inclusive programmes at ECD level, as they do not have training on learners with special education needs. Lack of training, influence the way teachers and schools heads relate to children with special education needs. Some school heads corroborate with teachers to deny learners with special needs places to enrol in ECD “A” and “B” classes. This is despite that they are custodian of inclusive education.

The study also found that teachers have mixed attitudes towards delivering lessons in learners that have children with special needs. Teachers pointed out that working with learners with special needs depend with the type of disability in the classes. The responses show that there are certain groups of learners with special education needs who are still segregated. Teachers and school heads who are custodians of every child enrolled in ECD programmes segregate vulnerable learners, solely because of their disability.

Furthermore, findings of the study show that parents have mixed feelings regarding implementation of inclusive education. Although they were pockets of parents that looked down upon inclusive education programmes, the majority of the parents
support inclusive education. The study finds that parents still require many sensitisation workshops to support inclusive education programmes.

7.3 Strategies adopted by ECD teachers and other stakeholders in delivery of ECD sector programmes to ensure inclusion of children with special needs

The study found that teachers adopted and adapted the curriculum to accommodate the needs of children with special. In addition, the researcher found that teachers predominantly use the lecture and question and answer methods to address the learning needs of learners with special needs. Thus, it is not professionally feasible for teachers to assist learners as needed, because classrooms lack learning space to organise learning activities that match the learning needs for individual’s learners. Furthermore, the study found that teachers deployed in Shangani dominated schools use ChiShona as a language of instruction. This is against the philosophical value on teaching young children, which stress use of the mother tongue and the language most understood by learners, as language of instruction. Furthermore, there is no ECD “A” and “B” teacher who understand sign and braille languages, implying that children with hearing and visual disabilities are not benefiting from what teachers deliver in ECD classes.

In addition to the above, that study shows that non-governmental organisations like Plan International Zimbabwe, F.A.C.T Zimbabwe, and Child-on-line engage in capacity-building projects for teachers and families of children with special education needs as well as students with special needs. Plan International Zimbabwe assists teachers to interpret the infant school syllabus (grade 1 to 3). There is also evidence that Plan International assists teachers to construct the outdoor play centre, in rural schools. However, the researcher felt that it was important if they could also teach ECD “A” and “B” teachers to interpret the syllabus as teachers might also be having difficulties interpreting the syllabus.

Furthermore, non-governmental organisations show that responses from non-governmental organisations seek to empower the girl child to enrol in early stimulation programmes. These findings show that non-governmental organisations
are involved in advocacy programmes so that communities change their negative attitudes on the most vulnerable children. It is clear, non-governmental organisations fight against discrimination of children with special education needs, and at the same time, they seek to help those learners to improve their access to social services.

The findings of the study show some non-governmental organisations are empowering communities through projects so that they could assist those children with special education needs. For instance, others claim they empower learners to demand their rights from duty bearers (government and other service providers). Other non-governmental organisations facilitate in-come generating projects that target children with special needs, such as the goat pass-on project and the garden project. Similarly, there are money-lending projects, to assist children with special needs by improving families’ livelihoods. Profits from empowerment projects were used to purchase assistive devices and pay for travelling expenses when children need medication. Furthermore, non-governmental organisations encourage communities to pull their resources together to support young children who are not able to walk to public school centres.

It again emerged from the study that teacher’s network at different levels to improve their understanding of inclusive education. For instance, teachers engage in peer reviewing on how they deliver lessons in inclusive education classes. Furthermore, the study shows that teachers visit other teachers in schools to learn from fellow teachers on how they deliver in inclusive education classes. The study found that teachers and non-governmental organisations work together with the later imparting skills to deliver in inclusive education classes. Networking was benefitting learners through improvement of teachers’ skills.

Furthermore, the findings of the study reveal that ECD “A” and “B” teachers, health personnel and NGOs personnel go on domiciliary or home visits where they visit families to educate parents about special education needs and inclusive education. As an intervention measure, home visits offer opportunities for teachers and health personnel to educate understand household poverty that impact on children with special needs. However, the major barriers are shortage of resources to visit families where learners with special needs come from.
7.4 Support and monitoring provided to teachers by education officials and other support services

The study found out that, that the government has a structure to monitor schoolteachers. At every school, an internal system supervises and monitors the way teacher deliver in inclusive classes. The school management team that comprise the school head, deputy head and the ECD TIC inspect, supervise, and monitors the implementation of the ECD programme. Maybe, the fact that monitoring and supervision is done at least 3 times per year is not thorough enough, especially when one considers that school management teams confess they lack knowledge about what is done in inclusive ECD “A” and “B” classes.

In addition, the study finds that the District Education Team supervises teachers to find out if they have the capacity to ability to work in inclusive ECD “A” and “B” classes as well as the capacity of schools to offer inclusive ECD programmes. Supervision of teachers by the District Education Team assists in the compilation of the evaluation of the national ECD programme. However, the District Education Team revealed that it does not have enough resources to reach all the schools.

It also emerged that parents are part of the school supervision team as they form part of the school development committees (SDCs). Apart from mobilising resources, for the implementation for the ECD “A” and “B” programme, the SDC is the bridge between the school and the community, in this case with regard to implementation of inclusive education. They also support learners with special education needs, by approving their bids during the schools’ financial year. However, there is need to improve the SDCs’ involvement in issues ECD curriculum implementation because, parents in FGDs disclosed that they are involved at the periphery level where they were only mobilise learning resources. For their effective involvement in ECD programmes, there must be more parent programmes to target educate them on ways to assist in the development of ECD learners with special needs. As it is, most students lacked parental supervision, especially for those in rural areas, as most of parents are not educated on what and how support development of young children. Supervising young children with special education needs is a critical assignment to parents because most of them have never been to pre-school classes and so do not
know what and how teachers deliver content at pre-school level. May be this is why they sometimes is a misunderstanding between teachers and parents on expectation of the ECD programme.

Moreover, the findings were that schools use the national ECD syllabus, which assist teachers to draw the content that they teach. Through use of the national ECD syllabus, teachers generally teach the same content across schools. With lack of textbooks, availability of the national syllabus is important for teachers. However, some school heads felt the national syllabus does not fully address concerns for learners with special education needs. Thus, there is need to revisit the content in the national ECD syllabus to see whether it addresses concerns of children with special education needs. If it does not meet the needs of children with special needs, then there might be need to revisit the national ECD syllabus.

Furthermore, findings show that the District Education Team promote understanding of inclusive education at ECD level by engaging teachers in continuous professional development programmes, which are done at District level. Such a programme shows that the district education team is making deliberate efforts to improve the quality of teachers to working in inclusive ECD “A” and “B” classes. However, regardless of such efforts, teachers claim they do not benefit much from the intended workshops, as their schools lack resources to implement what they learn in workshops.

Similarly, schools are also holding continuous professional development programmes for teachers, so that they can improve their understanding of how to handle learners with special education needs. However, the findings reveal, schools lack personnel to mount successful continuous professional development programmes. Only those schools with resource units have the personnel capable of presenting successful continuous professional development programmes.

It also emerged from the study that, teachers in well-resourced resourced schools resource units, with qualified teachers provide consultancy services on how to handle children with special needs. However, the researcher noted that with only four schools that had resource units, it was difficult to provide consultancy services
to all schools that required assistance. Therefore, schools that do not have resource units may continue to have challenges about handling of learners with special needs. Without resource units/centres at schools, it is difficult to establish effective inclusive education that supports learners with special education needs.

The results of the study further show that the government supports schools and learners with special education needs through the District Education Team. Specifically, the District Education Team plans for continuous professional development programmes after identifying training gaps among teachers to improve delivery skills. The District Education Supports also supports teachers by ensuring that they have the approved ECD national syllabus. However, the District Education Team’s efforts to assist teachers face challenges such as limitation of resources: such as transport (T&SSs), funding for resource persons and shortages of qualified teachers.

The findings were that non-governmental organisations and international agencies make efforts to empower teachers and parents so that they have skills to cater for children with special education needs. They train school health teachers that work with children in schools to ensure these learners in child friendly environments. Furthermore, findings show that non-governmental organisations train para-professional teachers, equipping them with skills to working in inclusive settings. The findings also show that, UNICEF trained para-professional teachers. Furthermore, UNICEF provided teachers with learning kits for ECD “A” and “B” classes, a donation that might have motivated teachers to work in inclusive classes, given that ECD classes lacked learning materials. In addition, UNICEF also assists schools through the School Improvement Grants (SIG) where 10% goes towards improvements for programmes for children with special education needs. Non-governmental organisations and international agencies are mobilising resources to motivate teachers to work in inclusive classes.

The findings show parents are mobilising teaching and learning resources for ECD “A” and “B” classes. In rural schools for instance, parents provide labour when they construct the outdoor play centre. In most schools, the outdoor play equipment was not responsive to the needs of learners with special needs.
Furthermore, the findings of the study show that, school heads support teachers by way of making sure that resources are available for teachers to use in inclusive education classes. They mobilise funds and negotiate with the school finance committee to budget for the ECD “A” and “B” department. This enables teachers to carry out meaningful lessons.

7.5 Justification of methodology

This study employed a mixed methods approach to inquiry where the researcher combines both the quantitative and qualitative approaches to assess the way stakeholders cater for children with special education needs in early childhood development programmes. The fundamental principle of mixed methods is the use of multiple kinds of data, collected with different strategies and methods in ways that reflect complementary strengths and non-overlapping weaknesses (Mertens, 2010; Springer, 2010; Creswell, 2009). The mixed method approach provided insight to the researcher, which may not have been possible if the researcher had employed only one method (e.g. qualitative or quantitative) (Johnson and Onwuegbuzie, 2004).

The method enabled the researcher to use the quantitative method to collect data from a wide spectrum of primary schools with ECD classes with questionnaires. This gave the researcher numerous responses, which he was able to verify using information from qualitative sources (interviews, focus group discussions, document analysis, and observations). Qualitative sources provided in-depth data on how stakeholders deliver in programmes for children with special education needs. This triangulation of instruments provided rich data that were able to answer the three research questions satisfactorily. The researcher interacted with the ECD stakeholders in their natural professional environment who released the needed data, as the researcher was able to probe on grey areas that needed explanations.

7.6 Pockets of good practices

Notwithstanding, the researcher also observed some good educational practices that enable inclusive education for young children to thrive. The first of such good practice is the idea of partnership of stakeholders. The researcher observed that non-governmental organisations international agencies and other ministries offer the
major support to inclusive ECD “A” and “B” programme. Specifically non-governmental organisations are empowering children with special needs and their families with knowledge of children’s rights. These empowerment projects are critical in reducing cases of child abuse, negligence, and domestic violence. The researcher noted that, advocacy projects done at district level where they have formed the District Child Protection Committee, which involves critical child energy givers, such as members from other ministries, non-governmental organisations, politicians, and traditional leaders. The purpose of the Child Protection is for critical officers to share problems experienced with vulnerable children and possible solutions to those problems.

Schools formed school based child protection committees, whose responsibilities include reporting all child abuse, neglect, and violence cases that happen in children’s homes and at school. In the light of the above, the researcher notes that the level of partnership in Chiredzi District enable children to claim their rights from duty bearers, which is important in creating democratic citizens, who can challenge the status quo whenever, there is a basis for doing so.

Furthermore, the researcher found that some stakeholders empower children with special education needs through money lending and other socio-economic projects intended to assist children to pursue their education.

The researcher found that non-governmental organisations were working in some schools constructing infrastructural projects as well as providing supplementary feeding to some schools. In addition, non-governmental organisations are capacitating ECD teachers to make learning materials. Capacity building programmes from non-governmental organisations are strengthening the implementation of inclusive education programmes for children with special education needs. However, the good practices were not universally practices in schools. Schools in remote communities continue to lag behind in programmes that promote inclusive education.
7.7 Conclusions

This section gives conclusions of the study on catering for children with special needs in early childhood settings in Chiredzi district based on the findings:

The findings of the study show that the major ECD sector programmes are working with schools in Chiredzi District to ensure they improve children’s growth, development, and early stimulation opportunities, especially of those children from disadvantaged communities. However, there are critical issues that are limiting effective implementation of the programmes that were identified which include lack of trained human resources, funding, and transport to get to the hard to reach schools. The current researcher also found that the health and nutrition sector had programmes in place targeting all children less than five years as provided for in the health national policy. However, the government does not have the resources to implement health and nutrition programmes. Although there are immunisation and health surveillance programmes that the is supposed to provide to children, as provided for in the health policy, these are not implemented as planned, owing to shortages of drugs in health centres. Furthermore, the government does not fund national supplementary feeding programmes and is relying most on non-governmental organisations, which also do not have the capacity provide food to all deserving children. Thus, stakeholders do not cater for health and nutritional needs for children with special education needs, as only a few vulnerable children being helped. The government therefore lacks political will to support the integrated ECD “A” and “B” programmes. Although there is collaboration of stakeholders intended to assist learners with special education needs, only a few of the children are benefiting.

The current findings show, parents have the virtues to assist their children with special education needs. However, their major barrier was household poverty, and this affects enrolment of children with special education needs, because the government is not providing support to children with special education needs, regardless of its commitment to cash transfers and BEAM. In short, the government is not realistic on how it can reduce the impact of safety nets towards children with special education needs.
The study concludes that schools do not have teachers with skills as well as teaching and learning materials that address the development needs of ECD “A” and “B” children with special needs. On this, (Schotfield, 2001; Dantas, 2007), emphasise the need for qualified teachers manning inclusive education programmes to develop deep knowledge and skills in order to cope with increasing amount of diversity in complexity classrooms. The researcher concludes that most problems emanate from the fact that policy-making process has failed to consider pragmatic classroom and community realities, which focus on capacity building programmes for teachers.

Furthermore, the findings were that schools have not adjusted their classrooms and toilets to meet the needs of all learners needs. The above shortages make it difficult for teachers to cater for young children with special education needs. This is regardless of inclusive education policy that the government has put in place. In the absence of the core characteristics of progressive inclusive education programmes, it is clear schools are not catering children with special needs enough.

The major challenge that the current researcher established is that inclusive ECD programmes lack coordination among service providers from the different sector programmes. The study concludes that, children with special education needs and ECD teachers lack motivation, as they feel incompetent to be part of inclusive education programmes. The current researcher noted that schools capacitated teachers through professional development programmes, but these have little influence on teachers, as schools lack teaching materials to implement outcomes of in-service staff development programmes.

The study found out that, District Education Team supports schools to hold continuous staff development programmes at various educational levels. However, regardless of the practice, the researcher found that no ECD department had personnel to implement continuous professional development programmes, which seriously affected the outcome of the professional development programmes. It is therefore clear that, the quality of continuous development programmes for teachers is not effective.
The researcher concludes that ECD “A” and “B” programmes are not supported at the highest level of policy implementation process as these programmes are not funded by the national budget although the government is paying teachers’ salaries. The major challenge to inclusive ECD “A” and “B” programmes is that of inadequate teaching and learning materials including ECD teachers who lack the qualifications teach children with special education needs. There is need to equip ECD teachers with tools to work meaningfully in ECD “A” and “B” programmes.

There is need for the government to invest in their training of teachers so that they are equipped with the real tools to attend to all learners with special education needs. Teachers’ remuneration was demotivating them to give their best to support learners with special education needs. The section below will focus on recommendations drawn from the study the current study on how ECD institutions in Chiredzi District are catering for children with special needs.

7.8 Implications for theory

7.8.1 The ecological systems theory

This section is concluding by discussing findings based on the Ecological Systems Theory of Bronfenbrenner. Findings of the study revealed the way teachers cater for children with special education needs in the ecosystemic level namely: the microsystemic, mesosystemic, the macrosystemic, the exosystemic, and the chronosystemic levels.

7.8.2 The microsystem level

The findings on how institutions treat children with special education needs in the microsystemic level focussed on the home environment, peer group, school and the large community. Findings revealed that most children with special education needs are discriminated at home, at school and in the community. The study found that, children with special education needs come from families that do not provide early stimulation in the same way they do to other children, are overprotective, which result in discriminatory tendencies of children with special needs, and because of
extreme poverty at household level, they become biased against learners with special needs (Alur and Bach, 2009). The findings further show that most schools were not providing supplementary feeding to learners that were enrolled in grades ECD “A” and “B” classes from poor household families. Furthermore, schools lacked responsive health services and infrastructure that support learners with unique needs.

The findings also show that school peers have mixed reactions on those children with special needs. Children with special needs in most cases were doing activities alone even when activities had to be done in pairs or in pairs. This shows that children with special needs are discriminated in ECD settings by their peers. According to Erik Erikson, a positive relationship with peers is important for the development of a trusting relationship, leading to self-esteem. Through an analysis of the microsystemic layer of the Ecological Systems theory, it was possible to see why children with special needs do not have confidence and show an untrusting personality. The researcher was critical of the lack of school-based policies on reducing discrimination among children with special needs.

The findings on whether the ECD teachers use a variety teaching methods in mainstream classes showing that although teachers are responsive to the individual needs of ECD learners with special needs there are situations in class that make it difficult. For in instance, the findings showed that the school as microsystemic layer was unable to cater for learners with special needs because of large class enrolments and inadequate learning resources. The microsystemic layer does not offer individual support to learners depriving them of the much-needed opportunities to develop and to learn the skills in the same way as their neurone-typical peers. The researcher concluded that while there is a policy of inclusion for ECD “A” and “B” learners, the situation in schools was far from including children with special education needs. Teachers also lacked proper qualifications that provide them with the urge to cater for learners with special education learners. Finally, the study found that, the Ministry of Health and Child Care had programmes to help learners with special education needs, but these programmes were hindered by lack of resources: medication, transport, and personnel to reach the remote areas. The above made the microsystemic layer less effective to deliver services to learners with special
needs. Thus, the Ecosystemic theory helped the researcher to get a deeper meaning of how the different microsystemic agencies’ relationships with learners with special needs affected their life experiences.

### 7.8.3 Implementation of ECDSEN at the mesosystem level

The findings show that different micro-systemic layers collaborate at the mesosystemic level to influence development of children with special education needs. There was evidence that parents are involved in inclusive ECD practices although they lacked the necessary resources to assist their children to develop and learn to their potential. The findings show that parental involvement is limited to making learning materials and construction of outdoor play centres, with very little to influence curriculum development of children with special education needs. The researcher realised that at the mesosystemic level, parents are not equipped with tools to assist their children, especially regarding early identification and assessment of special needs cases.

The researcher also found that at the mesosystemic level, the health services and the education institutions have purposeful collaboration to improve children with special education needs. The health personnel provide immunisation programmes to all under-fives and they inspect ECD centres, the Environmental Health Technician. Current researcher made use of the Ecological systems theory to investigate the nature of collaboration of ECD stakeholders, exploring how such partnership influence growth and development of learners with special needs.

### 7.8.4 Implementation of ECDSEN at exosystemic level

There was evidence from the findings that the school heads support the needs of children with special education needs as they monitor, supervise, and organise funding of inclusive education programmes. Although they were isolated cases of school heads that did not support children with special needs in mainstream classes, generally school heads school were proactive in school communities as they sensitised people on inclusive education. At the exosystemic-layer, the current study found that the ministries of: Health and Child Welfare, Home Affairs, Labour, Public
Service and Social Welfare were very and NGOs were assisting communities to understand the plight of ECD “A” and “B” children with special education needs.

These organisations support children with special education needs, through advocating for the rights of children with special needs in schools and the larger society. The findings were that the above-cited stakeholders were critical in establishing child protection committees that advocate for the rights of children as well as against abuse and violence.

The Ecological layer enabled the current researcher to investigate the degree of involvement of other ministries and NGOs in supporting children with special needs in ECD “A” and “B” programmes. However, the findings were that, from the exosystemic level, teachers are not getting adequate support to deliver lessons in inclusive classes.

7.8.5 Implementation of ECDSEN macrosystemic level

The macrosystemic level focuses on the policies and structures enacted to provide the blue print on which inclusive education is provisioned in Zimbabwe.

The findings show that schools adhere to the international and national frameworks on enrolling children with special education needs in mainstream schools. The current researcher noted that schools have policy statements on the national position on inclusive education.

There was evidence in schools that learners with disabilities were enrolled in schools. However, even with the circulars in offices, schools’ learning environments were not adapted to accommodate children with diverse needs. The ecological systems theory assisted the current researcher to investigate sociohistorical beliefs that continue to influence community attitudes on learners with special education needs. To this note, the current researcher revealed that, largely communities continue to ill-treat learners with special education needs.
7.8.6 Implementation of ECDSEN at chronosystemic level

For the Chronosystemic layer, the researcher found that the political and international relationship in Zimbabwe influence the development trajectory of ECD “A” and “B” children with special needs.

The findings show that, Zimbabwe has negative international relationship, which influences development of children with special education needs. The ECD “A” and “B” children are developing at a critical time when they are affected by the historical nature as influenced by the political and economic challenges. Currently, Zimbabwe is experiencing sanctions, and these affect children with special education needs more than any other group of children, because international organisations that should provide social welfare services like nutrition supplementation are sanctioned to work in communities where they can support learners with special needs. There is empirical evidence from the findings that non-governmental organisations are not free to assist children with special needs because of strained international relations with Zimbabwe (BBC news, 2004). This has negative impact on the general development and health needs of vulnerable children. Thus, the study benefited from Bronfenbrenner’s Ecological theory because the current researcher explored ways children with special are suffering as a result of international relations that are not negative (Harkonen, 2007). The theory also enabled the current researcher to note some pockets of good practices, especially issues on collaboration that positively improve the lives of children with special needs.

7.8.7 The rights-based theory

The rights-based model is embraced in the 1990 World Conference for All in Jomtien and the Salamanca Statement and Framework for Action which directs all schools to work towards “Schools for all-institutions, where everybody, celebrate differences, support learning, and respond to individual needs” (UNESCO, 1994: 44).

The findings of the study were that, the majority of schools are enrolling children with various forms of special needs in ECD “A” and “B” classes. However, the study revealed that they are too many gaps regarding access to quality education in inclusive education institutions. Young children with special education needs as are
not accessing individualised and differentiated education as they lack learning resources that support children with special education needs. Furthermore, the study found that, ECD classes are large and schools have poor infrastructure: as classrooms, and toilets are not adapted to accommodate learners with special needs. The study found that learners with sight, physical and hearing impairments did not have assistive devices and this affected their learning. ECD centres lack provision of resources and this shows there is no equalisation of opportunities for Persons with Disabilities. The Rights Based approach provided the researcher with the lens to investigate the availability of educational provisions in institutions such as adequacy of infrastructure that support children with special education needs.

The use of the right-based approach assisted the current researcher to explore how ECD “A” and “B” classes are providing equitable experiences for learners, without disadvantaging learners with special education needs. As demanded by the UN Standard Rules on the Equalisation of Opportunities for Persons with Disabilities, ECD “A” and “B” does not offer equal opportunities for vulnerable learners given that, while some people are provided with supplementary feeding while others who equally deserved the same privileges never got it.

The researcher also used the Rights-Based model to investigate the educational experiences of children with physical disabilities as well as those visual impairments, to find out whether these were appropriately benefiting from ECD “A” and “B” classes.

The rights-based model enabled the researcher to investigate treatment of children with special education needs by teachers and family members, do for children with special needs and their parents to allow them to improve parenting practices. Through the model, the researcher found that teachers and health personnel make home visits specifically to reach children with special education needs and their families educating parents on ways of assisting the learners.
7.8.8 The bottom-up approach of curriculum implementation

The researcher also employed the bottom-up approach to examine stakeholders were supporting children with special needs in ECD “A” and “B” in mainstream schools. The Bottom-up approach emphasises on the roles and responsibilities of the street level implementers in service delivery (Sabatier, 2005). The idea was to solicit information from the street level implementers (teachers and school heads and District Education Team) about their nature of the goals, and activities that they engage in to sustain inclusive ECD programmes.

The bottom-up approach stresses on the empowerment of street level programme implementers, as these people understands the nature of the programme, because they are involved in every aspect of implementation (Alur and Bach, 2009). In the case of this study, the current researcher wanted to find out whether teachers and schools heads had skills to deliver in inclusive ECD programmes.

The findings were that, ECD teachers lacked the knowledge and skills to cater for learners with special education needs. Lack of skills is a challenge in most ECD settings, and the majority of teachers were not in a position of assisting children with special needs. Schofield (2001) acknowledges that programme success depends largely on the skills of the street level implementers.

7.9 Recommendations

Overall, the research came out with some interesting insights into ways children with special education needs in primary schools that attaches ECD “A” and “B” classes. The section is presenting recommendations on ways stakeholders could improve the way they are catering for the young children with special education needs. These recommendations are two: those that relate to implementation of early childhood development programme and secondly those relating to areas for further research.
7.9.1 Recommendations for the implementation of the ECD programme

Basing on the findings based on the findings the researcher made the following recommendations:

i. There should be a strong policy support, a legal basis for Early Childhood Development system, and inter-sectoral agreements and guidelines that promote the development of sustainable, culturally appropriate, comprehensive, and continuous special needs education services.

ii. The study is recommending that the Ministry of Health and Child Care should introduce early identification and assessment programmes for young children to detect whether they have any traces of special needs cases in the first three years of the child’s life. This should lead to tracking of such children ensuring that the relevant ministries such as: the Ministry of Primary and Secondary Education and the Ministry of Labour Public Services and Social Welfare provide necessary supports services to the children based on the exact nature of the problem.

iii. Inclusive education programmes require support from well-informed and well-prepared community. Hence, a well-coordinated awareness programme is needed to target stakeholders at all levels using the national media marketing strategies like radios, television, newspapers, school newsletters and magazines. The holistic approach to advocating for inclusive education will give the wider community an appreciation that they are part of the national programme. It is important for the government encourage schools to seek for Public/Private Partnership in programs for ECD children with special education needs.

iv. There is need for involvement of disability organisations to be part of the ECD curriculum designing team, because these institutions know very well what needs to be taught to children with special education needs as well as how the young children with diverse needs can be taught. Hence involving them at that initial stage will necessitate a balanced ECD curriculum.
v. There is need to have a teacher education resource pack on special education needs, which is based on the principles of effective learning in inclusive education classes. The emphasis should be on:
   a. active learning of learners;
   b. negotiation of learning objectives;
   c. demonstration, practice, feedback;
   d. continuous evaluation; and
   e. support for each child based on his/her individual learning programme

vi. Inclusive education programme to be successful, ECD “A” and “B” classes need to have small enrolments to accommodate individual work programmes while still learning in inclusive classes.

vii. There is need for nationally organised professional development programmes for all teachers that are already in the service. Experts should facilitate nationally organised continuous professional development programmes so that teachers, teachers-in-charge, and school heads will appreciate the practical skills imparted by experts. However, for mastery of inclusive education knowledge and skills, school administrators should have more continuous professional development programmes, at school level, zonal and then district level.

viii. The government should enhance its partnership with non-governmental organisations and international agencies like UNESCO and UNICEF to gain trust for support of pre-school children with special education needs.

ix. Early Childhood Development Teachers Training model should equip ECD teachers with habilitation and rehabilitation skills so that they are capacitated to work with children that have various forms of disabilities: physical disabilities, visual and hearing impairments and learning difficulties at school level. This will enable them to detect and then monitor young children’s disabilities.

x. Outreach programmes are essential to sensitise, identify and initiate home based ECD “A” and “B” early childhood stimulation programmes, that support
individualised child and family plans. However, for effective implementation of these programmes, stakeholders should form inter-sectoral teams’ especially remote communities, so that whatever they find will best serve the interest of the child and his family yet also considering the family’s culture.

xi. There must be a well-coordinated parent education about the nature of their child’s disability, supported through intensive year round counselling and monitoring support services. This way service institution will to offer well-integrated services that promote children’s health.

xii. Teachers’ Colleges and the department of Teaching Practice at the University of Zimbabwe, which checks on quality Assurance in Teachers’ College programmes, may need to find feasible ways for practicing teachers to do practicum in inclusive classes to benefit from what happens in inclusive classroom situations. This may call for stakeholders to have the necessary knowledge and skills to provide relevant model on inclusive education at ECD level.

xiii. It is high time that the government spearhead multi-thronged national staff development workshops that address teaching challenges in inclusive classes.

xiv. Given that teaching practice does not happen in a vacuum, the teaching environment must match the skills needed to implement inclusive education programmes. Exposure of student teachers to teaching environments that offer really tests of what they will experience in the schools should be a must.

xv. As already provided above, most primary schools with ECD, “A” and “B” classes are lacking appropriate learning materials that match developmental needs of children with unique needs. In this regard, schools require special learning materials that support children with special needs.

xvi. There should be national budgets that support teachers to attend inclusive education programmes. This arrangement seems to mitigate challenges of lack of funds necessary at district, and school level, since in-service training
programmes outside schools are difficult for teachers to attend them regularly because of funding.

xvii. There is great need for politicians to support programmes for children with special needs starting from ECD level because this is a critical phase for any skill development. The government should therefore directly budget for advocacy of holistic inclusive early childhood development programmes.

xviii. However, there is need to establish community based ECD programmes as there are many more ECD aged children who are not enrolled in existing ECD “A” and “B” classes for a variety of reasons, which include distance to schools or very critical health challenges.

Table 29: An alternative framework for a holistic and inclusive Model for catering for children with special education needs in early childhood development Programme

<table>
<thead>
<tr>
<th>Catering for ECDSEN children in Early Childhood Development Program (as Identified in Literature)</th>
<th>Implementation of services to children with special education needs in Chiredzi District Primary schools</th>
<th>Implementation of the ECDSEN holistic and Inclusive ECDSEN Model (Good practices suggested by the researcher) program</th>
</tr>
</thead>
</table>
| The Health and Nutrition Sector Programme  
Ministries of Health and provide free health services for all children under five years. All children with disabilities are registered to allow them to benefit from social services  
There is compulsory checking on pregnant mothers of a possibility of giving birth to children with disabilities during prenatal and in the post-natal | The Health and Nutrition Sector Programme  
-the Ministry of Health and Child Care provides free health care to all under 5 years. Some children of ECD age have no birth certificates, making it difficult to benefit from social services.  
There is no compulsory prenatal and post-natal detection of signs possibilities of giving birth to children with disabilities during birth. As a result a | Health and Nutrition Sector Programme  
-The must be an essential Package for ECD Services that include free health care and nutrition birth registration; child and social protection programmes.  
There must be compulsory regular check-up on pregnant mothers for possibilities of giving birth to a child with special needs. This should lead to |
periods and this allows for early identification, assessment and screening of children with developmental delays in the first three years of life.

For those children enrolled in ECD “A” and “B” classes, there is compulsory screening for learners with hearing, sight, social, and emotional challenges. Support in for of early treatment and referral to specialists is provided to all those children with special needs who are identified at an early age. This is necessitating correct placement and assistance before the disability becomes serious.

Young children (0-6) years with special needs have free access to special health medication and psychosocial support services without favour. At most, children with special needs have medical doctors that check for their health needs. To facilitate this, the health personnel engage in home visiting programmes, to monitor programme of identification, detection, screening and assessment of such children is delayed, until the child is enrolled. In young children to check if, they have developmental delays.

There is no compulsory screening for any type of disability: hearing, sight, and other developmental delays associated with young learners. When the parents know that their child is challenged with a disability the can approach the district hospital’s rehabilitation department which offers free rehabilitation services to children. There are isolated cases where NGOs support children with special needs, in their constituencies.

In practice, medication is not free except in a few cases when there are national health programmes. Early stimulation programmes are not free as children pay for their education. In practice, it is not free not accessible especially for children in remote communities. Government hospitals do not have free early detection, identification and assessment of children with special needs cases at infancy, allowing for early treatment of such children.

There will be compulsory early screening for children aged 0-8 years to check if the children have hearing, sight, speaking and physical challenges, to allow early and effective support for those children identified as having disabilities. Support to help them should be found through effective private-public partnership (PPP). The government should have a tracking mechanism to allow all children identified to be having developmental delays to access appropriate assistance.

In principle and in practice all children should have entitlements of free education and health facilities. Children with special needs will benefit from regular medical check-ups of their health conditions. Social services targeting education to all ECD “A” and “B” children without favour or discrimination of the child
household needs of families as well as to educate them on proper psychosocial lessons for children with special needs.

medication facilities and children are often referred to private hospitals to get medical treatment fees are exorbitant. Home visits are in place but evidence is they might not be as informative

comes from or regarding the child's social status. There will be informative home visiting teams to families where there are children with special needs.

<table>
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<tr>
<th>Supplementary feeding</th>
<th>Supplementary feeding</th>
<th>Supplementary feeding</th>
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<tbody>
<tr>
<td>Governments and non-governmental organisations established food security policies to assist poor households. As such, there are organised supplementary food subsidies that go towards supporting learners in selected to selected community-run preschool centres to assist all learners in registered preschool centres.</td>
<td>The government is not providing supplementary feeding to learners in any of the ECD centres in Chiredzi district. A local non-governmental organisation was providing supplementary feeding to ECD children in selected centres. Children from poor households that come to the ECD centre having eaten nothing were not accessing supplementary feeding.</td>
<td>To ensure food security and adequate nutrition for the young children to avert life-long effect of stunting, the government should collaborate with non-governmental organisations and local business people to provide rich energy giving foods that support growth and development of children. These programmes will be well monitored to ensure that all ECD learners that require such services are benefiting.</td>
</tr>
</tbody>
</table>

In some nations, all children enrolled in registered preschools are provided with supplementary feeding, which are heavily monitored by the government, parents, and non-governmental organisations.

Parents played a crucial role in schools where non-governmental organizations were providing supplementary feeding, assisting with cooking, and managing the children.

There should be capacity-building programmes for parents to support supplementary feeding schemes ensuring that all the facilities are put to good use, and stakeholders are not engaging in corruption, which involves food distribution.

<table>
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<tr>
<th>Social Protection</th>
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<td>Government offer unconditional, Cash</td>
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<th>Social Protection</th>
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<td>The government is not providing unconditional</td>
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<table>
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<tr>
<th>Social Protection</th>
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<tr>
<td>Child protection initiatives should be free for every</td>
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Transfers and Social Service facilities such as supplementary feeding and free health care facilities to children from very poor household families. There is a systematic outreach and child assessment programmes to identify children with risky status like developmental delays, malnutrition, and disabilities who deserve the assistance to access child protection and social welfare services.

NGOs empower parents through income generating projects like the money lending projects, intended to support the health and educational needs of learners with special education needs. The empowerment projects are meant to support children with special needs from their families. It is a kind of cash transfer programme where the profits are used to support children with special education needs.

NGOs initiate empowerment programmes to support children with special education needs, through income generating projects like the goat project as well as the garden projects where profits realised from the sales are channelled towards improving the lives of children with special needs.

The government and non-governmental organisations will have feasible income generating projects to support children with special education needs and their families. However, parents need education on running such projects to the best advantage of the young children with special education needs.

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<tr>
<th>Home visits</th>
<th>Home visits</th>
<th>Home visits</th>
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<tbody>
<tr>
<td>Governments support the involvement of parents in early childhood programmes. There are programmes to educate parents on their responsibilities. Parents</td>
<td>The government is supporting the involvement of parents in all ECD programmes. However, supporting parents’ involvement in ECD “A” and “B”</td>
<td>Parents are a critical component in the health and education of ECD “A” and “B” children. Hence, they deserve health education to enable them to take care of their</td>
</tr>
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</table>
are taught how they can support ECD programmes as well as to be responsive to the needs of children with special needs. During home visits/domiciliary visits, a team of specialists would normally visit homes to establish how they might assist children with special needs. The team is composed of the nurse, the therapist, and psychologist.

Programmes is affected by lack of resources, for instance transport to reach all those that require support. Teachers and nurses do not engage in unified domiciliary visits to children’s homes and as a result, there is no consensus on how to assist parents with special needs children. Government should support health education for parents by providing incentives to parents who are supportive to children with special education needs. In making home visits, the teams shall be made-up of a medical nurse, a teacher and a psychologist who should have a specified programme of supporting children with special education needs through their parents. All ECD “A” and “B” children should have safe classrooms, water and sanitation that are maintained by government and supervised by personnel from the Ministry of Health and Child Care and the local government to ensure they comply with health regulations.

<table>
<thead>
<tr>
<th>Supervision and Monitoring of Health Facilities for preschools programmes</th>
</tr>
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<tbody>
<tr>
<td>Quality assurance is monitored by National Health System for Epidemiological surveillance</td>
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<table>
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<tr>
<th>Supervision and monitoring of health facilities in preschool programmes</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Ministry of Health and Child Care through the Department of Environmental Health Technician monitors the health standards in ECD settings. However, owing to financial, human and transport challenges, institutions that should monitor health provisions</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Supervision and monitoring of health facilities in preschool programmes</th>
</tr>
</thead>
<tbody>
<tr>
<td>There must be consistent monitoring of ECD “A” and “B” facilities by the Ministry of Health and Child Care. Other stakeholders, especially non-governmental organisations will assist with monitoring as they have the technical knowhow. Parents will be</td>
</tr>
</tbody>
</table>
in most early childhood institutions do not often do it leading to dilapidated health conditions in schools. Such health standards threaten learners, especially those with special needs.

- There must be a decentralized district ECD monitoring and evaluation framework, which will annually measure progress towards the achievement of the national policy vision, and Comprehensive ECD program.

**The Education Sector**

- There are legislations in place to support Special Needs Education at all levels of education.

The legislation stipulates that School Boards are responsible for ensuring that special education services and programmes are an integral part of the school system, and that the services are available to all children with special needs. The legislations urge schools to modify their curriculum to accommodate all including those with special needs to benefit from the learning

- The must be a policy that enforces compulsory inclusive education for all ECD “A” and “B” learners both in centre based and in community based.

These policies need to be supported with small teacher pupil enrolments, which will allow teachers to attend to individual needs of learners in inclusive classes. Teachers will be supported by their schools to ensure they make the curriculum fit the needs of the learners. Teaching materials will be adapted to the developmental
<table>
<thead>
<tr>
<th><strong>Teacher Capacity</strong></th>
<th><strong>Teacher Capacity</strong></th>
<th><strong>Teacher Capacity</strong></th>
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<tbody>
<tr>
<td>The Governments ensures that it has quality ECD teachers with specialist skills to handle each child according to his/her uniqueness.</td>
<td>- None of the ECD teachers have qualifications to teach children with special education needs</td>
<td>- Develop appropriate teachers for inclusive ECD classes, in sufficient numbers, with sufficient skills to support the implementation of the ECD “A” and “B” policy.</td>
</tr>
<tr>
<td>Teachers are trained to detect, identify and assess children with special education.</td>
<td>Teachers have limited pre-service professional training in working for learners with special education needs.</td>
<td>A comprehensive ECD teacher training system which develops teachers with skills to detect, identify assess and monitor programmes for children with special education needs.</td>
</tr>
<tr>
<td>Initial Teacher Training (ITT) for teachers offer skills to work in inclusive settings, where there are learners with special education needs.</td>
<td>During teacher training, teachers have little exposure to effective models of inclusive education programmes.</td>
<td>Initial teacher training should equip teachers with both theoretical and practical skills work in inclusive ECD classes.</td>
</tr>
</tbody>
</table>
needs. Specialist teachers are therefore important for the effective delivery of inclusive ECD for children with special education needs as they assist to identify developmental delays and others who require effective assistance.

For instance, their training does not expose them to real situations where they can work in classes where they are learners with special education needs. The situation in schools is made worse by the fact that school heads do not have skills to assist teachers to work in inclusive education classes.

Promotion of school heads will be based on their ability to understand how inclusive education works so that they will assist teachers to implement inclusive ECD lessons as well as to adopt a flexible curriculum that address the needs of all learners.

### Communication strategy

There are sensitization programs about the value and importance of ECDSEN. Schools market inclusive education programmes through mass media, national newspapers, televisions, radio stations, school newsletters, and magazines.

In addition, there are home visits meant to educate families on how they can support their children with special education needs.

Communication strategy

Schools engage in public awareness campaigns on the importance of inclusive education programmes. There are schoolchild protection committees, which also advocate for children's rights in the entire school community. Besides, other ministries and NGOs hold sensitisation programmes in school communities on children's rights and inclusive education programmes.

These home visiting programs by teachers and school heads meant to educate parents on inclusive education.

This would be augmented with extensive home visit programs and ways of improving children's development of skills

### Infrastructure

Accessibility requires that the system is non-discriminatory and accessible to ensures that

Inclusivity requires that the system is non-discriminatory and accessible to ensures that

Inclusivity requires that the system is non-discriminatory and accessible to ensures that

Schools have not adjusted classrooms, nor toilets to make them usable by learners with special

Schools should adapt and adjust classrooms to enable them to accommodate learners
all positive steps are taken to include the most marginalized. As such Governments have started to construct preschool centres, which accommodate all learners including those with special needs, by collaborating with international financial assistance. This resulted in increments of enrolments of children with special needs. There are deliberate processes to ensure that the learning materials and equipment qualify the needs of individual learners. As such some governments are contracting private enterprises to make learning materials that support specifically young learners with learning needs, education needs

Construction of facilities for ECD learners is the responsibility of parents. The responsibility of buying furniture is that of parents, but because of poverty, very few schools have child-sized furniture. Most ECD “A” and “B” learners sit on the floor while others squat in classrooms due to shortage of furniture. School improvements are done managed, and maintained by parents, as the government has no financial resources to undertake construction of new classroom blocks or maintain the existing ones, while parents do not have the means. However, in few schools NGOs organisations constructed user-friendly classrooms and toilets

Currently the government is not promoting contributions of non-governmental organisations. School heads and parents were not at liberty to work with certain non-governmental organisations except when with special needs. Each school should have a well-furnished resource unit to accommodate learners with diverse needs.

The Government through the responsible ministry will modify existing classroom blocks and campaign for the return of per-capita grants so that they can use the funds to improve ECD classrooms and the outdoor play centre.

The government will work with non-governmental organisations and private enterprises to provide basic learning and teaching support. Teachers and school heads will be encouraged to strengthen collaboration with ECD stakeholders so that they can source assistance through Donor Forum for ECD services to leverage resources that support growth and development of learners.

There is need to develop effective partnership with Donors, so that this partnership can facilitate provisioning of school (ECD infrastructure developments). there is need to advocate for a new
Ward councillors indicated communities would work with NGOs. This militated against what learners with special needs had to benefit from the donors. Funding model not only for children with disabilities/special education needs but for the entire ECD sector program to be discussed with National Treasury.

- There is need for funding norms and standards developed for inclusive ECD programs that are well monitored and well resourced.
- Identify government and private donors to leverage resources, for continuous professional development programs for ECD teachers and school heads to service inclusive ECD “A” and “B” classes with children with disabilities.
- Identify and conduct research on all existing funding models that can be explored to assist ECD programmes.
- The State is obliged to outlaw discrimination within the education system and put in place adequately funded policies, laws and programs to identify and address barriers to education.

<table>
<thead>
<tr>
<th>Curriculum for ECDSEN</th>
<th>Curriculum for ECDSEN</th>
<th>Curriculum for ECDSEN</th>
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<tbody>
<tr>
<td>Governments developed national early childhood development curriculum,</td>
<td>The findings of the current study show that all ECD “A” and “B” institutions use</td>
<td>Schools will use a national early childhood development curriculum,</td>
</tr>
</tbody>
</table>
which guides teachers on what to teach and the skills to develop.

Students with special educational needs require a differentiated curriculum, which can accommodate individualised assessment; Teaching should inform learning through an ongoing and cyclical assessment, through intervention and review of outcomes.

Emphasis of inclusive curriculum is on learning and teaching environments that ensures buildings, grounds and equipment, indoor and outdoor, are safe and developmentally appropriate for children with special needs.

Curriculum should inculcate learners into their cultural values to ensure they develop into good citizens at the same time must meet developmental needs.

<table>
<thead>
<tr>
<th>Partnership</th>
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<tbody>
<tr>
<td>The school administration, teachers, and other</td>
<td>Teachers involve parents in the education of their</td>
<td>On-going collaboration between schools and the</td>
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</table>

a national syllabus, which guides teachers on the content and the general methods, used to teach in inclusive classes. Teachers employ a variety of teaching and assessment procedures to measure the individual learning outcomes of learners. The most utilised assessment criteria are portfolios and observations, which are on-going means of assessments.

Some schools have learning environments designed for learners with special education needs, but they lack developmentally appropriate teaching and learning materials. All ECD centres lacked functional outdoor play centres that were inclusive.

Curriculum was mainly targeting typically developing learners. There is an attempt to ensure that curriculum is connecting to children’s cultural needs.

The curriculum that ensures children acquires the necessary numeracy, literacy, and critical thinking skills. The learning environment should be educative with an assortment of in-door teaching and learning materials to improve learners’ competencies.

Curriculum will include civic education, where learners take part in children’s rights, at a young age to demand them from the duty bearers.
stakeholders listen and collaborate with parents in supporting learners with special education needs. Thus, teachers, the school head, the school psychologist work together to with parents to develop the Individual work plans for learners with special education needs. Parent involvement leads to sharing of opportunities between teachers, school heads, and parents about what to monitor on children with special education needs. However, such assistance only assists teachers to develop teaching and learning materials. In some cases, parents contribute towards their children’s supplementary feeding. Furthermore, parents attend consultation sessions especially during open days and graduation days, and they assist with children’s learning. Parents are involved in periphery activities and they need full involvement in designing inclusive education curriculum and in assessing what their children learn. Parents is an indispensible necessity that enhances inclusive education. Parents should be educated to exercise responsibilities of supporting children’s learning in inclusive settings. Opportunities are provided to educate them, so that in return they can also assist their children. Parents are expected to play a key role in Child Protection Committees being proactive and generating policies to protect children from abuse. Teachers will assist parents with children with special needs to form discussion platforms.

<table>
<thead>
<tr>
<th>Assessment of children with special education needs</th>
<th>Assessment of children with special education needs</th>
<th>Assessment of children with special education needs</th>
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<tr>
<td>Assessment of children with special needs is done by a: psychologist; medical practitioner; the principal of the school where the child is attending or a teacher of that school nominated by the principal; an appropriately qualified social worker; and a therapist who is suitably qualified to provide support services for child’s special educational needs.</td>
<td>The School’s Psychological Services and Special Education Needs department is responsible for assisting teachers to identify and assess ECD learners with special needs. The teachers do not have skills to identify and assess children with special education needs, and they only rely on the psychologist that comes from the district office to assist them at least once.</td>
<td>An assessment framework is developed and implemented in all schools to necessitate regular identification and assessment of every individual’s learning progress. All ECD centres will have a resource unit, manned by a qualified inclusive education teacher who in-services new staff members and those that lack knowledge, to organise learning in inclusive classes.</td>
</tr>
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</table>
The School’s Psychological Services and Special Education provide in-service training and to support with identification, assessment, and organisation of learning experiences.

Assessment of students with special educational needs should not be a once-off diagnostic event but should be an on-going process closely linked to intervention.

The educational psychologist stationed at regional office and the schools remedial tutor at the district level assist teachers with identification and assessment of children with special education needs.

The ministry of Health personnel and the district educational remedial tutor collaborate to identify, assess and recommend placement of children with special needs to special schools. However, these are far from each other, and the majority of learners that require assistance rarely get that.

There must be continuous staff development programmes based on assessment models to allow teachers to learn best inclusive education practices. Where possible teachers must have exchange programmes.

Schools should develop identification and assessment tools that teachers use in inclusive classes. However, they should be agreed by the parents and the ECD Trainer, as the criterion must be appropriate to the age of learners and the culture of learners.

Teachers Training Colleges and Universities work together with schools and the District Education Teams to identify training gaps, especially for learners with special needs.

### Monitoring and evaluation:

- To exercise monitoring of inclusive programs, governments developed evaluation instruments, to measure the outcome of each specific ECD objective and strategies on inclusive ECD programs per term.

The District Education Team supervises, monitors, and evaluates school programmes: early childhood education. It is their responsibility to ensure that the programme is

The shall be a decentralised national ECD monitoring and evaluation system, that annually measure progress towards the success and of the ECD programme to full-fill the
provides appropriate feedback of how the programme can be improved. The teachers agreed to work with the designed inclusive education materials.

Governments set a quality assurance department that monitors and evaluates inclusive education programs. The government contract agencies to coordinate policies for family welfare. These agencies ensure families are provided with reasonable support to assist learners with special needs, and where possible supporting them with their health concerns.

implemented and coordinated. They visit mainstreams to find out if schools are complying with the education policies of not denying learners with disabilities places.

Teachers are supervised by both the District Education Team as well as by the school heads that provide reports to the Ministry of Primary and secondary through appropriate channels. The information is used to provide feedback on how the programme can be enhanced.

In Zimbabwe, monitoring of the ECD is the responsibility of all stakeholders, who provide feedback through the District Education Team, which represent the government.

national vision, goals and objectives. The District Education Team will be supported to ensure they have the capacity to visit all schools to offer consistent assistance to teachers and school heads.

The ECD programme will be comprehensive and will allow all stakeholders to monitor the ECD programme. There will be regular meetings among the stakeholders to consult each other on how the ECD programme is enhanced. Parents will be empowered to monitor the ECD programme, so that they can provide effective contributions that support inclusive ECD programmes.

International agencies such as UNICEF, UNESCO World Bank will have the opportunity to monitor ECD programmes and to advice the Ministries of Primary, Secondary, Higher Education, Science, and Technology on best practices about how their products should meet international standards of inclusive schools.
7.9.2 Areas for Further Research

(i) The findings reveal that they are many gaps in the implementation of inclusive education in ECD programmes. As a result, the researcher is recommending that further research be done on areas of conflict in teacher parent relationship that stifles early stimulation programmes in inclusive programmes.

(ii) There is need for the central government to initiate Basic Research on the status of ECD “A” and “B” (preschool) children with special education needs to establish the nature of the prevailing disabilities and whether all such children are benefiting from the provision of social services. With the information in its hands, it can use it to budget for the social services that are needed for the up-keep of such children. The government through the Ministry of Labour, Public Service and Social Welfare may also target both local and international non-organisations, so that they can also assist, providing necessary support services.

(iii) The researcher noted with a cause of concern that ECD “A” and “B” teachers indicated that they have challenges in delivering lessons/activities in inclusive classes. The researcher is therefore recommending that research be conducted on ECD Teacher Education Programmes for children with special education needs to investigate the nature of courses that are offered to prepare preservice teachers for inclusive education teaching.
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Appendices

Appendix 1: Letter requesting permission to collect data

05 August 2014

Provincial Administrator
Ministry of Social Welfare
Zimbabwe

Dear Sir/Madam,

Re: Permission to Collect Data: Mr. H. Chinhara (Student Number 201316592)

This is to confirm that Mr. Chinhara is pursuing PhD degree at the University of Fort Hare. His research title is Catering for Children with Special Education Needs in the Early Childhood Development Programme in Zimbabwe: Towards a Holistic and Inclusive Model of Implementation”. He is supposed to collect data from your Ministry. Kindly grant him permission. I would also be grateful if you could kindly provide him with documents that may assist with information regarding the area of his study. His study has received ethical clearance from the University of Fort Hare Ethics Committee.

I would like to assure you that any information that will be collected will remain confidential and no name of a person will be disclosed. The student will ensure that he does not disrupt ongoing activities during the period he will be collecting data.

Sincerely

Prof. S. Rembe
Coordinator of MEd and PhD Programmes,
Faculty of Education, Alice Campus
University of Fort Hare
Appendix 2: Introductory letter

Masvingo Teachers College  
P.O. Box 760  
Masvingo  
The Provincial Education Director  
Ministry of Primary and Secondary Education  
P.O. Box 89  
Masvingo  
25 August, 2014  
Dear Sir /Madam  

RE: Application for Permission To Conduct A Study In Selected Masvingo' Chiredzi Education District Schools  
My name is Henry Chinhara a Doctor of Philosophy in Education student at University of Fort Hare, Faculty of Education, Department of Further, and Continuing Education, South Africa. I am requesting permission to conduct research in selected Chiredzi District primary schools. The title of the study is catering for Children with Special Education Needs in Early Childhood Development Programme in Zimbabwe: Towards a Holistic and Inclusive Model of Implementation. The study participants include District Education Team, school heads, teachers, parents, including stakeholders from other government departments: Health personnel, Labour and Social Welfare personnel, Local Government and Public Housing, and NGOs. I have enclosed a letter from the University Of Fort Hare.  
Thank you in advance, for your co-operation.  
Yours faithfully  

Henry Chinhara (student No. 201316592).
Appendix 3: Ethical Clearance Letter

University of Fort Hare
Together In Excellence

ETHICAL CLEARANCE CERTIFICATE
REC-270710-028-RA Level 01

Certificate Reference Number: REM0151SCH01

Project title: Catering for Children with special education needs in Early Childhood Development Programme in Zimbabwe: Towards a Holistic and Inclusive Model of Implementation

Nature of Project: PHD

Principal Researcher: Henry Chinhara

Supervisor: Prof S Rembe

On behalf of the University of Fort Hare’s Research Ethics Committee (UREC) I hereby give ethical approval in respect of the undertakings contained in the above-mentioned project and research instrument(s). Should any other instruments be used, these require separate authorization. The Researcher may therefore commence with the research as from the date of this certificate, using the reference number indicated above.

Please note that the UREC must be informed immediately of

- Any material change in the conditions or undertakings mentioned in the document
- Any material breaches of ethical undertakings or events that impact upon the ethical conduct of the research
The Principal Researcher must report to the UREC in the prescribed format, where applicable, annually, and at the end of the project, in respect of ethical compliance.

Special conditions: Research that includes children as per the official regulations of the act must take the following into account:

Note: The UREC is aware of the provisions of s71 of the National Health Act 61 of 2003 and that matters pertaining to obtaining the Minister’s consent are under discussion and remain unresolved. Nonetheless, as was decided at a meeting between the National Health Research Ethics Committee and stakeholders on 6 June 2013, university ethics committees may continue to grant ethical clearance for research involving children without the Minister’s consent, provided that the prescripts of the previous rules have been met. This certificate is granted in terms of this agreement.

The UREC retains the right to

- Withdraw or amend this Ethical Clearance Certificate if
  - Any unethical principal or practices are revealed or suspected
  - Relevant information has been withheld or misrepresented
  - Regulatory changes of whatsoever nature so require
  - The conditions contained in the Certificate have not been adhered to

- Request access to any information or data at any time during the course or after completion of the project.

- In addition to the need to comply with the highest level of ethical conduct principle investigators must report back annually as an evaluation and monitoring mechanism on the progress being made by the research. Such a report must be sent to the Dean of Research’s office

The Ethics Committee wished you well in your research.

Yours sincerely

[Signature]

Professor Gideon de Wet
Dean of Research

09 February 2015
Reference: C/426/3
Ministry of Primary and Secondary Education
P.O Box CY 121
Causeway
Harare

6 September 2014

Chimhara Henry
Masvingo Teachers College
P. O. Box 760
Masvingo

RE: PERMISSION TO CARRY OUT RESEARCH IN MASVINGO PROVINCE: CHIREZI DISTRICT:

Reference is made to your application to carry out a research in the above mentioned schools in Masvingo on the research title:

“CATERING FOR CHILDREN WITH SPECIAL EDUCATION NEEDS IN EARLY CHILDHOOD DEVELOPMENT IN ZIMBABWE: TOWARDS A HOLISTIC AND INCLUSIVE MODEL OF IMPLEMENTATION”

Permission is hereby granted. However, you are required to liaise with the Provincial Education Director Masvingo Province, who is responsible for the schools which you want to involve in your research.

You are required to provide a copy of your final report to the Secretary for Primary and Secondary Education by December 2014.

C. Chiwamba (Mrs)
SECRETARY FOR PRIMARY AND SECONDARY EDUCATION
cc: PED – Masvingo Province
Appendix 5: Informed Consent Agreement Form

Dear Sir/Madam,

I am Henry Chinhara, a lecturer at Masvingo Teachers. I am currently studying for a Doctor of Philosophy Degree (PhD) in Education at the University of Fort Hare in South Africa. My research study for the degree is an inquiry to understand how Early Childhood Development (ECD) "A" and "B" specifically for children with special needs are being delivered in ECD settings in Chiredzi District in Zimbabwe. The results of the study will be an eye opener to the Ministry of Primary and Secondary Education, Ministry of Science, Higher Education and Technology in Zimbabwe and the various stakeholders with regards to implementation of holistic and Inclusive programmes. Early Childhood Development programmes in primary schools is basically at an infancy stage, and hence the interest of the study is to find out how exactly children are being catered for. The study, will contribute to the debate on Early Childhood Development programmes, especially for children with special education needs who are in most cases segregated in most social services, by their very nature. Thus, this study will help the government and other organizations working with ECD programmes to improve delivery of services for all children including those with special education needs in ECD institutions in Zimbabwe and the SADC region. I request for your participation in this important study by responding to the attached questionnaire, interviews.

Right to confidentiality and Privacy

To ensure confidentiality and other ethical issues, your name is not attached to the questionnaire or the interview schedules. The information you give will be completely confidential and private. Consent forms with signatures will be placed in a separate, locked file from the questionnaires. No names or reference to specific schools in the district will be used in any reports or discussions about the results. The information you share through this questionnaire will not be used against any person or any specific ECD programmes. Further, the information provided will be used for academic purposes only. In this regard the results of the research may be published, and presented in conferences and meetings.

Possible Benefits and Compensation

The research study does not provide for direct individual benefits. However, satisfaction can be derived from the fact that by participating in the study, the participants have contributed to knowledge in the area that affects them as teachers. Such knowledge base widens understanding of issues that affect education in general and provision of In-service education in particular. This questionnaire will take about an hour to complete. It is my hope that you will give me your open and honest opinions. If you have any questions or concerns, you can report them to Mr Henry Chinhara, at Masvingo Teachers' College, P.O. Box 760 Masvingo or at the following emails: chinharah@gmail.com or 201316592@ufh.ac.za

Voluntary Participation declaration

I have read and understood this consent form. I understand the purpose of the study and I do understand that there are no direct benefits to me and that should I feel that I am at risk I am free to withdraw. However, my motivation to participate is facilitated by my will and zeal to help improve the quality of education offered to our ECD “A” and “B” learners in Zimbabwean schools.

Please write your signature:

____________________  ______________________
Signature             Date

Thanks you very much for sparing your time
Appendix 6: Editor’s Declaration

Dr Pamela Makati
BA Hons English; MA English; D Litt et Phil
50 Banbury Park, Hunters Road Northwold, 063273957, pm_makati@yahoo.com/pmamakali@gmail.com

11 February 2016

TO WHOM IT MAY CONCERN

I hereby confirm that the thesis titled “Catering for children with special education needs in the delivery of early childhood development programmes in Zimbabwe: towards a holistic and inclusive framework” by Henry Chinharare has been intensively edited and thoroughly proofread. I have checked for language use, corrected spellings and grammatical errors, re-written sentences where necessary and ensured logical flow of text.

Yours Sincerely,

[Signature]

Dr Pamela Makati
Academic Editor
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Section A: General background information

Date of questionnaire distribution ……………………………………………………………………………………

1. Location of school: Urban [ ] Estate [ ] Rural [ ]

2. Type of school: Church [ ] Government [ ] Council [ ] Company [ ]

3. What is your gender? Male [ ] Female [ ]

4. What is your age? Below 20 years [ ]
   20- 29 years [ ]
   30- 39 years [ ]
   40- 49 years [ ]
   50- 59 years [ ]
   Over 60 years [ ]

5. What is your academic qualification ……………………………………………..

6. What is your highest professional qualification?
   Diploma in Education [ ]
   Bachelor of education (ECD) [ ]
   Bachelors in education Special Needs Education [ ]
   Master’s in education (ECD) [ ]

7. Do you have any special education needs qualification? Yes [ ] No [ ]

8. What is your experience as a qualified ECD teacher? 1-5 years [ ]
   6-10 years [ ]

9. For how many years have you been at this school? …………………

10. Do you have children with special education needs in your ECD “A” and “B” classes? Yes [ ] No [ ]

11. If yes, how many ……………………………………………………………...

12. What are the categories of special needs ………………………………………………………………………

13. If no please explain whether there are no children with special needs in the area? …………………………………………………………………………………………………………
SECTION B: ECDSEN Sector programmes

Health and nutrition issues in ECD settings

14. Does the school have ECD children enrolled who are not vaccinated against child killer diseases?  
   Yes [ ]  
   No [ ]  

15. If yes explain how you handle such cases of children whom you found not vaccinated against child killer diseases by the time they enrol in ECD “A” and “B”.

16. Do you have children who have special needs (e.g. disability, malnutrition, HIV/AIDS and those coming from extreme poverty families in ECD “A” and “B” classes?  
   Yes [ ]  
   No [ ]  

17. If yes explain how you assist those children (a) at school (b) at home

18. Do you have adequate health facilities (e.g. safe learning environment, sanitation and water facilities) for ECD “A” and “B” classes?  
   Yes [ ]  
   No [ ]  

19. If no explain how the school copes with the situation.

20. Do you have a nutrition programme for ECD “A” and “B” children?  
   Yes [ ]  
   No [ ]  

21. Do you have a nutrition programme specifically for children with special education needs?  
   Yes [ ]  
   No [ ]  

22. Specify the nutrition programme the school has for the ECD “B” class?

23. Do you engage parents in providing ECD “A” and “B” children’s nutrition?  
   Yes [ ]  
   No [ ]  

24. How does the school involve parents in ECD nutrition programme?

25. Do ECD teachers have home visits for children with special needs?  
   Yes [ ]  
   No [ ]  

26. If yes what health issues do teachers and parents deliberate on during home visits?

27. Is the Ministry of Health and Child Care involved in ECD health related issues at institutions?  
   Yes [ ]  
   No [ ]  

28. If your answer is yes explain exactly how you involve the Ministry of Health and Child Welfare.

29. Do you refer children with special needs to medical centres for treatment?  
   Yes [ ]  
   No [ ]  

30. If yes how often per year do they get treatments?  

31. Do you have a register to assist you in tracking the number of times each child with special needs goes for treatment?  
   Yes [ ]  
   No [ ]  

32. What major challenges have children with special needs faced when they visit health centres for treatment?

33. Do you have any health programmes for children at ECD level?  
   Yes [ ]  
   No [ ]  

34. What specific health programmes do you have for children with special education needs?

35. Are there other ministries that assist ECD “A” and “B” children with special needs to improve their health?  
   Yes [ ]  
   No [ ]  

36. How do they assist children with special needs to improve their health needs?
37. Is there anyone directly supervising the health status of the ECD institution? Yes [ ] No [ ]
38. If your answer is yes, how often has your school been supervised to check on adequacy of health facilities?

SECTION C: Education Sector Programme for children with special needs

39. Do you think ECD teachers know how to teach ECD “A” and “B” classes with children who have special education needs? Yes [ ] No [ ]
40. If your answer is No what do you think is the problem that might be causing them not to teach children with special needs?

41. Was special education needs teaching at ECD level taught at college during your training? Yes [ ] No [ ]
42. If your answer is Yes what is the problem in schools regarding the teaching of children with special needs?

43. Do ECD “A” and “B” teachers have difficulties in delivering lessons in inclusive classes? Yes [ ] No [ ]
44. If your answer is yes, what problems do teachers face when conducting lessons in inclusive ECD “A” and “B” classes?

45. Are there specific methods that you think teachers can employ to effectively teach in ECD classes “A” and “B”? Yes [ ] No [ ].
46. If yes which teaching methods are most appropriate in ECD “A” and “B” classes where they are children with special education needs?

47. Do ECD “A” and “B” teachers have relevant skills that enable them to work with children with special needs? Yes [ ] No [ ].
48. If your answer is yes, which skills are relevant for ECD “A” and “B” teachers to work well with children who have special education needs?

49. Are there teachers at this school who have a special education needs qualification? Yes [ ] No [ ]
50. If your answer is yes how often do they share their knowledge with other teachers on how to cater for children with special education needs? Never [ ] Sometimes [ ]
51. How does the school community benefit from teachers who have special education needs qualifications?

52. Does the school administration (school head; school deputy; and ECD TIC) know what to assess in classes where they are children with special education needs? Yes [ ] No [ ].
53. If your answer is no, what do you think can be done to help them improve their assessment and supervision skills?

54. How do you rate the school head’s knowledge of ECD “A” and “B” children with special needs?
55. What do you see as the main reason for lack of knowledge for school heads on children with special education needs?

56. Are schools supportive towards the implementation of inclusive education at ECD “A” and “B” level?

57. How are school heads supporting the implementation of ECD special education needs programmes in the school community?

58. Do you have adequate infrastructure (classroom, outdoor equipment and indoor materials) for ECD learners?

59. If yes are they adequate specify giving examples

60. Are the learning materials and outdoor equipment appropriate for supporting the needs of all ECD learners?

61. How are ECD teachers making learning materials appropriate for learners?

62. Do ECD “A” and “B” teachers do home visits to meet with parents and other young children who might not be enrolled at school?

63. What do you discuss during home visiting programmes specifically for learners with special needs?

64. What is your perception of the school community’s treatment of children with special education needs?

65. How do you solve the problem if the relationship among the learners with special needs and community is not good?

SECTION E: Social Protection sector in ECDSEN programme

67. Does the government provide assistance to children with special education needs?

68. What type of assistance do children with special needs get?

69. Which other line Ministries that support ECDSEN programmes in Chiredzi district?

70. Is there anything stakeholders provide for ECD “A” and “B” learners with special education needs?

71. What exactly do they do for children with special education needs?
72. Who else is providing assistance for learners with special need?

73. Is there specific assistance that is provided to ECD teachers by line ministries to improve their delivery in ECD “A” and “B” classes? Yes [ ] No [ ]

74. If your answer is yes how do teachers’ improve?

Section E: Strategies adopted by ECDSEN sector programmes

Strategies used by teachers

75. Are there workshops to assist ECD “A” and “B” teachers?
   Yes [ ] No [ ]

76. Do teachers benefit from the workshops teachers?

77. Do teachers have the capacity to improve individual learning needs of students at ECD “A” and “B” level? Yes [ ] No [ ].

78. What do teachers do to improve individual needs of ECD children with special needs?

79. If no, how are they currently delivering in ECD “A” and “B” inclusive classes?

80. Are there any other ways that teachers are assisted to mobilise learning materials in classes where they are children with special needs?
   Yes [ ] No [ ]

81. If no, how do teachers adapt materials to suit the needs of children with special needs?

82. Are there strategies that teachers are employing to assist each other to deliver effectively in classes where they are children with special needs? Yes [ ] No [ ]

83. Explain the strategies that teachers at your school are using to improve teaching of children with special education needs?

Strategies used by School heads

84. Does the School head make class supervision visits in ECD “A” and “B” classes?
   quite often [ ] sometimes [ ] never [ ]

How often do school heads make class visits?

85. How do you rate the knowledge of school heads regarding knowledge of learners with special needs? Good [ ] average uninspiring [ ]

86. If no what could be the major problem why they do not discuss children with special needs after supervision?

87. Have you found school heads, deputy head and (Teacher in Charge) TIC’s supervision visits to be helpful? Yes [ ] No [ ]

88. Does the school head hold discussions highlighting where you should improve after supervising you? Yes [ ] No [ ]
89. Do you hold staff development programmes that focus on teaching children with special education needs?  Yes [ ]  
No [ ]

87. How have you found staff development programmes on delivery of programmes for children with special needs?  Yes [ ]  
No [ ]

88. Has the school head ever arranged school visits to learn from others on how to effectively implement ECD “A” and “B” programmes for children with special education needs?  Yes [ ]  
No [ ].

89. If your answer was yes explain whether the visit was a worthwhile tour.  

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Strategies used by The District Education Team

90. Does the District Education team make supervisory visits to assess ECD programmes?  Yes [ ]  
No [ ]

91. During the District Education Team’s visits, do they ever discuss cases of children with special education needs?  Yes [ ]  
No [ ]

92. Have you found such supervision visits from the District Education Team helpful on your teaching of children with special 
education needs?  
Yes [ ]  
No [ ]

93. Does the district education team provide schools/teachers with documents to guide you on how to cater for children with special 
education needs?  
Yes [ ]  
No [ ]

94. Do you benefit from the supervision of classes by the District Education Team?  Yes [ ]  
No [ ]

95. What advice have they given you on ways to improve special education needs at ECD “A” and “B” level?  
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96. Are there programmes that the district education team provide to schools to enhance programmes for children with special 
education needs?  Yes [ ]  
No [ ]

97. How many times has the District Education Team supervised teachers in the past six months?  
Not yet visited [ ]  
onece [ ]

98. How else can the District Education Team assist teachers to improve delivery of services in ECDSEN children?  
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99. Do schools receive documents from the government through the District Education Team to guide teachers on ways to 
implement programmes for children with special education needs?  
Yes [ ]  
No [ ]

100. Give an example of some of the documents and how they enhance implementation of special education needs in schools.  
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Strategies used by parents in the delivery of ECDSN

101. Do parents from the school community assist teachers to implement the ECD programme for children with special 
education needs?  Yes [ ]  
No [ ]

102. If yes explain exactly what parents are doing to assist teachers to implement ECD “A and “B” programmes?  
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103. Are there some parents who are against the inclusion of children with special needs ECD classes?  
Yes [ ]  
No [ ]
104. How do you assist parents who do not appreciate inclusion of children with special needs in ECD “A” and “B” classes?

105. Are there programmes that parents do to enhance the implementation of ECD “A” and “B” classes where they are children with special education needs?

Yes [ ] No [ ]

106. If your answer is yes explain how parents are assisting ECD programmes?

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SECTION F: Support and monitoring for Stakeholders’ performance in the delivery of ECDSN

The Role of School Heads

107. Has the government ever organised for school heads workshops to improve the teaching of children with special needs?

Yes [ ] No [ ]

108. If yes, did you benefit from some workshops that school administrators attend to?

Yes [ ] No [ ]

109. Do school heads help ECD teachers with learning resources that seek to improve learning of children with special needs?

Yes [ ] No [ ]

110. Explain the nature of programmes that you are organising for your teachers to improve implementation of ECD programmes.

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111. Do school heads organise parental school meetings to change their attitudes towards children with special needs?

Yes [ ] No [ ]

Support from Non-Governmental Organization

112. Are there some organisations that are assisting ECD “A” and “B” children with school fees, food at the school?

Yes [ ] No [ ]

113. If yes which organisations are specifically assisting children with special education needs at your school?

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114. Do you find that assistance to be sufficient for ECD “A” and “B” children with special education needs?

Yes [ ] No [ ]

115. If your answer is yes were no how would you want the assistance disbursed to meet the needs of children with special needs?

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116. Are there non-governmental organisations that are working with your school to improve the condition of children with special education needs?

Yes [ ] No [ ]

117. Specify what has been done over the past 5 years for the school to improve catering for children with special education needs.

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118. Explain the nature of psychosocial support for ECD children with special education needs provided by non-governmental organisation(s) in the past 5 years.

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119. Are the services that are offered by NGOs been helpful to promote effective implementation of the ECD “A” and “B” programmes in your school?

Yes [ ] No [ ]

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120. What role have they played in supporting children with special education needs at ECD level?

121. Has there been training for ECD "A" and "B" teachers initiated by non-governmental organisations to improve them to cater for children with special needs in the past 5 years?

Yes [    ]  No [    ]

122. If yes, what training have they offered?

123. Do you offer training for parents of children with special education needs?

Yes [    ]  No [    ]

124. If yes what was the training by non-governmental organisations?

125. If no, what kind of training would you suggest for them to be able to assist ECDSNE programmes.

Support from school psychologists

126. Has the District Schools' psychologist ever visited the school in the last six months to provide in-service training to teachers and school heads on how to identify and manage children with special education needs in ECD settings?

Yes [    ]  No [    ]

127. Do you feel all children with special education needs are adequately assisted by the school psychologist?

Yes [    ]  No [    ]

128. If your answer is no what can be done to improve service delivery in ECD settings for ECDSEN children?

The support and monitoring from the government

129. Does the district schools psychological tutor together with the ECD trainer convene workshops for teachers to assist them to properly handle children with special education needs?  

Yes [    ]  No [    ]

130. Have the workshops been helpful?  Yes [    ]  No [    ]

131. If no what could be the problem?

132. Is monitoring and assessment of ECD programmes coming from the government?

Yes [    ]  No [    ]

133. Give an explanation of how the government monitors ECD "A" and "B" programmes for children with special education needs.

134. Does the government design and approve an ECD syllabus which guides the teaching of ECD children with special education needs?  Yes [    ]  No [    ]

135. Who is monitoring ECD "a" AND "B" programmes for children with special education needs?

136. Has there been training workshops in the past 1 year designed to assist teachers on their ECDSEN programme delivery?

Yes [    ]  No [    ]
137. Who is paying teaching staff in ECD settings?
The government [     ] Parents [     ] Non-Governmental organisations [     ]

138. If you answer is that the government is paying them, explain how this is assisting implementation of programmes of children with special education needs?
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139. What specific documents do teachers get from the government to support ECD effective implementation of ECD “A” and “B” programmes where they are children with special needs?
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Support and monitoring from the Responsible authority/ Local government

140. Does the responsible authority (e.g., church, council etc.) support ECDSEN activities in schools? Yes [     ] No [     ]

141. In the past five years, what has the responsible authority done to support the school regarding ECDSEN programme?
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Thank you for sparing your time to respond to this questionnaire.
APPENDIX 7 B: Questionnaires for School heads on the provision of early childhood development programme for children with special education needs in Chiredzi district-Zimbabwe

Section A: General Background of the Participant

Date of questionnaire distribution

1. Position of participant
2. Class being taught/ last taught before administration work
3. 
4. Name of school
5. What is the type of school? Government [ ] Estate [ ] Rural District Council [ ] Church [ ]
6. Location of school: Urban [ ] Estate [ ] Rural [ ]

*Personal and Professional Characteristics of School Head/ and TIC.*

7. Gender: Male [ ] Female [ ]
8. Age: 20-29 years [ ] 30-39 years [ ]
   40-49 years [ ] 50-59 years [ ] 60-65 years [ ]
9. What is your academic qualification? .................................................................
10. Other specify ........................................................................................................
11. What is your highest professional qualification?
   Certificate in education [ ] Diploma in education [ ]
   Bachelor of education [ ] Honours in education [ ]
   Master’s in education [ ]
12. Other specify .................................
13. What is your administrative experience as a head/ TIC?
   Less than 1 year [ ]
   1-5 years [ ]
6-10 years [ ]
11-15 years [ ]
16-20 years [ ]
20 years and above [ ]

14. Do you have an understanding of how to supervise teachers delivering to ECD “A” and “B” children with special needs? Yes [ ] No [ ]
15. Do you enrol children with special education needs in ECD classes? Yes [ ] No [ ]
16. If no, are there children with special needs in the school community?

Section B: Early childhood development sector programmes (ECDSEN)

The Health and nutrition Sector

17. Do you have enough health and nutrition facilities for ECD learners as per policy requirement? Yes [ ] No [ ]
18. Specifically do you have sanitation facilities at the school designed for children with special needs? Yes [ ] No [ ]
19. Do you enrol ECD children with special education needs whom you find not having been immunised against killer diseases? Yes [ ] No [ ]
20. In such a situation, what do you do to assist such children?

The education Sector

21. Does the school have a nutrition programme for ECD “A” and “Children”? Yes [ ] No [ ]
22. Does the school have a specific nutrition programme for children with special education needs (e.g. those with HIV and AIDS patients)? Yes [ ] No [ ]
23. Do you have a supplementary feeding programme for ECD “A” and “B” children? Yes [ ] No [ ]
24. Who assist teachers to prepare the supplementary feeding for the ECD “A” and “B” children?

25. Do you normally encounter problems with regard to preparation of supplementary feeding? Yes [ ] No [ ]
26. If your answer is yes, explain how does the problem affect the teaching of ECD “A” and “B” children

The education Sector

27. What are the current teacher pupil ratios in your ECD “A” and “B” classes? ……………………..
28. Do you have assistant teachers in classes where there children with special needs? Yes [ ] No [ ]
29. What is the number of children with special needs at ECD level? ……………………..
30. Does the school have a resource room for to facilitate the teaching of children with special needs? Yes [ ] No [ ]
31. If yes how do ECD teachers utilise the resource room to utilise the teaching of children special needs? ……………………………………………………………………………………………………………..
32. Do teachers have a special arrangement for teaching children with special education needs? Yes [ ] No [ ]
33. Is there an additional teacher in each class where there are more than 7 children with special needs? Yes [ ] No [ ]
34. Are teachers confident to deliver in ECD “A” and “B” classes where there are children with special education needs? Yes [ ] No [ ]
35. How often do you supervise ECD “A” and “B” classes per term? Once per term [ ] Twice per term [ ] Three times per term [ ]
36. In your opinion, do the ECD teachers have the skills to teach children with special education needs at that level?  
Yes [ ]  No [ ]  

37. How do you rate the attitude of teachers towards the teaching of children with special education needs?  
Negative [ ]  they are in between [ ]  positive [ ]  

38. Do you feel competent to supervise ECD “A” and “B” classes where there are children with special needs easy?  
Yes [ ]  No [ ]  

39. If no what can be done to enable school administrators to gain confidence during supervision of ECD “A” and “B” teachers delivering in classes where there are children with special education needs?  

40. What is the general attitude of ECD teachers towards teaching children with special education needs?  
Positive [ ]  Negative [ ]  

41. If negative, how are you improving teacher, parent, and other children’s attitudes towards children with special education needs?  

Social protection sector programmes for ECDSEN  

42. Are all ECD “A” and “B” children adequately provided for from their homes?  
Yes [ ]  No [ ]  

43. If the answer is no, how does the school assist such children with special needs?  

44. Does the government assist such children who have special needs?  
Yes [ ]  No [ ]  

45. If your answer is yes explain how the children with special needs are helped by government  

46. Are there other organisations that are assisting children with special education?  
Yes [ ]  No [ ]  

47. If yes which other organisations help the ECD “A” and “B” children with special needs?  

48. Is there a committee that selects children for social welfare programmes?  
Yes [ ]  No [ ]  

49. Who constitute this committee?  

50. Is the committee fair in its section of those children who eventually benefit from the Social Welfare?  
Yes [ ]  No [ ]  

51. How do the selected children benefit?  

52. Are ECD “A” and “B” children with special needs at home also benefiting from the social welfare?  
Yes [ ]  No [ ]  

53. How often do government grants and other subsidies come for those who are selected to benefit?  
Every month [ ]  every term [ ]  not predictable [ ]  

54. What is the general attitude of ECD teachers towards teaching children with special education needs?  
Positive [ ]  Negative [ ]  

55. If negative, how are you improving teacher, parent, and other children’s attitudes towards children with special education needs?  

SECTION D: Strategies that are adopted by the school heads  

54. Are you collaborating with other stakeholders towards educating children with special needs?  
Yes [ ]  No [ ]  

55. If your answer is yes, how often do you hold meetings with stakeholders on education for children with special needs  
At least every school term [ ]  whenever we feel there is a problem [ ]  

56. What issues do you normal discuss during such meetings?  

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57. Are stakeholders excited about such joint meetings on how to cater for ECD “A” and “B” children with special education needs? 
   Yes [ ] No [  ]

58. Are there some stakeholders who have shown willingness to help those children directly? 
   Yes [ ]
   No [ ]

59. If your answer is yes, what help has been given to such children
   ........................................................................................................................................

60. Did you experience certain stakeholders who have negative attitudes towards children with special needs? 
   Yes [ ]
   No [ ]

61. How have you intervened to serve the situation?
   ...........................................................................................................................................

62. Do you hold staff development workshops for your teachers on how to teach children with special education needs? 
   Yes [ ]
   No [ ]

63. Have you found these staff development workshops beneficial to the way ECD “A” and “B” children with special needs are handled? 
   Yes [ ]
   No [ ]

64. If yes, have teachers improved their teaching methods after such workshops? 
   Yes [ ]
   No [ ]

65. Is your school having adequate learning resources (such as, outdoor and indoor learning materials) for children with special education needs? 
   Yes [ ]
   No [ ]

66. If no, how are you looking forward to improving the situation?
   ...........................................................................................................................................

67. Are people accepting the concept of Inclusive Education of ECD“A” and “B” children during those public campaigns? 
   Yes [ ]
   No [ ]

Strategies adopted by teachers

68. Are teachers using diverse methods of teaching ECD learners with special education needs? 
   Yes [ ]
   No [ ]

69. If yes what methods do the frequently use in ECD “A” and “B” classes?
   ...........................................................................................................................................

70. Has this helped the teachers to improve their delivery of teaching in ECD “A” and “B” classes where they are children with special needs? 
   Yes [ ]
   No [ ]

71. If yes, in which way have the teachers improved their lesson delivery in ECD “A” and “B” classes?
   ...........................................................................................................................................

72. Is ECD“A” and “B” class teachers’ teaching children with special needs relationship with parents cordial? 
   Yes [ ]
   No [ ]

73. If yes explain what has made that relationship cordial?
   ...........................................................................................................................................

Strategies adopted by Government

74. Do you allow teachers and parents to design individual curriculum for children with special education needs? 
   Yes [ ]
   No [ ]

75. If yes explain how this has assisted teachers improve the delivery of lessons specifically for children with special needs.
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76. Do teachers use a national syllabus for ECD “A” and “B” classes? 
   Yes [ ]
   No [ ]

77. Does ECD“A” and “B” syllabus accommodate concerns of children with special education needs? 
   Yes [ ]
   No [ ]

78. Does the government provide learning resources (e.g. indoor learning materials) to assist learners with special needs in ECD“A” and “B” class? 
   Yes [ ]
   No [ ]

79. If yes explain whether there is a department or organisation that manufacture learning resources that target children with special education needs
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80. Does the government have a quality assurance monitoring system to supervise implementation of ECD“A” and “B” programmes for children with special needs? 
   Yes [ ]
   No [ ]
81. Does the government’s quality monitoring team initiates in-services programmes for teachers and school heads to improve teaching in ECD “A” and “B” classes for children with special education needs?

     Yes [    ]        No [    ]

82. If yes how many times have they initiated workshops of such nature in the past two years?

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**Strategies adopted by non-governmental organisation in delivery of ECD**

83. Are Non-Governmental organisations engaged in ECDSEN at this school? Yes [    ]        No [    ]

84. Do Non-Governmental Organisations involve parents in inclusive education at ECD level?

     Yes [    ]        No [    ]

85. Have there been in-service workshops for teachers initiated by non-governmental organisations to support children with special education needs? Yes [    ]        No [    ]

86. Do Non-Governmental organisations work with ECD teachers for special needs learners on how to make learning materials or outdoor equipment? Yes [    ]        No [    ]

87. Are there Non-Governmental Organisations who assist ECD”A” and “B” special needs learners with supplementary feeding to reduce malnutrition and absenteeism? Yes [    ]        No [    ]

88. Are Non-Governmental organisations contributing to the successful implementation of the ECD "A" and "B" programme?

     Yes [    ]        No [    ]

**SECTION D: Support and Monitoring provided by Stakeholders in the provision of ECDSEN Programmes**

**The Support provided the International Community**

89. Does the International community support ECD”A” and “B” programme of children with special needs?

     Yes [    ]        No [    ]

90. Are there some exchange programmes for teachers to observe good inclusive education practices for ECD “A” and “B” programmes in other schools? Yes [    ]        No [    ]

91. If yes, how many have been taken from your district, in the past one year.

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92. Does the International community help schools with information resources such as booklets to assist them to implement Inclusive education? Yes [    ]        No [    ]

93. If yes how have the books been helpful?

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**Support and monitoring provided by the District Education team for the implementation of inclusive education**

94. Does the District Education team supervise and monitor ECD programmes for children with special needs? Yes [    ]        No [    ]

95. If yes how many times have they visited the school for such supervision in the past 12 month?

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96. Does the District Education Team assist schools with technical support on making teaching and learning materials? Yes [    ]        No [    ].

97. If yes what strategy does the district education team use to support schools with teaching and learning material for children with special education needs?

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98. Does the district education team insist on particular documents that schools should use for children with special education needs?  Yes [ ]  No [ ]

99. If yes, give an example of these documents?

______________________________________________________________________________________________________________________________________________________________

Section F: Support by Non-governmental organisations in the delivery of Inclusive education

100. Do non-governmental organisations assist ECD teachers with skills to handle children with special education needs?  Yes [ ]  No [ ]

101. If yes what opportunities have been offered to ECD “A” and “B” teachers to improve their teaching of children with special needs?

______________________________________________________________________________________________________________________________________________________________

102. Are there other ECD teachers that have been offered opportunities to learn good delivery practices of ECD programmes for children with special education needs in other schools locally or abroad?  Yes [ ]  No [ ]

103. Do non-governmental organisations engage parents in running ECD programmes for children with special education needs?  Yes [ ]  No [ ]

104. Do non-governmental organisations help ECDSEN children with special education needs with health and nutrition needs?  Yes [ ]  No [ ]

105. Do you engage Non-Governmental Organisations in the ECD programme for children with special education needs?  Yes [ ]  No [ ]

106. If yes which Non-governmental organisations have been working your school?

______________________________________________________________________________________________________________________________________________________________

107. In the past five years has your school been encountering problems regarding working with non-governmental organisation?  Yes [ ]  No [ ]

108. If yes what have been the problems which you feel non-governmental organisations can do to improve delivery of ECD programmes in general?

______________________________________________________________________________________________________________________________________________________________

Support provided by parents in the delivery of ECDSEN

109. How often have you worked with parents in ECD programmes for children with special education needs?  Never [ ]  they are always engaged [ ].

110. If never, what has been the problem?

______________________________________________________________________________________________________________________________________________________________

111. Are parents of SEN children willing to enrol their children in ECD setting?  Yes [ ]  No [ ]

112. Do parents pay the fees for ECD children?  Yes [ ]  No [ ]

113. If your answer is yes, how else do parents contribute to the successful delivery of the ECD programme for special education needs?

______________________________________________________________________________________________________________________________________________________________

114. Do children with special education needs pay fees/levies?  Yes [ ]  No [ ]

115. If no what arrangements do you have for such ECD “A” and “B” children with special education needs in ECD settings?

______________________________________________________________________________________________________________________________________________________________

Support provided by other Ministries to support ECDSEN programmes
116. Do other ministries support schools to implement ECD programmes? Yes [    ] No [    ]

117. If yes which are these other ministries that help schools to implement ECD programmes?

..................................................................................................................................................................................

118. How do the schools benefit from the ministries that you have cited?

..................................................................................................................................................................................

119. Is there a Ministry which specifically support ECD "A" and "B" programmes for children with special education needs? Yes [    ] No [    ]

120. Suggest briefly how other government Ministries can assist Chiredzi district to improve the delivery of ECD "A" and "B" program for children with special education needs.

..................................................................................................................................................................................

Support by the District schools' psychologist in supporting ECDSEN programme

123. Do the district psychologist and ECD district trainer hold joint workshops to assist teachers to improve their delivery of ECDSEN? Yes [    ] No [    ]

124. Do the District psychologist and ECD trainer visit children with special education needs who are not enrolled in schools? Yes [    ] No [    ]

125. Have there been in-service workshops in the past two years initiated by the District School’s psychologist and the ECD trainer to assist school heads and teachers to identify, assist and monitor ECD "A" and "B" children with special needs programmes? Yes [    ] No [    ]

126. If yes how did the workshops benefit staff members?

THANK YOU VERY MUCH
Appendix 8 A : Interview A

Interview guide for district education officers/ education officers on provision of early childhood education in Chiredzi district Zimbabwe general background information

SECTION A: Background information

Name of interviewer: ……………………………………………………………………..
Date of interview: ……………………………………………………………………………
Position of participant……………………………………………………………………..
Sex: ……………………………………………………………………………………………
Age: …………………………………………………………………………………………
What is your highest professional qualification? …..........................................
What is your experience in the current position? …............................................

SECTION B: Bibliography data of the district on children with special needs in ECD

1. How many ECD settings do you have in the district?
   ……………………………..
2. How many are in your zone/circuit of schools?
3. ……………………………..
4. What is the total enrolment of the ECD students in the district?
5. ……………………………..
6. How many ECD children with special education needs are enrolled in mainstream schools?
   ……………………………..
7. What is the total establishment of college trained ECD teachers in the district?
   ……………………………..
8. Of these teachers, how many qualify to teach ECD “A” and “B” children with special needs?
   ……………………………..
9. Are there cases in the district of children aged 3-5 years old with special needs who are not enrolled in schools?
   ……………………………..
10. How does the district plan to reach these children?
    ………………………………………………………………………………………………..

SECTION C: The Early Childhood Development Special Needs (ECDSEN) sector programmes

The Health and Nutrition sector

11. Which health issues for ECD “A” and “B” children with special needs are mostly reported in schools?
    ………………………………………………………………………………………………..
12. How does your office ensure that every child with special education needs’ health is adequately addressed?
    ………………………………………………………………………………………………..
13. What is the health and sanitation condition in schools where ECD “A” and “B” classes?
    ………………………………………………………………………………………………..
14. How does your office ensure that ECD “A” and “B” children with special education needs’ health requirements are adequately catered for in ECD settings?
    ………………………………………………………………………………………………..
15. Generally how cooperative is the Ministry of Health and Child Welfare to assist ECD children’s health conditions in ECD settings?
    ………………………………………………………………………………………………..
16. Is there any tracking system of children with special education needs (i.e., identified by the Ministry of Health personnel and handed over to the ECD settings)?
    ………………………………………………………………………………………………..
17. What programmes for nutrition do you have for ECD “A” and “B” children with special needs in the district?

The Education sector

18. What is your total staffing of ECD teachers in the district?
19. Are all primary schools now having ECD “A” and “B” classes?
20. How many of these teachers are qualified to teach ECD?
21. Which categories of ECD “A” and “B” children with special needs do primary schools enrol?
22. Do schools have resource centres that assist teachers to deliver to children with special needs?
23. Do ECD “A” and “B” teachers have the attributes of catering for those children with special needs do teachers?
24. Which skills have you experienced good ECD “A” and “B” teachers employing in classes where there are children with special needs?
25. Which methods do the teachers most frequently use to assess children with special education needs?
26. Judging from your assessment experience of ECD settings and teaching, do you feel the teachers have the capacity to cater for ECDSEN?
27. Do you see school heads as having the ability to supervise and monitor ECD “A” and “B” programmes for children with special needs?
28. What is your office doing to ensure school heads improve their supervision and monitoring techniques of ECDSEN programmes?
29. What is your opinion regarding conducting staff development workshops to improve the delivering of lessons in classes where they are for children with special education needs?
30. How does the District office ensure teachers in ECD “A” and “B” settings improve their ways of catering for children with special education needs?
31. How effective is the district psychologist tutor and the ECD trainer in improving teachers’ capacity to cater for children with special education needs?
32. How does the District Education office ensure that children with special needs are not discriminated in ECD settings?
33. How does the District Education office ensure that ECD settings work together with other stakeholders to improve delivery of lessons for children with special needs?
34. Does your office feel ECD teacher training is offering relevant courses that promote ECD Inclusive education programme? Explain your answer
35. Does the district education offers have plans to equip teachers with relevant skills?

The Social Protection sector
36. How does your office ensure that ECD settings are collaborating with other organisations and/ ministries to improve teacher/learner competencies for ECDSEN?

37. How do those organisations assist ECD settings to improve their services for children with special education needs?

38. Specifically other ministries that operate in the district to improve competency of ECD teachers on ECDSEN?

39. Specify how those other Ministries assist ECD learners with special education needs in the districts?

40. Explain how other ministries assist teachers to improve their services for ECD “A” and “B” children with special education needs in the district?

41. Are there cash transfers from the government that benefit ECD “A” and “B” children with special education needs?

42. Other than the government, what other organisations assist ECD “A” and “B” children with special education needs?

43. How do the organisations you cite above assist the young children with special education needs?

SECTION D: Strategies used the DEO to cater for ECD children with special education needs

44. How does the District Education office ensure that all schools with ECD centres and those private ones have adequate health and nutrition facilities?

45. How do you ensure that the following categories of stakeholders are not discriminating ECD “A” and “B” children with special education needs?
   a) teachers
   b) schoolheads
   c) parents
   d) other school children

46. Do you feel adequately prepared to supervise and advice teachers on how to implement ECD “A” and “B” programmes for children with special education needs?

47. What does the government do to improve stakeholder competency on catering for ECD “A” and “B” children with special needs?

48. What advice can you give schools on ways of improving ECD “A” and “B” curriculum so that it accommodates all young learners including children with special needs?

49. What kind of support do you give to teachers and school heads that improve their service delivery to ECDSNE classes?

50. What advice would you give to school heads and teachers that would assist them to improve their monitoring of ECDSNE programmes?
SECTION E: The role performed by other stakeholders in the implementation of inclusive education.

Teachers
51. Do you ECD teachers in the district as role Models of enhancing Inclusive education programmes?

52. How does your office ensure that ECD teachers improve their competency on catering for children with special education needs?

The roles school managers perform to improve catering of inclusive education
53. How does your office ensure that school managers improve the learning of ECDSEN children?

54. How does your office assist schools to create partnership with different organisations to promote a responsive curriculum for ECD children with special education needs?

55. How does your office ensure that school managers have positive relationship with parents whose children have special education needs?

The role Non-governmental organisation perform cater for ECD children with special education needs in inclusive education
56. Does your office facilitate partnership between schools and non-governmental organisations to promote Inclusive programmes in ECD “A” and “B” classes?

57. What specific activities have been done by non-governmental organisations in support of ECD “A” and “B” programmes for children with special education needs?

58. In the period from 2007 what projects have been initiated by non-governmental organisations towards ECD programmes for children with special needs?

The Role performed by Parents in catering for children with special education needs in inclusive ECD settings
59. How does your office engage parents to be supportive to ECD “A” and “B” programmes for special education needs?

60. How are parents generally reacting to educating ECD “A” and “B” children with special education needs?

61. How does your office engage non-governmental organisations to partner with parents to support projects that promote ECD “A” and “B” children with special needs’ education?

62. Does your office assist schools to engage parents in curriculum designing for children with special education needs?

The Role played by line Ministries to deliver delivery in inclusive ECD “A” and “B” curriculum
63. What other governmental ministries are engaged in the ECD programme?

64. What support services does each of the ministry you mentioned offer to improve the delivery of ECD “A” and “B” children with special needs in schools?

65. What problems are mostly encountered by those ministries to effectively implement ECD programmes of children with special needs in the District?
The Role performed by the District Education psychologist to implement inclusive ECD programme

66. Does the District Education psychologist hold workshops with teachers and school heads on how to deal with children with special needs?

67. Does the District Education psychologist do home visits to meet with parents whose children have special needs?

68. How does your office monitor the programme of the District Education psychologist to ensure that he meets the needs of ECD “A” and “B” children with special education needs?

69. What categories of people does the District Education Psychologist attend to in order to meet the needs of ECD “A” and “B” children with special education needs?

70. What do you see as the major problem that hinders the District Education psychologist to effectively attend to all ECD “A” and “B” children with special education needs?

THANK YOU VERY MUCH
Appendix 8 B: Interview B

Interview guide for Non-governmental organization personnel on provision of ECD programme for children with special education needs in Chiredzi district-Zimbabwe

SECTION A: Background Information

Name of interviewer: ………………………………………………………………………………………………………
Date of interview: ………………………………………………………………………………………………………
Position of participant………………………………………………………………………………
Sex: …………………………………………………………………………………………………………………
Age: …………………………………………………………………………………………………………………
What is your highest professional qualification? ………………………………………………………
What is your experience in the current position? ………………………………………………………

SECTION B: Bibliography data of the district on children with special needs in ECD

1. How is your organisation involved in early childhood development in Chiredzi district schools?

2. How many ECD settings do you have in the district? ………………………………………

3. Do you have figures of the total enrolment of ECD students in Chiredzi district?

4. Do you have the total number of ECD children with special education needs enrolled in mainstream schools? …………………………………………………………………………………………………………………

5. How many children with special needs are you serving? …………………………………

6. Does your organisation assist ECD “A” and “B” children with special needs who are not enrolled in ECD settings?

7. How is your organisation hoping to reach these children?

8. Are there programmes that your organisations do with schools or communities to assist ECD “A” and “B” children with special needs?

9. How do schools and parents take those projects?

10. Do you have future programmes that you would like to engage schools in to ensure all ECD “A” and “B” children with special needs are well catered for?

11. Does your organisation also support families whose ECD “A” and “B” children have special needs?

12. Does your organisation engage in home visit programmes for parents and “A” and “B” children with special education needs?

13. What programmes have you done with teachers to help them improve their lesson delivery to ECD “A” and “B” children with special education needs?
14. How are you engaging local communities to change their attitudes towards inclusive education?

15. What challenges has your organisation faced in its effort to assist schools and parents to improve the welfare of ECD “A” and “B” children with special needs?

16. Suggest ways teachers and schools heads could benefit from partnership with your organisation to improve the welfare of ECD “A” and “B” children with special needs?

THANK YOU VERY MUCH
Appendix 8 C: Interview C

Interview guide for school heads, in the provision of delivery of ECD programme for children with special education needs in Chiredzi district-Zimbabwe

SECTION A: Background Information
Name of interviewer: …………………………………………………………………………..
Date of interview: ………………………………………………………………………………..
Position of participant………………………………………………………………………..
Sex: ………………………………………………………………………………………………
Age: ………………………………………………………………………………………………
What is your highest professional qualification? …………………………………………..
What is your experience in the current position? …………………………………………..

SECTION B: Bibliography data of the district on children with special needs in ECD
1. How many ECD children do you have at your school? …………………………………
2. How many have special needs? …………………………………………………………..
3. How many ECD teachers are qualified? …………………………………………………
4. How many of these ECD teachers are qualified to teach children with special education needs in mainstream schools/classes? ………………………………………
5. Are there cases of children with special needs not enrolled at this school?
6. How is the school planning to reach these children?
7. How many ECD qualified teacher do you have? ………………………………………
8. Are you happy with the performance of teachers regarding the handling of children with special education?
9. How does teacher pupil ratios in ECD “A” and “B” classes affect delivery of lessons to children with special education needs?
10. How many ECD “A” and “B” children with special education needs are enrolled at the school?
11. To what extent are teachers willing to ECD “A” and “B” children with special education needs?

SECTION B: Health and Nutrition in ECD settings for children with special education needs
12. How do you ensure that ECD “A” and “B” children with special needs are immunised?
13. What sanitation facilities do you have for those ECD “A” and “B” children with special needs?
14. How has the school adjusted its environment to accommodate the needs of all children including those with special needs?
15. What supplementary feeding do you offer to ECD “A” and “B” children?
16. Who provides the school with supplementary food for the ECD “A” and “B” learners?
17. Who monitors the health of children with special needs?
18. Who
19. In your opinion does the school meet health standards as required by the national ECD guidelines?
The Education sector

20. How often do you carry out ECD class supervision per term?

21. Are ECD “A” and “B” children with special needs well catered for?

23. In your opinion, do you think the ECD curriculum appeals to children with special education needs?

24. Do you consider the indoor materials and outdoor equipment at the school as able to support Holistic development of ECD learners with special needs?

25. Which good practices are shown by teachers in the delivery of ECD “A” and “B” children with special education needs?

26. Have you improved school infrastructure to accommodate ECD “A” and “B” children with special education needs (e.g., ramps, toilets etc.)?

27. In your own opinion, are ECD “A” and “B” teachers adequately prepared to work in classes with special needs children?

28. What is the general attitude of (a) other children (b) other teachers (c) other parents on ECD “A” and “B” children with special education needs?
   a) Other children
   b) Other teachers
   c) Other parents

29. What is your school doing to change school communities’ attitudes towards children with special needs in general?

SECTION C: The Social Protection sector

30. As a school, do you have an arrangement to assist children with special education needs who come from broken homes?

31. How does your school select those children for help?

32. What type of assistance do ECD “A” and “B” children with special education needs get from the government?

33. Are there cash transfers for ECD “A” and “B” children with special education needs and their families from the government?

34. How reliable is that assistance to those children with special needs who are selected to benefit?

35. Other than the government, are there other organisations that support ECD “A” and “B” children with special needs (e.g., with cash, food, food etc.)?

SECTION D: Support and monitoring roles by different stakeholders in ECD settings
What roles do Teachers perform?
36. In your opinion, are teachers able to organise ECD “A” and “B” curriculum to benefit all ECD children including those with special education needs?

37. In your opinion, are teachers having the skills to monitor and assess programmes for ECD “A” and “B” children with special needs?

38. In your own opinion, are teaching methods accommodating the needs of ECD “A” and “B” children with special education needs?

39. How are ECD “A” and “B” teachers collaborating with parents of children with special education needs?

40. How are ECD “A” and “B” teachers benefiting from each other to improve skills to cater for children with special education needs?

Support and monitoring by School Managers for schools to cater for children with special needs
41. During your supervision of ECD “A” and “B” teachers did you find them adequately catering for all children?

42. How do you ensure that stakeholders are supporting ECD teachers in their effort to cater for children with special needs?

43. How do you support ECD “A” and “B” teachers with resources that benefit all children benefit all learners?

44. How do you help teachers to share best practice to apply to ECD “A” and “B” classes where there are children with special needs?

Support and monitoring by Non-governmental organisation
45. How do you involve non-governmental organisations to support ECD “A” and “B” children with special needs?

46. What programmes are offered by non-governmental organisations to ECD “A” and “B” teachers to assist them to improve their service delivery system to classes where they are children with special needs?

47. What activities have non-governmental organisations engage schools in the past 5 years, which have helped to implement ECD “A” and “B” classes?

The support and monitoring by parents in catering for children with special education needs in inclusive ECD settings
48. In your opinion, do parents value ECD “A” and “B” children with special needs’ education?

49. In your opinion, do parents support the education of ECD “A” and “B” children with special education needs?

50. In what way do parents contribute towards the education of their ECD “A” and “B” children with special needs?

The support and monitoring by other ministries towards ECD “B” children with special education needs
51. In your opinion, how does the Ministry of Health and Child Welfare ensure that ECD “A” and “B”s learning environment is free from any form of danger?

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52. How do you engage the Ministry of Health and Child Welfare to vaccinate children who might not have been immunised children against child killer diseases?

53. How do you assist ECD “A” and “B” children with special needs to access government grants and cash transfers?

54. How does your office involve the Ministry of Local Government to assist teachers with learning materials and outdoor equipment?

The support and monitoring by the District Education Psychologist in catering for ECDSEN in inclusive settings

55. How do you engage the District Education Psychologist to hold workshops with teachers and parents on identification, assessment, and monitoring of ECDSEN programmes?

56. How do you ensure that the District Education Psychologist does home visits to advice parents’ on how to cater for ECD “A” and “B” children with special education needs?

57. How do you ensure that each child’s unique needs is captured and passed to the District Education Psychologist for onward therapy?

58. Suggest ways in which schools can improve catering for children with special education needs in ECD settings.

THANK YOU VERY MUCH
Appendix 8 D: Interview D

INTERVIEW GUIDE FOR HEALTH PERSONNEL

SECTION A: Background Information
Name of interviewer: ........................................................................................................
Date of interview: ...........................................................................................................
Position of participant: ................................................................................................
Sex: .................................................................................................................................
Age: .................................................................................................................................
What is your highest professional qualification? ............................................................
What is your experience in the current position? ...........................................................
What is your capacity in the health department? ............................................................

SECTION B: Involvement of the Health department in the ECD program
1. To what extent is your ministry involved in early childhood development programmes in schools?

2. Which specific policies for ECD (0-8 year olds) children with special education needs does the ministry have (e.g., on health and nutritional needs)?

3. How is your Ministry involved in ECD "A" and "B" (children aged zero to eight years)?

4. How is your ministry involved in ECD children with special education needs?

5. What programmes do you have for families of children with special education needs?

6. How do you monitor and supervise the health programmes for ECD children in schools?

7. What follow-up measures does your Ministry make to those children diagnosed with special needs?

8. In your opinion are schools offering good nutritional standards to those children aged 3 to 6 years?

9. In your opinion, are schools offering ECD programmes meeting good health standards?

10. What is the current condition of sanitation facilities in schools offering ECD?

11. How does your ministry access those children with special education needs who are not enrolled in ECD settings?

12. What have you seen as major challenges that ECD centres have regarding offering of education to children with special education needs?

13. Does your ministry have a policy for compulsory immunisation programme for those children less than eight years?
13. Are children with disabilities also immunisation immunised?

14. How can you assist ECD institutions to improve the health and care for children with special education needs?

15. How is your ministry involved in ensuring that ECD teachers are following appropriate health procedures that improve catering of children with special education needs?

16. How does your ministry ensure that the health and nutritional needs of children with special needs is addressed?

THANK YOU VERY MUCH
Appendix 8E : Interview E

Interview guide for Ministry of local government personnel

SECTION A: Background Information

Name of interviewer: …………………………………………………………………………
Date of interview: ……………………………………………………………………………
Position of participant……………………………………………………………………..
Sex: ……………………………………………………………………………………………
Age: ………………………………………………………………………………………….…..
What is your highest professional qualification? ………………………………..
What is your experience in the current position? ………………………………..
What is your position in the Ministry? …………………………………………………

The Institutional role of the Ministry of Government

1. To what extent is your Ministry’s assisting schools to establish ECD learning centres?

2. How do you assist teachers to develop learning materials and outdoor equipment for ECD learners?

3. How do you ensure that parents are collaborating with ECD teachers to develop learning materials?

4. How are you empowering parents to fully support ECD programmes?

5. What programmes are you initiating for ECD children with special needs?

6. Are all ECD children accommodated in primary schools?

7. Suggest ways your Ministry would like to accomplish the above challenges

Thank you very much
Appendix 8F: Interview F

Interview guide for ECD Trainers and Schools Psychologists on provision of early childhood education in Chiredzi district Zimbabwe

SECTION A: Background information
Name of interviewer: ……………………………………………………………………..
Date of interview: ……………………………………………………………………………
Position of participant……………………………………………………………………..
Sex: ……………………………………………………………………………………………
Age: …………………………………………………………………………………………..
What is your highest professional qualification? ………………………………………
What is your experience in the current position? ………………………………………

SECTION B: Bibliography data of the district on children with special needs in ECD
1. How many ECD settings do you have in the district? .................................
2. How many ECD settings are in each zone/circuit? .................................
3. What is the total enrolment of the ECD students in the district?  ..........
4. How many ECD children with special education needs are enrolled in mainstream schools according to each zone? .................................
5. What is the total establishment of college trained ECD teachers in the district? .................................
6. Of these teachers, how many have a special needs qualification? ...............  
7. How does your office deal with cases of ECD “A” and “B” children with special needs who are not enrolled?

SECTION C: The Early Childhood Development Special Needs (ECDSN) sector programmes
The Health and Nutrition sector
8. How does your office ensure that schools are working with the Ministry of Health and Child Welfare to assist children with special needs?  
9. Which health issues for ECD “A” and “B” children with special needs are referred to your offices?  
10. How do you help teachers to ensure that ECD children’s health is catered for?
11. Is there tracking of children with special education needs in schools (i.e., referring them to the Ministry of Health from ECD settings or vis-versa)?

The Education sector
12. In your opinion, do teachers attend to ECD “A” and “B” children’s socio-emotional issues?
13. Have you been able to organise joint workshops with the ECD trainer on ways to cater for children with special needs in ECD “A” and “B” classes?

14. Have you held workshops with ECD teachers on how to identify, assess and monitor ECDSEN children?

15. In your opinion, which psychological skills are ECD teachers lacking that enable them to support children with special education needs?

16. In your opinion, explain whether ECD teachers have the capacity to cater for ECDSEN?

17. How has your office been able to help to change the attitudes stakeholders on children with special education needs?
   E.g.: Teachers…………………………………………………………………………………………………………………
   a) other children …………………………………………………………………………………………………………
   c) school head………………………………………………………………………………………………………………
   d) other parents………………………………………………………………………………………………………………

18. What measures are taken by your office to ensure there is appropriate delivery of ECDSEN programmes in schools?

19. In your opinion are school heads adequately trained to monitor and supervise teachers in ECD “A” and “B” programmes for children with special education needs?

20. In your opinion how can you assist schools to ensure that teachers in ECD “A” and “B” settings improve their competencies to cater for children with special education needs?

21. How does your office ensure that children with special needs are not discriminated in ECD settings?

22. How does your office ensure that parents of ECD children with special needs are prepared to cater for children with special education needs?

23. In your opinion, is ECD teacher training offering relevant courses towards the delivery ECD Inclusive education programmes? Explain your answer

The Social Protection sector

24. How does your office ensure that the social service department attend to the needs of those ECD children with special education needs?

25. How does your office ensure that organisations assist ECD children with special education needs?

26. What other organisation do you work with to ensure that ECD “A” and “B” children with special education needs are supported?

27. How does your office ensure that other ministries assist teachers to improve their skills and attitudes towards the handling of children with special education needs?

28. How does your office ensure the government provide cash transfers for children with special education needs?

29. How does your office engage other organisations and private sectors to assist ECD “A” and “B” children with special education needs?
SECTION D: Strategies used to cater for ECD children with special education needs

30. How does your office ensure that teachers are equipped with relevant skills to handle ECDSNE children?

31. How does your office ensure that all schools with ECD centres and those private settings have adequate health and nutrition facilities?

32. How do you ensure that (school heads, teachers, parents and other school children) are supported to cater for children with special education needs?

33. How do you ensure that all concerned stakeholders are partnering with schools to improve on catering for ECDSN learners?

34. How do you assist teachers to supervise and monitor activities that ECD "A" and "B" children with special education needs do?

35. What does the government do to improve stakeholders’ attitudes towards ECD children with special needs?

36. What advice can you give to school heads on how to improve ECD "A" and "B" curriculum to accommodate children with special needs?

37. What is the focus of workshops that you hold with ECD "A" and "B" teachers and school heads to improve service delivery to ECDSNE children?

SECTION E: The role performed by other stakeholders in the implementation of the ECDSN teachers

38. How do you ensure that ECD teachers improve ways of delivering in ECDES?

39. What lesson delivery problems do most teachers encounter when teaching children with special needs?

40. What skills would you see as most important for ECD "A" and "B" teachers teaching children with special needs?

41. Which methods are employed to deliver in ECD "A" and "B" SEN classes?

42. Suggest ways teachers can improve socio-emotional behaviour of children with special education needs.

Support and monitoring mechanisms by school managers to improve catering of ECDSN

43. How do school managers’ empower ECDSN children?

44. In what way do school managers ensure that teachers employ appropriate curriculum for ECD children with special education needs?

45. How does your office ensure that school managers regulate teacher parent relationship to improve learning of children with special needs?
The role of Non-governmental organisation in catering for ECD children with special education needs

45. How does your office ensure that non-governmental organisations support ECD programmes for children with special education needs?

46. Which learning activities do non-governmental organisations employ to support development of ECD “A” and “B” children with special needs?

47. In the past five years how non-governmental organisations assisted schools to establish supportive ECD has programmes in Chiredzi district that cater for ECDSEN?

Support and monitoring mechanisms by Parents in catering of children with special education needs in ECD settings

48. How does your office ensure that parents are supportive towards the implementation of ECD programmes for children with special education needs?

49. How is your office supporting the governments and non-governmental organisations to improve the services of children with special needs in ECD “A” and “B” classes?

50. How has your office contributed towards the change of attitudes of parents on ECD “A” and “B” children with special education needs?

51. How do you engage parents to take part in curriculum designing of ECD “A” and “B” children with special education needs?

Monitoring and supporting mechanisms by other Ministries in the delivery of ECD “A” and “B” curriculum

52. How does your office ensure that all other relevant government ministries are engaged in the ECD “A” and “B” programme?

53. How does your office ensure that school heads and teachers are aware of the support services that are offered to ECD “A” and “B” with special education needs by the relevant ministries?

54. How does your office ensure that relevant Ministries are approached to promote implementation of Inclusive education at ECD level in the Chiredzi District?

THANK YOU VERY MUCH
Appendix 8G : Interview G

Interview guide for Ministry of Social Welfare and Labour Personnel (Social Worker)

SECTION A: Background Information

Name of interviewer: ………………………………………………………………………

Date of interview: ……………………………………………………………………………

Position of participant……………………………………………………………………

Sex: ……………………………………………………………………………………………

Age: ………………………………………………………………………………………….

What is your highest professional qualification? ........................................

What is your experience in the current position? .............................................

What is your position in the Ministry? …………………………………………………

The Institutional role of the Ministry of Government in ECDSNE children

Sector Programmes

1. To what extent does schools with ECD “A” and “B” children with special education need work together with your office in issues of social security?

2. How exactly does your office help ECD “A” and “B” children with special needs?

3. What procedure does your office follow to identify ECDSNE children whom you help?

4. Explain the major assistance that you offer to ECD “A” and “B” children with special education needs?

5. Other than assisting ECD “A” and “B” children with special education needs in settings, does your office also help those of the same age who are not enrolled?

6. How do you help those ECD “A” and “B” children with special needs who have health problems?

7. Specify the educational programmes you offer to ECD “A” and “B” children with special needs?

How does your office ensure that children with special needs’ assistance are put to good use?

8. Explain criteria you have assisted to select ECD “A” and “B” children with special needs in the past five years.

Partnering with other stakeholders

8. Do you engage parents of ECD “A” and “B” children with special education needs in meetings/workshops?

9. What has been yielded by such meetings/workshops with parents regarding assistance to ECD “A” and “B” children with special education needs?

10. Which other ministries does your office work with to address concerns of ECD “A” and “B” children with special needs?
11. How you are working with these other ministries to address the problems of ECD “A” and “B” children with special education needs in general?
................................................................................................................................................................................... Which other organisations do you work with to assist children in classes ECD “A” and “B” with special education needs?
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**Strategies used by the Ministry of social Welfare**

12. Specify strategies your office use to address issues of ECD “A” and “B” children with special education needs in Chiredzi district?
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13. How is the level of parental engagement of children with special education needs on children’s social welfare needs?
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14. Explain concerns brought by parents whose children with special needs are enrolled in ECD settings?
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15. What strategies does your office use to ensure that parental concerns on their children with special needs are attended to?
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16. What is your office doing to assist schools to address the socio-emotional concerns of ECD “A” and “B” children with special education needs who are enrolled?
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17. At district level, do you hold workshops with officials from the Ministry of Education specifically on how to address social security concerns of parents and children with special education needs?
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18. Finally how is your office looking forward to address children’s social security with regards to child abuse, domestic violence etc.?
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**Appendix 9: Observation Schedule**

**OBSERVATION SHEET ON INFRASTRUCTURE ON CATERING FOR CHILDREN WITH SPECIAL EDUCATION NEEDS in ECD PROGRAMMES IN CHIREDZI DISTRICT**

The researcher will observe:

**SECTION A: SUITABILITY OF LEARNING MATERIALS**
- Are learning materials (outdoor and indoor) suitable for the development of skills for children with special education needs?
- Are children with special education needs engaging independently with learning materials?

**SECTION B: CAPACITY OF TEACHERS**
- Do teachers assist children with special education needs when they are interacting with learning materials?
- Do teachers demonstrate appropriate skills to assist children with special needs?
- Do teachers demonstrate qualities of working with children with special education needs?

**SECTION C: ATTITUDES OF TEACHERS AND OTHER CHILDREN**
- Are teachers willing to help children with special education needs during lesson and after lessons?
- Are other children not taking advantage of children with special education needs?
- What is the general school tone regarding children with special education needs?