The education of deaf children in Zimbabwe: the changing roles of non governmental organisations, the government and international organisations

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The Education of Deaf Children in Zimbabwe: The Changing Roles of Non Governmental Organisations, the Government and International Organisations

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Degree of Doctor of Philosophy
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1997
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ABSTRACT

In this thesis I describe and analyse the development of education for deaf children in Zimbabwe, from its beginnings in the 1940s to 1994. I investigate in detail the changing policies and provision of non governmental organisations, the government and international organisations. The thesis is divided into three sections. The first section examines the literature relating to deaf education in Zimbabwe, the role of international organisations and the changes from charity to government provision. I introduce four propositions developed from the literature about, first the internationalisation of the debates about deaf education provision, second the limitation of charitable provision, third the struggles between interest groups and finally the influence of organisations of deaf people. I analyse the case study methodology used to investigate policies and practices. The second section describes the changes in the education for deaf children from the 1940s to 1994. I examine the early role of churches and charities and the gradual increase of government involvement. This section also plots the complex relationships between the government, non governmental and international organisations in the development of policy and practice. In the third and final section I return to the four original propositions and discuss the key findings relating to the changes in international policies and funding, the growing influence of deaf peoples organisations and reactive nature of government policies.
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>ASSOD</td>
<td>Association of the Deaf (Zimbabwe)</td>
</tr>
<tr>
<td>BAA</td>
<td>Bilateral Aid Agencies</td>
</tr>
<tr>
<td>CBR</td>
<td>Community Based Rehabilitation</td>
</tr>
<tr>
<td>CIDA</td>
<td>Canadian International Development Agency</td>
</tr>
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<td>DPI</td>
<td>Disabled Persons International</td>
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<tr>
<td>ESAP</td>
<td>Economic Structural Adjustment Programme</td>
</tr>
<tr>
<td>ESC</td>
<td>Education Services Centre</td>
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<tr>
<td>IGO</td>
<td>Inter Governmental Organisation</td>
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<tr>
<td>ILO</td>
<td>International Labour Organisation</td>
</tr>
<tr>
<td>IMF</td>
<td>International Monetary Fund</td>
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<tr>
<td>IO</td>
<td>International Organisation</td>
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<tr>
<td>INGO</td>
<td>International Non Governmental Organisation</td>
</tr>
<tr>
<td>IYDP</td>
<td>International Year of Disabled Persons</td>
</tr>
<tr>
<td>NGO</td>
<td>Non Governmental Organisation</td>
</tr>
<tr>
<td>NCDPZ</td>
<td>National Council of Disabled Person Zimbabwe</td>
</tr>
<tr>
<td>NASCOH</td>
<td>National Association of Societies for the Care of the Handicapped</td>
</tr>
<tr>
<td>RAs</td>
<td>Rehabilitation Assistants</td>
</tr>
<tr>
<td>RTs</td>
<td>Rehabilitation Technicians</td>
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<tr>
<td>Acronym</td>
<td>Full Name</td>
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<tr>
<td>SIDA</td>
<td>Swedish International Development Agency</td>
</tr>
<tr>
<td>SPS</td>
<td>Schools Psychological Services</td>
</tr>
<tr>
<td>UDI</td>
<td>Unilateral Declaration of Independence</td>
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<tr>
<td>UNDP</td>
<td>United National Development Project</td>
</tr>
<tr>
<td>UNESCO</td>
<td>United Nations Education Scientific and Cultural Organisation</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations International Children's Emergency Fund</td>
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<tr>
<td>WFD</td>
<td>World Federation of the Deaf</td>
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<td>WHO</td>
<td>World Health Organisation</td>
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</table>
ACKNOWLEDGEMENTS

I would like to thank my supervisors Patricia Potts and Bob Moon for their support and guidance throughout the writing of this thesis. I would like to acknowledge the support of Dr M. Peresuh from the University of Zimbabwe who was my sponsor in Zimbabwe. The following people gave of their time to read and comment on a draft of this thesis in the summer of 1995 Dr Venta Kabzems, Dr Alice Paige-Smith, Maria Chiswanda, Susie Miles, Mr Rinashe and Dr Peresuh. Finally I would like to thank my family for their support during my years of study Ian, Thomas and Peter.
Section 1
In this thesis I describe and analyse the history and development of education for deaf children in Zimbabwe, from 1947 to 1994, focusing on the policies and provision of non governmental organisations, the government and international organisations. In this Introduction I consider the broad context of the research, the aims of the thesis, the terminology used and finally I give details of the structure of the thesis.

In the thesis I argue that the role of NGOs has evolved through a number of stages, beginning with a wholly charitable orientation and moving to a more diversified situation with charitable, welfare provision working alongside advocacy organisations. In parallel the role of government has also evolved from a position of leaving policy and provision to the charitable sector to direct involvement in national policy making and provision. The government is still influenced by the NGO community and needs to work in partnership with NGOs particularly regarding special school provision. I also argue that the policies of international organisations have been influential in deaf education in Zimbabwe over the fifty year period, but that the nature of their influence and funding has changed considerably.

Special Education in Developing Countries

General outline

International estimates calculate that between 7% and 10% of the children in the world can be described as being born with or acquiring a physical,
mental or sensory impairment (WHO 1976, Hellander 1989). Over 80% of the world’s children live in developing countries. The vast majority of children and young people with disabilities live in the developing world. Only a small proportion of these estimated 170-200 million children with disabilities are known to be receiving an appropriate education (Mittler 1993). Figures taken from UNESCO reports (UNESCO 1979, 1988a) show that in the late 1970s fewer than 1% of the total number of disabled children were in appropriate education. Figures collected in the late 1980s showed an increase in educational provision world-wide to cater for approximately 2% of all disabled children. Although there has been a recent questioning of the figures regarding children with disabilities in the developed and developing world (Hellander 1993), the prevalence of moderate to severe difficulties in hearing and speech is still estimated at 0.5%-1% of the population.

The *Education For All* conference held in Jomtein Thailand in 1990 initiated by a number of UN agencies and later endorsed by most of the member governments, brought to international attention the need to include children with disabilities into every country’s basic education system. The conference recognised that to exclude from education large numbers of children with disabilities was a breach of their human rights and it presented a challenge to all nations to expand provision in this area. (World Conference on Education for All (WCEFA) 1990).

The Jomtein conference, while exhorting nations to expand their basic education and provision to include marginalised groups, did, however, recognise the very difficult national and international environment that
A number of key factors have thwarted attempts to expand education provision. The constraints to educational expansion included the growing international debt burden of developing countries, widening economic disparities among nations, war, civil strife, violence, preventable childhood diseases and environmental degradation.

A further UNESCO publication (Hegarty 1990) considered the type of provision for children with disabilities in developing countries and the nature of policy and provision. The report noted that "in many developing countries the struggle to develop compulsory education for a majority of children takes precedence over meeting the special educational needs of those with disabilities" (p. 13). The gulf between need and provision is wide and Hegarty noted the complex nature of special education provision. Provision characteristically included involvement from charities and voluntary organisations and also a number of government ministries, often with assistance from overseas organisations. Hegarty's (1990) acknowledgement of the complex organisation and administration of special education both then and in to the future, notes that

The process of change will succeed best with the initiative of governments and the participation of intergovernmental and non governmental international organisations, bilateral aid programmes, voluntary agencies and community groups in the countries concerned (p. 8).

Hegarty (1990) whilst acknowledging the rights of children with disabilities to an education, implicitly recognises that education for such
children is, in most countries, not a government priority and expands as a result of early developments often started in the NGO sector.

The more recent Salamanca Statement of 1994, has built on the Jomtien Declaration of 1990 and has expanded on policies and priorities specifically in special needs education (UNESCO 1994a). The Salamanca Statement and the Framework for Action were developed from the *World Conference on Special Needs Education: Access and Quality*, and brought together representatives of national governments, non-governmental organisations and bilateral aid agencies to address the issues of inclusive education and "schools for all". The Salamanca Statement included a firm commitment to inclusive education for all children with disabilities and difficulties in learning and offers a challenge to mainstream education to find a way of successfully educating all children. The statement is underscored by "the fundamental principle of the inclusive school is that all children should learn together, wherever possible, regardless of any difficulties or differences they may have" (p.11).

But, for the first time in UNESCO publications and declarations, there is a recognition in the Salamanca Statement of the particular needs of deaf children and the importance of sign language as a medium of communication in their education. "Owing to the particular communication needs of deaf and deaf/blind persons, their education may be more suitably provided in special schools or special classes and units in mainstream schools" (p. 18 UNESCO 1994a). In previous documents the process of integration and mainstreaming, for all children with disabilities and difficulties in learning, included deaf pupils.
Rights issues

A belief in the fundamental right to education of every individual is the key issue that underpins this research. This was first enshrined under Article 26 the 1948 Universal Declaration of Human Rights. These rights have been expanded and developed in subsequent declarations. The UN Declaration on the Rights of Disabled Persons (1975) included education, training, rehabilitation and other services as rights to enable development of capabilities and skills as well as the right to social integration or reintegration.

The UN Declaration on the Rights of the Child (1959) were extended and strengthened in the 1990 UN Convention on the Rights of the Child which recognised the child’s right to education and the right to habilitation and rehabilitation services for children with a disability, in “a manner conducive to the child’s achieving the fullest possible social integration and individual development...” (Article 23,3, in Herr 1993).

Hegarty (1990, 1993) considers that three basic principles or rights underlie special education: the right to an education, the right to equality of opportunity and the right to participate in society. This thesis fully acknowledges these rights for deaf children and young people and seeks to identify and discuss these rights as they present in the material.
Research into Special Education in Developing Countries

Research into special education in developing countries falls into 4 main categories. These are:

1. large scale surveys and quantitative research
2. single country case studies
3. a limited number of international comparative studies which include a number of countries
4. research on specific aspects of special education such as parental guidance, integration and teacher training.

There is a dominance of single country case studies, with little work of an analytical or theoretical nature. There is relatively little material in book form on international issues in special education. More material is found in journals and conference proceedings. With some exceptions, comparative material on special education is dominated by researchers from developed countries as is the case in most areas of international comparative educational work (Barcham 1992, Barcham and Upton 1993).

Deaf Education in Developing Countries

General outline

Deaf people in developing countries "are frequently considered a marginal, neglected and socially discriminated (against) group with a limited share of even the very elementary human and civil rights within their community"
The first major survey of the lives of deaf people in developing countries was undertaken in 1988-9 by the World Federation of the Deaf (WFD) an international organisation made up of national organisations of deaf people from over 100 countries. The survey collected information in a number of areas, human and language rights, education, training, employment and national associations of the deaf.

The survey concluded that “Education is a privilege of very few deaf children and young people” (p. 28 Joutselainen 1991). The percentage of deaf children attending school is very small in developing countries “...deaf children are among the last in their generation to become literate and numerate” (p. 32). It was with this knowledge and information on the early providers of education for deaf children that the ideas for this research developed.

Missionary societies were identified in the report and in my own previous research (Barcham 1989) as being the pioneers in deaf education particularly in Africa. The report also noted that large funds for some schools for deaf children were still being provided from overseas. However in a majority of the countries reviewed there was some government involvement in the education of deaf children. My interest in the transition from missionary society and charity provision to government involvement in deaf education grew from these works.
Research into Deaf Education in Developing Countries

Research work on the education of deaf children in developing countries is limited. The WFD survey covering only 69 countries was the first of its kind. Other information on the education of deaf children in developing countries can be obtained from conference and congress proceedings, particularly those of the international congresses on the education of the deaf (Brill 1984), journal articles and from specialist international organisations such as WFD, UNESCO and smaller NGOs such a Initiatives for Deaf Education in the Third World. Specialist libraries such as the RNID library in London and Gallaudet University library in Washington DC also hold information on developing countries. There is little if any material on this subject in book form to date (1996).

The grim reality behind this summary is that the vast majority of deaf children and young people in developing countries do not receive an appropriate education, or indeed any education at all. This earlier work had also raised a number of significant questions for this research, first, about the appropriateness or otherwise of overseas methods and techniques in the education of deaf children in developing countries and second, about how provision could be expanded within a structure of non governmental organisations and limited government involvement.

Aims of this Research

From a broad understanding of the developments in special education in developing countries and a more detailed review of work on the education
of deaf children it became clear that the key providers of education for deaf children were missionary societies, national charities, voluntary organisations and, later, the national government. From the work of Brouillette (1992a, 1992b, 1993), on special education in Mauritius, it became clear that international influences such as that from bilateral funding agencies and UN organisations were also influential in policy and provision in developing countries.

This research seeks to investigate in detail the relationship between government, non governmental organisations and international organisations in the development of education for deaf children in one country. Large scale surveys (Putnam 1979, Joutselainen 1991) had described the nature of provision and in the former case sought to identify trends and patterns in special education development. However, such works were unable to fully appreciate the more subtle national influences on provision of political, social, economic and cultural factors. This thesis has focused therefore on understanding the development of education for deaf children in one country, taking into full account national and international influences, past and present, on policy and provision.

After full consideration of the ways that the central questions of the thesis could be addressed it was decided to conduct a single country case study. I chose Zimbabwe as the country for the case study. Zimbabwe is a medium sized, English speaking, middle income country in southern Africa. It was considered to be politically stable and since its independence in 1980 has become internationally known for its developing rehabilitation services and the growth of its disability movement (see Chapter 2).
In looking to investigate the relationship between government, non-governmental organisations and international organisations it was decided to focus on three dimensions to the case study. First to plot the developments in the education of deaf children in Zimbabwe from its beginning in the 1940s up to 1994. Secondly to analyse the current policies and provision of the government, national non-governmental organisations and international organisations in both educational and rehabilitation services, and finally to investigate the relationship between these three key providers of services.

A detailed study of deaf education in one national setting will be useful to those directly involved in policy and provision, both in Zimbabwe and elsewhere. The propositions I have developed provide a conceptual framework for understanding the development of this particular aspect of special education and the relationship between key providers and policy makers.

**Terminology used in this thesis**

In many professional areas as well as in everyday language the use and meaning of words changes. What were once the countries of the British Empire or "the colonies" have now become "low" or "middle income countries" or "developing countries", the "Third World" or the "South". All these terms are used in this thesis, but I acknowledge the injustice of labelling some nations as less developed, as well as the ambiguity of the terms the South and Third World. These are no longer valid concepts.
however as they are still in current usage they are used here. These are umbrella terms and describe a wide diversity of nations. It is difficult to see what they would all have in common. I have, however, kept to the common usage whilst recognising its limitations.

In the field of special education there are parallel issues of changing vocabulary used to describe certain groups of pupils or types of provision. I have attempted to comply with the language generally used by professionals in special education, but I have particularly taken into consideration the language considered currently appropriate by disabled peoples' groups (Rieser and Mason 1990).

*Deaf/deaf, hearing impaired* In this research I have recognised the different definitions and discourses that cluster around the term deaf. The use of the word *deaf* with a lower case “d” implies an audiological or medical definition, meaning without hearing or having a hearing loss. This broad definition includes all people without hearing including those who see themselves as Deaf with a capital “D”. The idea of a Deaf community representing a cultural and linguistic minority was first proposed by James Woodward in 1982 and is discussed by Padden and Humphries (1988). The use of the term Deaf has become increasingly popular among the Deaf community as people see themselves as part of a cultural and linguistic community bound together by their use of sign language (Taylor and Bishop 1991).

There are similar differences in the definitions of *disability* and *impairment* with conflicts between a medical and social model (Rieser and Mason
A medical model emphasises the diagnosis and treatment and cure of the patient, it has come to be associated with an individual deficit based definition of disability. Disabled people see that the medical model fails to take into consideration their views and does not address the collective responsibility of society to alter itself rather than the individual adapting to the society. Disabled Persons International (DPI) has a definition that emphasises the need for society to cease to point to disabled individuals for their lack of participation and instead to break down the barriers it has erected. The British Council of Organisations of Disabled People (BCODP) uses the following definition:

**Impairment** meaning lacking part or all of a limb, or having a defective limb, organ or mechanism of the body.

**Disability** meaning the disadvantage or restriction of activity caused by a contemporary social organisation that takes little or no account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities - physical disability is therefore a particular form of social oppression. Many organisations of disabled people have now dropped completely the use of *handicap* as they consider it is widely misused (Rieser and Mason 1990).

**Special education** In a number of countries the terms *special educational needs* or *exceptional* are also used to describe children and young people who may at some time in their educational career experience difficulties in learning, and as a result require additional support. I am aware that the terms special education or special educational needs are relative in that a child may be seen to have special needs in one school but not in another. Also schools themselves can act to increase or reduce the
difficulties in learning a child might be experiencing. Similarly, between countries and cultures, what might be considered a situation requiring special education in one place might be considered acceptable in general education in another.

In the thesis I have used a number of terms for certain groups of children with disabilities and difficulties in learning which are in current usage in Zimbabwe, which I would otherwise not have used. For example the term “mental retardation” was in current usage during the research period. I would consider this an inappropriate term to describe children and young people with difficulties in learning as it focuses on negative attributes and fails to put the child first. I have however used the term in respect of Zimbabwean terminology.

*Special schools* This term is used in the thesis to refer to separate segregated provision for deaf children, that is education not in the mainstream.

*Integration* Is used to describe educational provision for deaf children within mainstream schools. Such provision could however be in separate resource units or classrooms, so the level of integration with hearing peers could vary from child to child, and between resource units.

*Policy* A non-prescriptive definition of policy is used in this research that sees policy making and implementation as a process. The definition used includes international as well as national influences on the policy making process. In this thesis I am seeking to explain the actions of
public institutions, governmental and non governmental and their effects as outcomes in social processes. An historical and evolutionary approach to policy is used. (Mackintosh 1992, Wickham 1981).

**Non governmental organisations**  This term is broadly used to describe a number of different organisations from community based grassroots organisations through to large national charities. They have in common that they are all non governmental and non profit making.

**International organisations**  The term international organisations is used in this research as a blanket term to include a number of different types of organisations involved in the education of deaf children. It is used to include intergovernmental organisations such UNESCO and WHO, international non governmental organisations such as the World Federation of the Deaf and Disabled Persons International and also international charitable organisations such as Oxfam and Christoffel Blinden Mission.

**Structure**

The thesis has been organised in three sections. The first section includes the theoretical perspective of the thesis, the methodology and a critical review of the previous relevant literature. Section two covers the development of education and rehabilitation services for deaf children in Zimbabwe from 1947 to 1994. The final section includes an analysis of the findings of the research and conclusions.
Section One

Chapter 1 Theory and Propositions introduces the theoretical perspective taken in the thesis and explores the four propositions of the internationalisation of deaf education, the relationship between government and NGOs, conflict and co-operation in the expansion of special education and the role of deaf people in the education of deaf children, which weave through the work. Chapter 2 Methodology discusses the place of single country case studies in the development of international comparative educational research and describes the methods used to collect the data used in the thesis.

Section Two

Chapters 3-7 explore the development of education for deaf children in Zimbabwe from 1947 to 1994. The four propositions are explored in each of the four chapters.

Chapter 3 Colonial Developments and Legacy looks at the establishment of the first schools for deaf children in Zimbabwe then Southern Rhodesia and their social, political and economic context. This chapter also explores the role of churches and missionary organisations in early special education provision, the work of national charities and the influence of overseas trends on developments in the country.
Chapter 4 *New Politics, New Policies* covers the period 1980-1984 and discusses how major political and economic changes affected education and health services in the new Zimbabwe after Independence. Although in the education of deaf children there were few changes in the period, there were considerable changes in Zimbabwe’s relationship with UNESCO and with overseas funding programmes that had long term consequences. Zimbabwe was accepted in the international community again and as a result was more fully exposed to international trends in special education. Within the country, the development of NGOs run by disabled people, with a self help, liberation agenda changed the national situation. There were also developments in the national co-ordination of disability related NGOs.

Chapter 5 *Expansion and Integration*, covering the period 1985-1989, plots a period of major change in special education in Zimbabwe. The government increased its involvement in special education, put in place a policy of integration and also began rehabilitation services for pre school deaf children. The first resource unit for deaf children was opened in the late 1980s by a national charity and this was matched by integrated government provision. In the specific area of the education of deaf children the government became involved in areas that had previously been the domain of individual schools, for example in the acquisition of hearing aids, the development of a communication policy and the initiation of a sign language research project. The expansion of deaf education and other areas of special education was in part made possible with overseas funding from SIDA (Swedish International Development Agency) and the role of such international funding is discussed.
Chapter 6 *Consolidation and the Deaf Dilemma* covers the final period 1990-1994 and looks in detail at the expansion of the government's integrated provision in resource units in mainstream schools. It also considers the development of the Association of the Deaf (ASSOD) and its involvement in the education of deaf children. The chapter also discusses changing international trends in the education of deaf children and how these effect provision in Zimbabwe.

*Section Three*

The final section of the thesis Chapter 7 *Propositions Revisited, Analysis and Conclusions* returns to the four propositions that have woven through the thesis and considers how in the light of the research these need to be expanded and altered. The chapter ends with a discussion of the development of deaf education in Zimbabwe and possible future changes. I also discuss areas for possible further research in the education of deaf children in developing countries.
CHAPTER 1

THEORY AND PROPOSITIONS

Developing Research Questions

The focus for this research has developed and changed. Initially, I planned to conduct a combination of quantitative and qualitative research, retesting a stage theory of special education development and then conducting a number of case studies in developing countries in order to compare actual provision with the theory. Putnam's stage theory (1979) had used statistical information to develop a number of hypotheses to explain and predict special education developments. These initial plans were challenged by my study of the literature and by a recognition of my commitment to studying one aspect of special education, that is the education of deaf children. As I re-focused my ideas I realised that, although I still retained an interest in the beginnings of special education and its subsequent development, I was becoming more interested in examining the social and political effects on provision than in statistical indicators.

The work of Joutselainen (1991) highlighted the lack of educational provision for deaf children in developing countries. My own previous research for *Deaf Children Worldwide* (Barcham, 1992) had made me aware of the low percentage of deaf children in schools as well as the nature of early provision in a number of developing countries. Joutselainen also mentions the key role of missionary societies and charities in the early
education of deaf children, prior to government provision. The work of Joutselainen and UNESCO (1988a) was enough to convince me of the evidence for the lack of education provision for deaf children in developing countries.

From this early reading on special educational development I was beginning to question my commitment to quantitative research. It also confirmed my particular interest in looking specifically at the education of deaf children in developing countries rather than the broader topic of special education, as my initial professional training had been as a teacher of deaf children. However, I was still aware that the development of education for deaf children has to be seen as closely linked to changes in special education, and developments in education as a whole.

My early reading also fuelled my interest in what was going on behind or beyond the figures, tables, charts and percentages, in the details of how and why schools for deaf children were initially started and how, if at all, provision expanded and developed. I wanted to conduct research that plotted the development of education for deaf children, and considered the educational, social, economic and political context of that development.

At about the same time I began to re-read the Education for All (WCEFA 1990) document which was produced as a result of the Jomtein conference in Thailand, organised under the auspices of UNESCO, UNDP, UNICEF and the World Bank. Over 150 countries had signed the protocol of the conference which as part of its emphasis on equality in education recognises the need for special provision for disadvantaged groups.
The learning needs of the disabled demand special attention. Steps need to be taken to provide equal access to education to every category of disabled person as an integral part of the education system. (p. 5, WCEFA 1990).

This brought to my attention the significance of intergovernmental organisations in setting educational agendas for both developing and developed countries. But as Graham-Brown (1991) notes their influence on the poorer countries are stronger because of links, explicitly or implicitly, with aid, advice and co-operation programmes. “Most governments and non governmental organisations in the South are in need of aid....in many cases, this need is mixed with reservation” (p. 298 1992). I was stimulated to ask questions about how, if at all, inter-governmental organisations such as UNESCO and UNICEF, and bilateral aid agencies, as well as the World Bank were guiding or persuading national governments in developing countries to expand and develop their educational provision.

From an early stage in the research process my interest had been on the complex social, political, cultural and economic context of special education provision. Putnam (1979) in her original paper acknowledged that her work did not take sufficient account of this area: "A type of explanation that has been absent from this paper involves the social structure of various countries" (p. 95 1979). It was precisely what Putnam acknowledged that she missed out, and what her theory failed to consider which interested me the most. After a number of months, I felt able to let go of Putnam’s stage theory and to bring my interest in the historical and social context of special education development to the fore. I was able to
acknowledge my main interest in the process of developing policy related to the education of deaf children

It was then that I read the work of Brouillette (1992a). His single country case study, (1992b) of the development of special education in Mauritius, used Putnam's research as a starting point for other investigations. In his work on the development of policy and provision in special education Brouillette pointed out the significance of non governmental organisation in the early provision of special education and the key role of international organisations in this area.

Non governmental organisations (NGOs) are more influential than government agencies in initial special education development...

International assistance is highly influential in special education (p. 12. Brouillette 1992a).

Brouillette's work encouraged me to consider a single country case study as a possible means of fulfilling my research objectives. Single country case studies have been a recognised research tool in international comparative education studies for many years as they provide rich detail on a specific aspect of education in one setting (Theisen and Adams 1990). Similarly in special education, case studies have played an important part in research, because of their emphasis on the individual, group or class. (Mertens and McLaughlin 1995).

My own previous research, as part of a MEd dissertation, (Barcham 1992) noted the dominance of single country case studies in comparative and international research and writing on special education. While acknowledging that a single country case study would provide the rich
detail I was aiming for in describing and analysing the development of education for deaf children. I was also aware of the predominately descriptive nature of much previous work, and its lack of analysis.

After about four to five months of reading and writing various research outlines I was eventually able to decide on a research question that truly reflected my interests. *What are the roles and policies of non governmental organisations, international organisations and the national government in the development of education for deaf children? Zimbabwe a Case Study.* This was an area where there was little work to date and my research would be an original contribution to the literature. The research would also provide an analysis of the situation regarding the education of deaf children in Zimbabwe that would be of value to critical readers from Zimbabwe and other developing countries. It would also provide a framework for policy makers from non governmental organisations, international organisations and governments to reflect on and assess their own work and situation.

My plan was to conduct a single country case study on the education of deaf children, looking specifically at the changing roles and policies of the government, non governmental organisations and international agencies. Having established a research question and after choosing a country for my case study I produced three different sets of sub questions, or areas around which to begin my data collection, these were:

1. What is the historical context of education for deaf children in Zimbabwe? When did the first schools start? Who was involved and why?
2. What are the current policies of the government, non governmental organisations and international organisations relating to the education of deaf children? What has been the social, economic and political context of the policy making?

3. How do the government, non governmental organisations and international agencies work together in the provision of education for deaf children, and the making of policy?

Following an initial visit to Zimbabwe, to check out my research ideas and to begin a small amount of data collection, I produced a number of research propositions to test on my subsequent period of fieldwork.

**Developing a theoretical perspective**

The process involved in the development of my final research question helps to explain the changing nature of my theoretical perspective.

Putnam’s stage theory (1979) was an example of quantitative research undertaken from a perspective on educational development that focused on the dimension of modernisation. Such research was looking for trends and predictors in educational development through the analysis of economic and social variables. Putnam tested a number of hypotheses in her work and was seeking to find a number of predetermining factors in special educational development. The research was essentially ahistorical and acultural.

In contrast, my own research questions lead me to more intensive, qualitative research, that sought to describe and analyse a process of changing policies in relation to the education of deaf children. It aimed to
explore in depth the context of policy making and looked beyond the role of government to include other national social groups, and the influences from overseas on national developments. The work has looked at the process of policy making and at the factors influencing changes in policy and provision.

Research into the relation of special education to the rest of the educational system and the wider society, reflects one of Barton and Tomlinson's (1981) four key areas of sociological interest in special education. Their other areas of interest include classification and categorisation, the processes of school life and the social construction of knowledge. Their writing emphasised the understanding of special education as a social process in a social context, which involved asking questions about policy making, power, resource allocation and attitudes to people labelled "handicapped" or in need of "special education".

Similarly Oliver's (1988) work on the social and political context of educational policy regarding "special needs", emphasises the importance of seeing educational policy in special education in the light of initiatives in other areas of social policy such as housing and health. As Barton (1988) notes, a critical analysis of existing and earlier policy and practice is an essential pre-condition for development and change.

**Sociological comparative perspective**

The research in this thesis is international and comparative in nature. It is the study of one aspect of a country's education system. undertaken by a student from overseas. As Thomas (1990) notes, such one nation studies or
as they are often referred to, national investigations, serve the comparative study of education well when they are either used by readers to compare education in one country with that in their own, or alternatively, to compare case studies of similar aspects of education. Mazurek and Winzer (1994) consider that:

The greatest hope and ultimate utility of comparative studies is to help groups and institutions reflect upon their own practice, policies and theories by bringing to bear relevant information and insights from around the world (page ix).

As shown in the previous section my research ideas progressed from a form of modernisation theory research to a single country case study. Mirroring the movements in comparative sociological interests away from the structural functionalist, modernisation legacy, from the 1950s through to the 1970s, of Parsons (1966) and Putnam (1979) when research tested pre formulated hypotheses and work was seen as ahistorical and static. In the 1970s and 1980s there was a move away from a stages model of structural functionalists towards comparative historical research. This new wave of research avoided treating social change as a series of stages and sought to "give history its due".

In this research the concern has been to place the study of policy and the process of its making and implementation within an historical and social setting. This has placed this thesis firmly within the field of comparative historical sociological research. In abandoning the testing of a theory or hypothesis it has sought to give a detailed description and analysis of a particular social phenomena through the identification of a number of conceptual themes or propositions.
In organising the research the idea of using a single thesis or proposition was abandoned. Instead, a series of themes or propositions have been developed and these have served as a focus for the data collection. Although these propositions were developed out of the literature and the early research data, it is felt that they are at a level of abstraction that will make them applicable elsewhere (Bogdan and Biklen 1992).

In studying one aspect of education in a single country this research focuses on the particularities of the education of deaf children in Zimbabwe, acknowledging the specific cultural, political and economic forces within which the situation has changed and developed. This is the particular focus and strength of the interpretive historical approach. Rather than focusing on the testing of hypotheses or formulating theoretical statements the aim of the research has been the accurate construction of propositions from the original data of the case (Kalberg 1994). The propositions in this research are statements on various aspects of policy and provision in the education of deaf children. They were formulated inductively from a study of the literature and from early fieldwork. The propositions were then used as the basis for further data collection and analysis (Bonnell 1980).

The initial propositions were developed as a result of a study of the literature and following the first data gathering visit to Zimbabwe. They are further developed and extended during the analysis of the data and have been critically discussed in Chapter 7, the final chapter. Throughout this research, the data collection, analysis and writing up, the propositions have provided the necessary framework to contain and make sense of the data.
This research echoes Bendix’s (1964) claim that the concepts, or in this case propositions, act as the base line of the work. They seek to give coherence to the research, particularly in relating the empirical findings to a body of theoretical sociological ideas. The detailed historical context allows for a proper understanding of current social and educational structures and avoids the trap of producing statements of generality without sufficient empirical data.

Although both Bendix (1964, 1978) and Tilly (1981, 1984), key writers of interpretive historical work, allow for comparison between countries and the development of "contrasting concepts", Bendix in particular calls for the accurate isolation of the aspects unique to each case. Also that the concepts should be embedded in each particular context. Tilly (1981, 1984) also emphasises the need for concrete historically grounded research at the level of analysis. Comparison is developed as a result of the empirical evidence. As a result this research has followed in this tradition of interpretive historical research in seeking an understanding of social change, and from the analysis of the literature and empirical evidence has sought to generate propositions to further that understanding.

The distinctive nature of case study research into policy making has arisen out of the desire to understand complex social phenomena. The complex nature of policy research has lead to a need for a flexible but appropriate research strategy. Case studies traditionally employ a number of research methods for the collection of data. In this research the definition of policy that was adopted lead to the particular research strategy.
**Policy context**

The very nature of the questions that developed in the early stages of this research, had already influenced the definition of policy that would suit this work. A definition that saw policy, either social or educational, as primarily the domain of government was excluded, by the expressed interest in studying the role of non governmental organisations and international agencies in the development of deaf education.

Similarly many of the models of education and development, such as those of Fagerlind and Saha (1989) are, I consider, inadequate for this research. Their model of education and development sees education in any society as part of a dialectical process within the economic, social and political dimension of society (Fig. 1). The contribution of education to the development process is therefore contingent on the configuration of these dimensions in any given society at any point in time. Although for this research such a view of education policy development could be partially accepted as it acknowledges the national social context, its failure to consider external, international influences makes it generally unsuitable.

A theoretical view of policy was obviously needed which would take full account of the international element in national educational development. Ann Wickham (1981) recognised that many accounts of the development of national education systems concentrate upon events internal to particular societies. She argued however that:

> there is an international element to the forces involved in shaping education systems, whether this is at the cultural, economic or political level (p.52 Wickham 1981).
FIG. 9.1 The interrelationship between education and society.

Fig. 9.2 Dialectical model of education and development dimensions
Box 1  A definition of ‘policy’?

‘Policies’ are purposive actions undertaken by the state (governments and their employees), or by other institutions (such as voluntary organizations), with an avowedly public purpose. That is, they are actions conceived as (or defended as) serving some wider public objective such as social and economic development, and not (or not solely) individual private gain. Hence, not all actions by public institutions are ‘policy’. Institutions and organizations make public policy in so far as they act or claim to act for the public good.
Wickham explores the different forms of international relationships in educational development. Wickham asserts that "Any state from its formation is caught up in a set of (international) relationships which help form and shape internal developments", also that

...these relationships mean that any attempt to develop an understanding of a national educational system has to analyse the international as well as national context, asking what forms of relationship exist and how these were received internally (p. 52).

This was affirming for this research as it indicated others were aware of the complex nature of the international dimension in educational development.

Finally, in deciding on a suitable approach to educational policy making which would reflect the nature of the research, particular emphasis was placed on the need for it to reflect the concept of policy making as fundamentally a social process and that international relationships would be integral to these ideas.

In addition the definition of policy as used by Mary Mackintosh (1992) seemed very suitable. However, her definition of policy was meant primarily for public policy on development, with a particular focus on economic development. Rather than seeing policy as prescription, the domain predominantly of government, a model of policy was used which saw it as process. It takes an historical and evolutionary approach to policy, seeking to explain the actions of public institutions, government
and non governmental organisations and their effects, as the outcome of social processes.

Mackintosh’s definition of policy as a process involving social institutions and public action (fig. 2) could be used in this work, as it emphasises the role of government and other organisations within an historical and social context. Although not explicitly including an international dimension, the wide definition of social institutions to include, for example, trade unions and voluntary organisations could be broad enough to include international organisations.

In this research an approach to policy is taken that sees it as an evolving process that fully considers the social, political and historical context of any developments. The research also takes full account of past and present international influences on policy as well as considering the roles of a broad range of social institutions.

**Identifying the Propositions**

Within the framework discussed above, the literature was examined to establish key propositions that would provide the basis for critical and analytical exploration both within the presentation of data and in a reconsideration of the material in the overall analysis in Chapter 7.

**PROPOSITION 1**

There is a gradually expanding literature on international comparative issues in the development of special education, including the education of
deaf children, in developing countries. This has reflected interests in the wider educational field, linked to the extension of basic education to previously marginalised groups.

Wickham's view (1981) that each state is the product of internal and external influences is endorsed in this research. In seeking to understand the development of a national educational system, or a particular part of that system such as special education or the education of deaf children, it must be seen in the light of specific overseas influences and also the overall international context of each era. Tilly (1975) complained that few of the links between domestic development and the international structures of power have been systematically explored or analysed.

Watson (1985) acknowledges that there is still much in the colonial legacy that continues to influence educational development as well as there being some forms of neo colonial controls. Whilst acknowledging the national and international constraints on educational development Watson realises "it is difficult to extricate which constraints are the most influential in any given situation" (p. 43).

Brouillette (1992b) in his thesis on special education in Mauritius saw international influences as significant. He noted a number of key international factors including a "keeping up with the Jones" process, the influence of the International Year of Disabled People and the subsequent Decade of Disabled Persons, the exchange of information across national boundaries and the growing influence of international organisations.

Brouillette's "keeping up with the Jones" hypothesis or international imitation of special needs ideas and practices developed out of the ideas of
Dybwad (interview quoted in Brouillette 1992b) who suggests that the cross national diffusion or transfer of ideas, finances, materials, personnel and techniques relating to disability services is the greatest single influence for accelerating special education development. Although Dybwad notes that this acculturation process implies that special education methods used in the West will be copied or act as catalyst for developing countries, he and other writers note the difficulties of the "blind cross fertilisation" of methods without full recognition of the social, economic and cultural environment into which the transplant takes place.

The international exchange of information was accelerated in 1981 by the International Year of the Disabled and the Decade of Disabled People (1982-1991). These international events challenged governments to review policies on special education. They also stimulated the work of non governmental organisations and international organisations and in many cases increased their pressure on governments for change.

Brouillette (1992b) goes on to discuss the influence of international organisations on the development of special education in Mauritius and a number of other countries. He divided the broad grouping of international organisations into international NGOs such as Disabled Persons International and World Federation of the Deaf, intergovernmental organisations such as UNESCO and World Health Organisation and foreign NGOs such as Save the Children Fund, Commonwealth Society for the Deaf, Oxfam. He also recognises the influence of foreign governments on special education in developing countries, indirectly through the work of their bilateral aid agencies.
The literature from organisations such as UNESCO chart their increased involvement in special needs education from early general publications in the 1960s and 1970s through to their key involvement in the 1990s with international declarations on basic education (WCEFA 1990) and special needs education (UNESCO 1994). In the earlier years UNESCO (1979) whilst noting the easy transfer between countries of special education practices cautioned against unquestioning duplication:

Historically patterned systems of dealing with the handicapped in stable established societies may not have the same degree of efficacy when transferred to modern, industrial and adaptive societies. Each generation must strive to develop its own solutions to social problems (p. 305).

More recently UNESCO has worked to bring special education issues into mainstream debates on education, including it in the Jomtein Conference declaration on basic education, and relating special needs to issues of equity and equal access. The most recent Salamanca Declaration (UNESCO 1994a) embraced the ideas of inclusive education and the need to change and adapt mainstream education for the benefit of children with disabilities and difficulties in learning as well as all pupils.

Yahaya-Isa (1980) from Malaysia noted the difficulties that had arisen as a result of the wholesale imitation of methods of educating deaf children from overseas. Karey (1984) writing on the education of blind children noted that "Special education in Africa is profoundly European in origin, practice and prejudice, in 'spite of Africanization". This quotation has echoes in works looking at the education of deaf children in developing countries.
Lane (1992) in his book *The Mask of Benevolence* sought to develop an analogy between the colonialisation of deaf people and their community by hearing professionals and that of Africa by European powers. He failed, however, in his discussion of deaf education in Burundi to question his own neo colonial attitudes in trying as a white hearing American to lay down guidelines for the development of deaf education. Lane’s work on developing deaf education in Burundi seemingly failed to recognise the only school for deaf children in the country, started by an American church group. He opted instead for official government provision and policy and was instrumental in arranging for a deaf Burundian girl and a hearing psychologist to go to America, she for secondary education and he for training as a teacher of the deaf. Lane’s failure to work with the international deaf community and a well-known deaf black American who had worked in Africa for a number of decades drew considerable criticism (Moore 1993).

Lane’s work does however highlight a number of key issues in the development of deaf education in African and other developing countries. These included how to balance early provision by churches and charities with encouraging government responsibility, and how to provide training for early staff, usually overseas, while developing a critical and questioning view of provision elsewhere.

In my own previous research (1989) I had become aware of the strong overseas influences on the development of deaf education in a number of developing countries. These included the work of missionary organisations and local churches and also the work of bilateral aid agencies in initiating early training of staff and the building of schools. Early funding had allowed for the training of staff overseas in various educational methods.
used in the education of the deaf. Other types of international assistance I
had noted from this research were in the financial and practical support of
local charitable organisations, from developed countries, in the sending out
of audiological equipment, with little consideration for its appropriateness,
and also in the use of overseas consultants.

More recent work by Walters (1995) *Globalization* notes a web-like global
network of intergovernmental organisations (IGOs) and international non
governmental organisations (INGOs) through which international goal
setting and decision making can take place. Walters (1995) considers that
IGOs such as those of the UN structure are particularly significant in
global terms as they outflank nation states. IGOs can also link diverse
people in a common issue or interest which can undermine the role of the
state. Although not specifically considering organisations such as
UNESCO and WHO which have a brief to consider disability issues
Walters has provided a framework for analysing the role of such
organisations in relation to disability and deaf issues in Zimbabwe.

Walters work also plots the increase in INGOs in the second half of the
twentieth century relating to a number of issues of global concern, such as
the environment, sport, religion and education. This research will seek to
address the increased role of INGOs in relation to deaf education and
special education issues. Walters considers that INGOs and NGOs
represent a "complex ungovernable web of relationships that extend
beyond the nation state" (p. 113). Although not discussing disability
issues specifically Walters goes on to note that "it is clear that national
governments are obliged to take IGOs and INGOs seriously" (p 113), as
they represent a parallel process of consensus building. These views will be
tested in the following data chapters.
From this review a preliminary proposition was developed:

That the internationalisation of the debate around the provision of education for deaf children is an important influence on the work of the government and of NGOs in Zimbabwe.

PROPOSITION 2

As early as 1979 UNESCO was advocating the development of special education within the general education system of member countries, as advantages could be gained from being part of the existing educational infrastructure and services. However, by 1990, there was an acknowledgement that special education provision could develop best with government initiatives and co-ordination between voluntary organisations, overseas charities, bilateral aid agencies and parents groups (Hegarty 1990).

In many developing countries, particularly in Africa, general education developed through the provision of missionary societies, churches, local councils, charities and the government (Oliver and Fage 1988). This has also been true of special education provision. However, as Kisanji (1993), notes a number of governments have been reluctant to take over responsibility for special education from the early pioneers. The lack of specific national policy in special education has resulted in the relegation of this sub section to the bottom of the list of priorities in budgetary and other resource allocations. Kisanji calls for policy on special education to be developed by governments, to provide vision and direction. Policy in
special education also needs to be regularly reviewed in order to ensure commitment and responsibility and to incorporate new trends, knowledge and skills.

Ross (1988) writing on the education of "handicapped" young people in eastern and southern Africa in the early 1980s observed that there were a wide variety of policies and administrative structures for special education. "The generally minor role of governments and the major roles of churches, parents groups and some other special interest organisations in pioneering special education services has been noted" (p. 47). The range and extent of government involvement varied between countries in the planning, financing and administration of special education. Ross also noted a general lack of continuity and involvement of special education with the overall policies for educational development. Special education was generally seen as a discrete entity, not an integral part of the core educational services.

Writing on special education in Mauritius, Brouillette (1992b) noted as one of his eight major findings that "non governmental organisations (NGOs) are more influential than government agencies in special education development" (p. 12) In the initial stages of special education the NGOs provided most of the finance. They were also involved in social and political events to change attitudes to special education in the society at large and in the government. “Non governmental organisations.... both in and external to Mauritius have led special education development” (p. 314).

UNESCO (1988a) surveys of 58 developed and developing countries noted an increase in national government responsibility for special education.
Forty-eight out of the 58 countries reported government responsibilities for special education within the education ministry both at national and state level, rather than with health or social welfare agencies or with NGOs. In the remaining countries the governments preferred to fund private or independent schools perpetuating segregated educational provision for children with disabilities.

The history of special education in many developing countries is considered to follow a similar pattern by some authors (Brouillette 1993). That is, with initial provision by missionaries and churches followed by the emergence of charitable non governmental organisations who ran a parallel service mostly in the form of day and residential special schools. A number of special schools were also started by volunteers from developed countries in the 1960s and 1970s. The International Year of Disabled Persons 1981 increased pressure on governments to respond to calls for increased special education provision. And as noted above in the 1980s more governments had assumed responsibility for special education. But as Brouillette (1993) notes "non governmental organisations have viewed their government’s actions with mixed feelings" (p. 32). A second proposition that the literature and the early data indicated was:

That limitations in the provision by NGOs precipitated government involvement and lead to a significant increase in provision and an adaptation of the role of NGOs.

PROPOSITION 3

The literature on special education policy making and implementation was reviewed. A number of writers identified the existence of conflicts and
tensions in the expansion of educational provision and the development of policy. Tomlinson (1985) states that "The development and expansion of special education are the result of a variety of conflicting interest groups, both inside and outside education". Similarly, Oliver (1988), writing on the social and political development of policies relating to disability issues, writes that "Notions of conflict and vested interests can also be used to explain the development of special education. The power of certain groups to advance their interest at the expense of others is a crucial part of this explanation" (p. 18).

An Australian writer, Gillian Fulcher (1989), in her book Disabling Policies? A Comparative Approach to Education Policy and Disability, unhappy with earlier writings on policy making, developed a model of policy as discourse and struggle as a framework for her research on new federal government policies on integration. Fulcher also considered policy in a number of different situations for example California, England, and the Scandinavian countries.

Fulcher's model put aside the view of policy making as a top down process and also rejected the division between policy and implementation. She also questioned the literature on policy that seeks to identify a policy and practice, or rhetoric and reality gap. Her experience in the field suggested a model which saw policy as struggle in various meetings at different levels, or arenas, in the educational structure: "struggles occurred between contenders of competing objectives, contenders put their point of view in each arena, discourse (how the issues were talked about) was deployed as tactics......to persuade others to the speaker's view"(p. 4). The discourses of various groups used different themes, types of statements and had different objectives. Fulcher's view was that policy was the product of these various
struggles, the product of different arenas, that struggles culminated in decisions. Fulcher's work and the comparison with policies elsewhere confirmed that policy on integration and other disability issues are the result of complex interaction between governments, and other institutions at various levels and in a range of arenas in the education system.

Fulcher's theme of policy as discourse and struggle in various educational and social arenas has been adopted in this research, and two areas of debate and struggle were identified from the literature and the preliminary fieldwork. The two areas of debate identified were:

1. the segregation-integration conflict in relation to the education of deaf children,

2. The communication methods conflict in the education of deaf children, between oralism, total communication and a bilingual approach,

From this review of the literature this proposition was developed:

That the extension of educational provision for deaf children has been as a result of struggles between interest groups focused around the type of school provision and the communication methodology.

PROPOSITION 4

Deaf people have become increasingly involved in issues relating to the education of deaf children. Other disability groups organised earlier to influence educational provision for young children with particular disabilities for example blind and physically disabled children. Their
organisations have been at the national as well as the international level, from charitable bodies such as the Royal Commonwealth Society of the Blind and the International Blind Union through to the more recently formed organisation of disabled people such as Disabled Persons International. In the last twenty years organisations of disabled people have become increasingly influential in terms of empowering their members and exerting influence on national government policy. International NGOs have also lobbied intergovernmental organisations and others on issues such as equal opportunities, promotion of disabled peoples' rights, rehabilitation, education and employment.

In the last century when the education of deaf children in much of Europe and then North America used sign language, or the manual method, then the role of deaf people in the education of deaf children was more widely accepted. Other writers (Lane 1984) have documented the declining influence of deaf people as educationalists with the rise in favour of the oral method. With oral methods, teaching deaf children to speak and communicate with the hearing society became a priority and so deaf people for many decades had little or no influence in education.

Oralism dominated deaf education in most of the world from the beginning of this century through to the early 1970s. There were a limited number of places in North America and Europe where education for deaf children was continued using manual methods. In the 1970 and 1980s in a number of different countries the outcomes of an oral education particularly for severely and profoundly deaf children were beginning to be questioned. Comparisons were being made between the education outcomes in terms of literacy and language skills of deaf children of deaf parents and deaf children of hearing parents. Researchers in Sweden (Ahlgren 1990).
Denmark and the USA (Bergmann 1994, Davies 1991, 1994) as well as in the UK (Conrad 1979) were all beginning to advocate some limited use of signs in the education of deaf children either in terms of a signed system (signs to support spoken language) or the use of sign language. They considered the use of deaf parents and other deaf adults as beneficial in the development of a deaf child and her family.

The transition from oral education to total communication and on to the bilingual approach in the education of deaf children has been documented well elsewhere. Suffice to say here that most of this development has been taking place in the developed countries of North America, Europe and Australia. An outcome of these developments has been an expanding interest in many countries in sign language research, the development of deaf history studies and the increased involvement of deaf people in issues relating to the education of deaf children.

The World Federation of the Deaf (WFD), formed in the late 1940s as an international organisation linking national associations of the deaf initially from Europe and North America and later from further afield, began advocating the use of sign language in the education of deaf children in the 1970s. Their President Yergen Anderson at a UNESCO conference on *Alternative Approaches to the Education of Deaf Children* in 1984 gained the acceptance of sign language as a valid method in the education of deaf children (UNESCO 1984, Andersson 1991).

In more recent years the WFD, an organisation of deaf people, has advocated the use of a bilingual approach in the education of deaf children (WFD 1990). It has also been committed to an educational policy that has questioned the rise in integrated or mainstream provision for many
deaf children. Instead WFD, has since the mid 1980s, advocated the retention of special schools for deaf children as an education option. There had been considerable concern in the federation about the exclusion of deaf children, within an orally orientated mainstream environment, from much classroom and general communication. Instead they advocate education in sign language in a signing environment where the spoken and written language of the wider community is taught as a second language through the medium of sign (Ahlgren 1992).

WFD has also since the mid 1980s shown an increased commitment to the lives of deaf people in developing countries, with the publication in 1991 (Joutselainen 1991) of the first ever survey of the lives of deaf people in 69 developing countries. As a result of this survey and the finding that only a very small percentage of deaf children in most if not all developing countries receive a formal education, the WFD has actively lobbied intergovernmental organisations on issues relating to the deaf education in developing countries.

Writing on the development of the first international organisation of disabled people, Disabled Persons International (DPI), Driedger (1988a, 1988b) called the coming together of disabled people from around the world as the last civil rights movement. Her work charts the development of DPI from a social movement to an international organisation. Driedger (1988a, 1988b) examines how a social movement becomes possible when a group of people revised their view of their position from one of misfortune requiring charitable intervention to that of an injustice requiring justice. An organisation arose then from the impetus to make headway if a movement was to achieve its goals.
In the case of disabled people and the DPI the aim of the disabled people’s social movement was to challenge a medical model of their situation, and promote a social model of disability. With the Deaf community the main aim has been in recent years to promote a view of Deaf people as a linguistic minority, whose needs are for linguistic rights, and recognition as a cultural group (Lindquist 1995).

Disabled people, as consumers, in many cases, of special education have since the 1980s become increasingly influential throughout the world. Their organisations empower disabled people, strengthen their national and international organisations, lobby governments and inter governmental organisations and in particular challenge previously unquestioned social attitudes. This movement towards self advocacy and empowerment has been well documented by Coleridge (1993) and is, as he notes, paralleled in other areas of social development in Third World countries.

From this review of the literature on the role of deaf people and their organisations on the education of deaf children the following proposition for developed:

4. Deaf people are increasingly emerging to establish themselves as a key interest group in the education of deaf children.

Conclusions

Having identified these propositions and an appropriate theoretical framework, the next task is to detail the implied methodology for investigating these issues in Zimbabwe. A case study methodology was
considered most suitable with a number of different methods of data collection. Following the data analysis done within the framework established in this chapter the four propositions were critically reconsidered and analysed in the final chapter.
CHAPTER 2

METHODOLOGY

Introduction

This chapter describes the research strategies used to examine the research question and propositions identified in the previous chapter. This study uses a single country case study method to describe and analyse past and present policies and provision in the education of deaf children.

The chapter is divided into seven sections. The first section looks at the implications for case selection and data collection brought about as the result of the identification of the research question and propositions. The second section looks at case selection and the choice of Zimbabwe for a single country case study. The third section looks at the procedure used in the collection of data, the timetable of the research and issues of access. A number of methodologies were used in this research, document analysis, semi structured interviews and site visits, these are considered in the fourth section. Section five looks at the analysis of the research data and the writing up of the findings. The last two sections look at the advantages and disadvantages of researching as an outsider and finally the strengths and limitations of case study research.
Research Question and Propositions

As the previous chapter set out, the following research question was established in the early stages of the research:

What are the roles and policies of non governmental organisations, international organisations and the government in the development of education for deaf children in Zimbabwe?

After a thorough review of the literature on special education and deaf education in developing countries and a preliminary visit to Zimbabwe in October 1993 a number of research propositions were developed. The process of formulating the propositions was ongoing over a three to four month period as new literature came to light and as a result of discussions with supervisors and fellow researchers in this field. Refinements to the wording of the propositions went on into the final year of the research.

An early decision was made as a result of the literature survey and also out of a concern to investigate the process of development, to look at current policies, in detail, in the light of their historical and social context. As a result this became a comparative, historical study of policy in an area of special education in a developing country. The key policy players in developing deaf education were identified at an early stage as non governmental organisations, international organisations and the government, these became the focus of the investigation. However, detailed background information on social, cultural, political and economic factors influencing special education, attitudes to deaf and disabled children and wider educational issues were also considered a priority.
I considered it important to establish a working draft of the propositions prior to the second period of field work in April and May 1994. The propositions acted as a framework for the data collection and proved to be provocative during the period of fieldwork.

The four propositions are:

1. That the internationalisation of the debate around the provision of education for deaf children is an important influence on the work of the government and NGOs in Zimbabwe.

2. That limitations in the provision by NGOs precipitated government involvement and lead to a significant increase in provision and to an adaptation in the role of NGOs.

3. That the extension of educational provision for deaf children has been as a result of struggles between interest groups focused around, the type of school provision and the communication methodology.

4. That deaf people are increasingly emerging to establish themselves as a key interest group in the education of deaf children.

The propositions then provided a number of the key headings in the periods of data collection and analysis.
Case selection

The identification of the research question and the key areas of interest indicated early in this research that it would be qualitative in nature. Mertens and McLaughlin (1995) and Peck and Furman (1992) identified the early dominance in special education research of positivist quantitative methods and have recognised the need for a qualitative analysis of special education problems, particularly in the area of policy and practice. They also note the fundamental role of ideology and social and political processes in shaping policy and practice in special education. Qualitative research provides insights into social and political processes, cultural values and institutional practices that influence special education.

Mertens and McLaughlin (1995) considered case study research valuable in special education as it is one type of interpretive approach that emphasises the individual or group or gives an intensive detailed study of a particular approach or aspect of special education. Hammersley (1993) considers qualitative research to be more relevant, in certain situations, in understanding social and political events and is often more accessible and useful to policy makers than statistical analysis.

A case study strategy was considered appropriate as it is:

an empirical inquiry that:

- investigates a contemporary phenomena within its real-life context; when

- the boundaries between the phenomena and its context are not clearly evident; and in which

- multiple sources of evidence are used (p.23 Yin 1989).
Yin’s definition more clearly represents the nature of this research with its emphasis on studying phenomena in context.

The distinctive need for case studies arises, out of the desire to understand complex social phenomena (p.14 Yin 1989).

The research question had recognised the need to identify and investigate the various interactive processes at work, in the development of education for deaf children, and the strength of case study research is that it allows the researcher to concentrate on the specific instance or situation (Bell 1987). Each organisation or education system has its unique features

The case study researcher aims to identify such features and to show how they affect the implementation of systems and influence the way an organisation functions (p.7 Bell 1987).

Walker’s (1993) definition of case study that emphasises the study of particular events and incidents in education such as curriculum reforms, or particular innovations is not so applicable to this research, which looks at policy making in a specific area of education. However it does support Walker’s (p. 165 1993) "commitment to the study and portrayal of the idiosyncratic and the particular as legitimate in themselves".

Experimental and survey research methods were ruled out because of a number of inbuilt difficulties with using this type of research method to address the question already established. Experimental research requires the researcher to have some control over the subjects of research and their
environment, so that factors in the environment can be altered and resulting changes observed, measured and analysed. In the research as indicated by the research question there was no possibility of the researcher being able to influence or alter factors in the environment of the object of the research. The research needed instead to observe and note past and present policies and provision and the environment, social and political, of changes in policy (Hammersley 1993). A large scale survey may have failed to identify the specific processes crucial to the development of deaf education, the micropolitical issues and patterns of influence in a particular context (Bell 1987).

A study of two or three developing countries was seriously considered for a period, however, after a while an international comparative study was rejected on a number of grounds:

1. Time; a single country study gave time for in depth and detailed study in one country it also allowed for more time to understand the cultural and social context of the research. The period allocated for this research was three years and to visit two or even three countries, possibly twice to each country was considered too much to organise and complete in the time available.

2. Finances; this research was funded by the Economic and Social Research Council (ESRC) and the studentship only allowed for one period of overseas research per student, finding alternative funding would have been time consuming in terms of administration and detracted from the research. The preliminary visit to Zimbabwe was funded by the Open University.
3. The research question and propositions; the type of study that was implied in the research question and the early areas of interest indicated the need for an in-depth detailed research of the situation in one country. The need to place the research in a detailed historical social and political context was considered vital.

These three factors: the nature of the research question, finance and time limitations, were vital in the final research design decision to conduct a single country case study. This decision was made about six months into the research in February/March 1993.

Once the decision had been made to conduct a single country case study it was important to decide as quickly as possible which country to study. There were a number of important considerations to be taken into account in deciding on a specific country. These were:

1. The country had to be English speaking or at least use English as one of its official languages.

2. A small to medium sized country was considered more suitable, so that it was possible to obtain a full overview of developments throughout the country. A small to medium sized country was also considered preferable for logistical reasons so that it was possible to complete the fieldwork within the time constraints. A very large country with transport difficulties would have added considerably to costs and time.

3. The country needed to be politically stable and likely to remain so for the period of the research. A country experiencing civil unrest
is more difficult to do fieldwork in, also it would be less likely to be considering expansion in special education or new developments.

4. Finally a middle income country was considered to be preferable, also one that was not experiencing long term educational difficulties as a result of a structural adjustment programme.

A short list was drawn up of three possible countries. A short literature review was undertaken on special education and particularly the education of deaf children in each country and eventually Zimbabwe was chosen for the case study. One country was eliminated as national elections were taking place and there was a likelihood of civil unrest. Another was excluded as it was considered not large enough with only one school for deaf children. Zimbabwe fulfilled the criteria set out for the choice of a case study country. Zimbabwe also had a mixture of government and NGO provision and was considered to be fairly typical in respect of many southern and eastern African countries in this respect (Ross 1988).

Procedure

The selection of organisations and respondents

The identification of organisations and respondents for this research required detailed on-going investigation. A number of organisations, government ministries and schools were contacted at the beginning of this research. Many of these contacts recommended other key people or organisations. My initial visit to Zimbabwe in October 1993 also widened
the net of contacts as a result of interviews and from the literature collected.

A notebook of contacts was kept during the research and full details of organisations, schools, ministries, individuals were noted down. The notebook was constantly updated especially during the fieldwork. At the end of most interviews I asked for details of individuals and contacts who might be useful for my research. Finally this list of respondents and organisations were checked with several Zimbabweans’ knowledgeable in deaf education in case there were any significant omissions.

Workplan for the Research

Anderson (p. 163, 1990) argues that to ensure the internal validity of a case study the research should incorporate a chain of evidence and a detailed workplan so that other researchers are able to follow the steps in the data collection and analysis which point to the conclusions drawn.

Stage 1 Literature review and initial enquiries

Following the initial literature review and the development of the main research question, there was a need to choose the case(s) for study. A second period of literature review was then undertaken to gain as much information on Zimbabwe as possible. Background information was sought on the geography, history, social and political situation (see Appendix 2). Particular attention was focused on educational developments and policy and provision in all areas of special education not just deaf education. Zimbabwean educators in the UK were contacted and interviewed and I
attended a number of research days held by the Britain-Zimbabwe Society to gain further information and to make contact with other researchers in this area. Correspondence was initiated with organisations, ministries, schools and academics in Zimbabwe involved in the education and rehabilitation of deaf children.

Both the processes of researching the literature and corresponding with contacts in Zimbabwe were ongoing throughout this period of research.

**Stage 2 Visit to Stockholm conference.**

In the summer of 1993 I was able to attend the *Bilingualism in Deaf Education Conference* organised by the World Federation of the Deaf and UNESCO held in Stockholm Sweden. At this four day conference papers were given by experts on bilingual education, and the use of a bilingual approach to the education of deaf children, predominantly Scandinavians. At the conference about a third of the delegates were from developing countries. I conducted semi structured interviews with 10 delegates from developing countries. I also interviewed the head of the UNESCO Special Education Unit. The conference provided an opportunity to study in detail the work of an intergovernmental organisation (UNESCO) and an international organisation (WFD) involved directly in the education of deaf children in developing countries.

The field notes were written up after the conference. The interviews were written up and analysed and the replies were taken into consideration in the process of refining the propositions. The information from the conference and the interviews has been used in various places in the thesis.
(A copy of the interview outline and a list of delegates interviewed is included in Appendix 1.)

**Stage 3 Initial Exploratory visit to Zimbabwe.**

Following the identification of the research question and during the early stages of developing the propositions I recognised the need to make a preliminary visit to Zimbabwe, to gain additional background information and to visit a number of schools and non governmental organisations. I also used the visit to test out my research ideas with Zimbabweans experienced in the education of deaf children. During this three week period of fieldwork I visited three schools for deaf children, a rehabilitation programme for pre-school deaf children, an associate expert in special education at the Harare regional offices of UNESCO as well as a number of NGOs. A full list of all the people interviewed and documents collected are listed in Appendix 1. During this field trip I also needed to consider access to data and the possibility of there being sufficient data for the research.

**Stage 4 Preliminary Analysis**

Following this first period of fieldwork I wrote up all the interviews and details from the visits to schools, non governmental organisations and international organisations. All of the documents were collated and the information was analysed first against the original research question and then against the three areas of interest identified from the original question. The analysis of this data together with the data from the Stockholm conference delegates was important in the development of the research
propositions. These propositions were refined over a two month period and a working draft agreed early in 1994.

Another important task undertaken during this period was the completion of the application to the Research Council of Zimbabwe seeking permission to conduct research in Zimbabwe. The completion of a full research proposal helped in sharpening up the final research ideas. Permission to visit during April and May 1994 was granted in March 1994. Permission from the Research Council was vital if the second period of fieldwork was to go ahead. It gave permission to visit government ministries to interview civil servants and to gain access to some policy documents. I was asked to show my documentation at almost every ministry and government school that I visited.

Stage 5. Second Visit to Zimbabwe

The second period of fieldwork took place in an intensive five week period in April and May 1994. As Walker (1980) noted with case study research the fieldwork is often in a condensed form and of shorter duration than with ethnographic observations. For this period of fieldwork a detailed list of respondents was made up prior to the visit, all of the people were contacted by letter or fax prior to the visit giving details of dates and travel arrangements around Zimbabwe. A preliminary list of known documents to collect was also made, as well as lists of places to visit schools, resource units, rehabilitation programmes, colleges and university departments. The first few days in Harare were spent meeting and reinterviewing people contacted on the first visit and ringing around and visiting offices to make precise appointments with all the other respondents.
During this visit I had government permission to carry out research in Zimbabwe and was therefore able to interview ministry officials. However, making appointments with a number of officials proved difficult and a number of visits to their offices had to be made before an interview was arranged. I managed to interview a number of people who were significant in the recent education of deaf children in Zimbabwe twice. This was particularly important as it allowed time to analyse the initial responses and to probe more deeply in the second interview.

I asked for documents at every single interview. I collected school reports, college syllabuses, government documents and policy papers, five year reports from bilateral aid agencies, newsletters and parents magazines for pre school programmes. All of these were noted down for later analysis. Some were only lent for a few days and notes had to be taken or portions photocopied for further use. It was most difficult to obtain detailed material from the government departments. The copies of government policy documents were all obtained from other sources: academics, regional officers and other researchers. Ministry of Education staff were not willing to provided detailed policy documents even after persistent requests to several officers. They did provide me with current reports, but it was very difficult to obtain historical documents or policy papers. In schools and at the offices of a number of NGOs it was often easy to obtain recent or current reports and documents, but it was much more difficult to get older documents.
All of the interviews were conducted in a semi-structured manner. A list of key questions was outlined at the beginning of most interviews. Initially all the interviews were taped, but after several days a more discerning approach was used. A couple of government officials did not like being taped, but were happy for me to take notes during the interview. Also I found transcribing a number of the earlier tapes quite difficult as the speakers had English as a second language and the different intonation patterns made transcription very difficult. As the fieldwork went on I taped fewer interviews and instead took notes throughout every interview and then tried to write up full details immediately after.

I wrote up all of the day's notes in full in a fieldwork note book. After each interview I noted key findings and any questions triggered by the interviews. In this book I also kept all details from borrowed documents and lists of interviewees and documents collected. As a result of constantly reworking the original data every day while in the field the original interview structures worked out in the UK were occasionally rewritten in the light of new evidence or of a new perspective on the particular situations.

**Stage 6. Data Analysis and writing up**

The data analysis and writing up went on from June 1994 to the completion of the thesis. The first stage was the word processing of the field notes and analysis of all the documents. First drafts of a number of chapters had been completed prior to the second period of fieldwork. These included the literature review and propositions, methodology as well
as detailed background notes on Zimbabwe and deaf education in developing countries.

Following the data analysis chapters 3-6 were written up in chronological order during the autumn and winter of 1994-5. A number of the earlier chapters were then rewritten and finally the last chapter was completed in the early summer. Complete draft copies of the thesis were sent to a number of people in Zimbabwe and the UK for comment in the summer of 1995.

**Data Collection**

**Sources of data**

Case study research uses a wide variety of data sources, this study included

1. Historical data
2. Documentation
3. Interviews
4. Site visits

1. **Historical data**

All organisations leave trails of documents and records that trace their history and current status (Mertens and McLaughlin 1995). For the purpose of this research historical data was collected in order to give contextual detail for the understanding of current policies. Such data has included old school reports, leaflets, books, pamphlets etc. A number of
interviews included a section giving historical information. Information was collected about the education of deaf children from its beginning in the 1940s through to the time of the fieldwork 1994. Historical information on other areas of special education as well as general educational developments was also collected. Collecting historical documentation in the field was frustrating, most people were unwilling to part with historical material and repeated attempts to uncover historical data yielded limited, but valuable, material (Anderson 1990).

A number of old documents were obtained from sources in the UK these were mostly specialist libraries such as that at the RNID and Institute of Child Health both in London. A number of sessions were spent in the reference section of the University of Zimbabwe taking notes from old government reports and documents, which were not available elsewhere.

2. Documentation

This was one of the largest data sources for this research and included a wide variety of current and recent data from acts of parliament, educational statistics, NGO annual reports, leaflets, magazines, newsletters, directories, etc. A number of government documents including acts of parliament and the current Ministry of Education annual report were bought from the government printers in Harare. Information from earlier Ministry of Education and Culture annual reports was obtained from the University of Zimbabwe library.

Obtaining official government documents proved difficult in a number of situations, the attitude of officials seemed to be that documents were not to
be shared with an expatriate researcher, even one with the necessary government approval. Current reports were obtained from a number of government interviewees, but policy documents and old reports were more often borrowed from NGO officials and academics.

While in the field I developed a squirrel-like, hoarding mentality to documentary and historical data, once back in the UK I became more questioning of the material, and tried to understand the position of the author and the intended audience (Vulliamy et al. 1990).

3. Interviews

Interviews in qualitative research are often done in an unstructured or semi-structured format, in a number of different situations (Mertens and McLaughlin 1995). A large number of interviews were conducted for this research with a wide variety of people involved in the education of deaf children. These included school teachers, head teachers, staff from international organisations, academics, speech therapists, social workers, etc. The majority of interviews were semi-structured. A list of questions and areas to be covered during the interview was worked out and written up in advance. On many occasions these were made explicit to the interviewee at the beginning of the interview. Some interviews were recorded and later transcribed. During the other interviews notes were made during the interview and these were checked and augmented immediately after. A small number of interviews were more structured. In these the schedule of questions was adhered to as closely as the interview situation allowed. In a number of situations additional questions emerged during the interview and these were added or replaced pre-established questions. As Glesne
and Peshkin (1992) note this is part of the responsiveness needed in qualitative research.

Interviewing formed the backbone of the data collection and was more time consuming than initially anticipated. Particularly difficult was the setting up of interviews. Gaining access to some of the interviewees took several visits to their office and a certain degree of persistence. Other people were willing to be interviewed on first meeting and were happy to share their knowledge and understanding. Interviews varied in length from ten to fifteen minutes to over two hours, on average the time taken was forty to fifty minutes.

4. Site visit

Visits were made to a large number of places where deaf children were receiving educational or rehabilitational services. These included schools, resource units attached to mainstream schools, and two rehabilitation units for pre school children. Visits were also made to NGOs and the offices of several international organisations in Zimbabwe. I also interviewed staff at a teacher training college running special education courses as well as staff at the University of Zimbabwe. I also attended a support group for parents of recently diagnosed deaf children, and went to the offices of a number of national development programmes in Zimbabwe. These site visits were important to the research in obtaining additional data through detailed interviews and often led to the identification of new and relevant documents and reports.
As the data was collected a research database was established with details of all interviews, documents, site visits, etc. Important information was put on the database including for example the name and position of the person interviewed, the date of the interview, any documentation collected, etc. With the documentation section information on the organisation it was obtained from, date of publication, intended readership was also noted. Parts of the database are included in Appendix 1.

**Data Analysis**

The process of data analysis is one of organising and synthesising the information collected and looking for patterns, finally deciding on what to include into a final report (Bogdan and Biklen 1992). The process of analysis started in the field as I reflected on the data during its collection. A number of key issues became clear from the early interviews such as the debates on oral or manual education of deaf children. Other issues only became apparent during later analysis such as the development of forums for exchanges of policies and ideas between government ministries and NGOs. During the fieldwork I tried out a number of ideas gleaned from earlier interviews on later interviewees. For example one former headteacher said "that the government was leaning on SIDA" (the Swedish International Development Agency), a key funder of special education, in the development of special education. I reflected this view back to a SIDA official in Harare a few days later and sought his reaction.
Whilst still in the field I wrote down a number of key issues at the end of almost all interview notes. Once back in the UK after the field notes had been word processed the number of key issues was added to as the material was read and re-read.

After the fieldwork I word processed all of the material and pulled together all of the interviews from the first and second fieldwork. After this I read and started to code all of the documents I had collected. A number of key headings for coding were obvious from the material. From a number of the headings a series of sub headings and then sub sub headings were developed as the analysis proceeded. For a number of key areas I wrote up full reports from the data, for example on the sign language research in Zimbabwe and another on the work of SIDA. Aspects of particular significance to the education of deaf children such as the use of hearing aids, communication policy and types of provision were particularly interesting and large amounts of data were collected.

For other areas of the data a series of time lines were developed and the data analysed in this way, for example time lines were completed for government policies and levels of provision, also for developments in general education and developments in special education. Before the writing up of section two of the thesis began a large wall chart was made with time on the vertical axis and about twelve of the major headings on the horizontal axis. The vertical axis was divided into the time periods for chapters 3-6 on the horizontal axis I filled in the major heading and subheading from the analysis, such as community based rehabilitation, sign language research, funding, education policies, etc. This chart helped
to ensure that all of the major headings were included in each chapter. A copy of the chart is included in Appendix 1.

The different types of data display used in the analysis phase of the research time lines, matrices, wall charts were an important part not only of the analysis but also of the writing up. The diagrams helped in the theorising about the data and in the search for patterns (Glesne and Peshkin 1992).

**Researching as an Outsider**

A number of strengths and limitations have been identified in this research. Some relate to its international comparative nature, others to the research methodology used. In many research situations the researcher is an outsider, whether the research is carried out in the researcher's own country or not. However, comparative researchers (Vulliamy *et al.* 1990, Thomas 1990) recognise the particular difficulties in carrying out research overseas. These centre around issues of cultural difference and researcher bias.

Jacka (1994) recognises a number of pitfalls in carrying out research in other countries. She does however also highlight a number of advantages and possibilities arising from such research. Among the advantages she notes the valuable contribution such work can make to cross cultural understanding. Researchers from overseas can generate new reflections on national situations and their work can contribute to international discourse
in their field. This research has noted the gradually increasing interest in publishing in international issues relating to disability and deaf issues. This work will contribute in a small way to increasing international understanding of issues relating to the education of deaf children in developing countries. It could through its description and analysis also influence educators and policy makers in Zimbabwe and other developing countries.

A lack of cultural sensitivity can result in the researcher not asking the right questions or inaccurately interpreting the findings. Through a lack of understanding the data collected may not fully represent the situation. In addition cultural factors may influence the information obtained through interviews, as people may wish a foreigner to see only what they see as the best in their institution or system. Issues of courtesy and etiquette sometime prevent the researcher from questioning too deeply or asking awkward or critical questions.

Associated with the issue of cultural sensitivity are difficulties that may arise as a result of lack of familiarity with the research situation. A lack of familiarity can result in the researcher being at a disadvantage regarding the historical and social context of the data collected. But a lack of familiarity with the institutions and systems can help the researcher to question taken for granted situations and provide new perspectives on the status quo (Vulliamy et al. 1990).

I have sought to overcome these difficulties in a number of ways. I undertook a preliminary visit to Zimbabwe in order to begin to familiarise
myself with the overall education system, special education developments and attitudes to disabled and deaf people. A number of key people were interviewed twice for the research and the more difficult or sensitive questions were kept until a rapport developed and a degree of trust was evident. As far as possible data on specific issues was collected from a variety of sources, so that the research was not overdependent on interviews or one particular respondent. Finally copies of the drafts of most of the chapters in this thesis were sent to a number of Zimbabwean academics and teachers who most kindly checked the facts and analysis. Their comments were most valuable and led to some reworking of the data.

A second limitation relating to the comparative international nature of this research is the question of researcher bias. All of my education and professional training have been in the UK. The skills, knowledge and values that I have as a researcher on special education are based on these experiences. The research questions and propositions I have generated, although founded on a thorough review of the literature and discussion with other academics, may not be the most important questions facing those I interviewed. To counter this I have sought throughout the period of data collection and analysis to feed in new questions and ideas as the research was progressing. I did this partly to reflect the concerns of those I met partly to reflect my new interpretations of the data.

Associated with this issue is the question of academic colonialism. Vulliamy et al. (1990) note the need for researchers from developed countries to conduct research that will benefit those being researched as well as the researcher. The acceptance of my research proposal by the
Research Council of Zimbabwe that checks all research in the country undertaken by foreign nationals helped to confirm the perceived value of this work to those involved in the education of deaf children in Zimbabwe. Vulliamy *et al.* (1990) also suggest means to share research knowledge and findings in the country studied. A number of these ideas have or will be followed. Background literature and research findings have been shared with Zimbabweans, the research has been discussed in a number of settings and feedback obtained. Reports of the findings will be sent to the Ministries who request it. A copy of the thesis and any papers and reports from it will be deposited with the University of Zimbabwe.

**Strengths and Limitations**

This final section of the chapter considers in detail the strengths and limitations of case study research, as well as the strengths and limitations of this particular study. It also covers the key research issues of validity, reliability and generalizability.

A number of the strengths and limitations of this research reflect those of qualitative research generally, others are more specific to this particular research.

Qualitative research methods have become increasingly popular in educational research over the last twenty years. The more traditional quantitative methods, used both in educational policy analysis and in special education, of questionnaires, surveys and experimental work have
seen the addition of qualitative methods such as ethnography, action research and case studies. Case study methodology has become just one method in an increasingly broad and diverse field of social science research.

Until recently in the field of special education research was dominated by psychological experimental methods and medical research (Tomlinson 1981). However, increasingly, doubts have been raised about the appropriateness of such methods in the study of complex educational issues. Hegarty and Evans (1985) noted the increase in qualitative research methods including ethnography, case studies and action research. They also noted the need for more multi- and inter-disciplinary research in special education.

Similarly in international comparative education, research has become increasingly diverse. Theisen and Adams in Thomas (1990) observed that comparative research lacks a coherent methodological framework, rather research reflects the disciplinary training of the researcher. Researchers come from a number of areas for example economics, anthropology and political science. As with other areas of social science research comparative education is in a period of methodological, paradigmatic and theoretical diversity. Within the field one nation studies that refer to investigations into a national education system, or a particular aspect of it, have become an often used method of research. Comparative educational research therefore acknowledges that although this research is not truly comparative it serves the field well whenever people match these studies against practice in other countries (Thomas 1990).
Stenhouse (1979) noted the importance of case studies in comparative educational research. He emphasised the descriptive nature of such studies and saw them as fundamental to comparative education.

Spindler (1982) wrote in defence of the single case study noting that "it is better to have in-depth, accurate knowledge of one setting than superficial and possibly skewed and misleading information about isolated relationships in many settings" (p. 8).

The strengths of case study research are therefore that they emphasise the particular, provide in-depth data on specific educational phenomena and seek to investigate issues within their social and political context.

Concerns are raised however from a number of quarters about case study methods in educational research. These concerns tend to focus around three specific issues, those of validity, reliability and generalizability.

Validity issues in research focus on the extent to which what the research measures is what it is expected it to measure, or represents what it sets out to represent. Internal validity relates to issues of truthfulness of respondents, accuracy of recording and the authenticity of historical sources (Anderson 1990). Internal validity marks the confidence that results obtained are true, that participants gave true answers in the study. Hammersley (1993) considers validity to involve selective representation, that is the extent to which the research accurately represents features of the phenomena it sets out to describe or explain. This research has attempted

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to provide sufficient background information on the social, political and historical context of policies for the reader to gain a fuller understanding of the subject of the case study.

One safeguard regarding validity of findings in this study has been that by using a number of different sources for data it has been possible to look for convergency in issues and themes. The convergency of evidence can give considerable strength to the data collected. Although in some matters in the research when seeking to obtain facts, issues of truthfulness have been significant, in many of the interviews the intention was to gain information on people's interpretation of events and policies. In these cases a number of different perspectives were being sought and issues of truthfulness were less significant.

Other protections to the internal validity of case study research lie in the clear inclusion of a chain of evidence, so that readers can follow the various stages in the data collection and analysis (Yin 1989).

The issues of the external validity of case study research will be covered by the generalizability section as this addresses questions of the extent to which findings are typical of other similar educational phenomena or are exceptional.

A major area of concern expressed over case study research is that of its generalizability. Yin (1989) argues that case studies are generalizable to theoretical propositions and not to populations or universes. He sees the researcher's goal as expanding and generalising to theories (analytical
generalisation) and not to enumerate frequencies (statistical generalisation).

Hammersley (1993) however notes that it is possible to generalise from case study research, but sees it as important not to think of generalizability as synonymous with statistical sampling. He goes on to suggest strategies for improving or checking the generalizability of findings. He notes the need to check the typicality of the case studied to a wider population or to choose cases to study that cover some of the main dimensions of a suspected heterogeneous population.

The strength of this study is in its detailed description and analysis of one situation rather than its immediate or obvious generalizability. This study will take its place among a number of other case studies on special education development and as Stenhouse (1979) comments will have comparability and generalizability of case with case.

Reliability relates to the consistency in measurement in quantitative research and to the degree of consistency between observers or the same observer in different situations (Hammersley 1993). A test that is reliable gives the same results every time. As case study research uses a wide variety of data sources reliability can be assured through the possibility of triangulation of evidence and the convergence of data from a number of sources on a number of issues or themes (Yin 1989).

An issue related to reliability is the one of replicability, that is the ability of another researcher to repeat the study. This research has been most
carefully documented and the detailed and explicit procedures section would make it possible for someone else to repeat this work. That is not say that they would collect exactly the same data or reach the same conclusions, as with a passage of time policies change as do perceptions and interpretations of events. Also the active role of the researcher throughout case study research in ongoing analysis and questioning of the data and in extending and altering the research questions can not be replicated by another researcher.

Case study research can be written up in a linear, analytical, chronological or theory building format (Anderson 1990). For this research a chronological structure was chosen, with references to the main propositions weaving through each of the four chapters in Section 2. Chapter 3 covers developments in deaf education up to Zimbabwean Independence in 1980, Chapter 4 covers the years 1980-1984, chapter 5 1985-1989 and chapter 6 includes the period 1990-1994.
Section 2
CHAPTER 3

COLONIAL DEVELOPMENTS AND LEGACY

Introduction

This chapter describes and analyses the early, colonial developments in deaf education in Zimbabwe. It gives information on the roles and policies of the government, non governmental organisations and international agencies in the development of education for deaf children and other areas of special education. The chapter is in three sections. The first section explores in detail the development of special education and in particular the education of deaf children in Southern Rhodesia (known as Rhodesia (1964-1978) and briefly Zimbabwe-Rhodesia 1979), as Zimbabwe was then known. The second looks at the beginnings of education for deaf children in other African and developing countries. The final section considers the broader educational and social context for the development of special education in Zimbabwe.

The period under consideration in this chapter is up to 1980. 1980 was the year of Zimbabwean Independence and as such marks a pivotal point in educational development in the country, with the election of the first government by universal franchise and the subsequent transformation of the country's educational provision. It is important to give full consideration to the beginnings of the present special education system as many of its strengths and weaknesses have their roots in colonial practices (Csapo 1986).
This historical background to the case study of deaf education in Zimbabwe provides a deeper understanding of current policies and issues, and also places the details of the specific situation in Zimbabwe in a wider national and international context.

**Starting Special Education**

Special education provision in Southern Rhodesia started in 1927 when Margaretha Hugo the wife of a Dutch Reformed Church clergyman opened a school for blind children at the Chiwi Mission. The school moved to a mission at Copota not far from Fort Victoria (now Masvingo) in 1939. In 1962, the Council for the Blind, with the assistance of an officer of the Royal Commonwealth Society for the Blind, started 'open' or integrated education for the blind, at Waddilove. This open education in the form of resource rooms, started in primary schools in the 1960s and was extended to secondary education in the 1970s. A second school for blind children was opened by the Jairos Jiri Association at Gatooma (now Kadoma) in 1980 after provision for blind children had been taking place in a joint school for the deaf and blind in the Naran Centre. Money for the Gatooma school came from national fund-raising as well as from overseas donations (Mdege 1985, Zvobgo 1990).

**Beginning Education for Deaf Children**

By 1979 the year before Rhodesian Independence, there was educational provision for deaf children in five institutions. This included two schools run by church organisations, one run by a national non governmental organisation, a disability charity, and finally there was provision in two
government schools for children with a number of different disabilities. The church and NGO schools were for black children, the government run schools were for white, coloured and Asian children. The following sections describe and analyse the factors that lead to the opening of these first schools.

**The Henry Murray School for the Deaf**

Education for deaf children in Southern Rhodesia started in the 1940s with the establishment of two church run schools for deaf children. The Henry Murray School for the deaf was opened in 1948 by a Miss Smut a teacher who came from the Worcester School for the Deaf near Cape Town in South Africa. The school was established at the Morgenster Mission of the Dutch Reformed Church near Fort Victoria (now Masvingo). Morgenster Mission was started in 1891 by the Dutch Reformed Church and was one of the first mission stations established in Southern Rhodesia by church workers who followed the early white settlers. The mission developed over the years to include a church, primary and secondary schools, hospital, school of nursing, theological college, teacher training college as well as a small farm and the school for the deaf (They Live in a World of Silence 1960).

The impetus for the school is said to have come in 1947 when a missionary working at a nearby missionary station noticed a small deaf child. She took the child into her home and another four deaf girls joined her. This made the idea of a school for deaf children possible and so the teacher was invited from a Dutch Reformed Church school for the deaf in South Africa to start the school. The whole mission station was at the time headed by a
Rev Henry Murray, so the school was named after him (interview Chigumo 1993). Others claim the school started at the nearby Parushama Mission in 1939 moving a year later to Morgenster (personal communication Peresuh and Rinashe 1995).

During the early years the aim of the school was to introduce the children to the Christian faith and to help them to communicate.

Our greatest aim in this school is not just to educate these children, but to lead them to the Lord Jesus... The method of teaching... is the oral method, whereby the pupils are taught to speak and to lip-read (They Live in a World of Silence 1960).

Oral methods were used from the beginning. The school followed a primary curriculum and then taught vocational skills such as carpentry and bricklaying as well as cookery. The school employed both African and European staff from the beginning.

In the early years it was difficult to attract staff to the school as there were generally negative attitudes to deaf and other disabled people held in the society. Parents often hid their disabled children and were unconvinced about the possibilities of educating deaf children,

Parents were very sceptic and could not believe that a deaf and dumb child could be taught to speak and to understand. They were unwilling to send their children. Some did send them but refused to send them back again after a term or even a few years, because the children were not yet able to speak fluently nor able to hear (They Live in a World of Silence 1960).

Although the school initially ran outreach programmes in the local rural areas, it expanded in the 1950s and parents from all over the country
started to sent their children to the school. This lead to a problem of which language to use for instruction as children were then coming from Shona and Ndebele speaking families. In these early years European staff were trained overseas either in South Africa or England. African staff trained initially as teachers and then received in service specialist training.

Up until 1960, most payments for the school were met by the Dutch Reformed Church, except when money was obtained from charities or trusts for specific projects, such as new buildings. After 1960 the school received a grant towards its costs from the government. Parents were also expected to pay a fee towards the education of their child and for boarding costs. The school continued to expand and in 1960 the number of pupils was over 100. By 1993 the number of pupils was 287. In 1960 the school already had a waiting list and expansion was limited by the size of the school and the difficulty in obtaining staff. In 1977 all the institutions of the Dutch Reformed Church were handed over to the Reformed Church of Zimbabwe. This is now the body responsible for the school and the mission station (interview Chigumo 1993 They Live in a World of Silence 1960).

*Loreto Mission School - Emerald Hill School for the Deaf*

The other school established in the 1940s was the Loreto Mission School run by Dominican sisters of the Roman Catholic Church from Germany. Dominican sisters from a convent in King William’s Town in South Africa were part of the first Roman Catholic expedition into Southern Rhodesia in 1890. The Dominican sisters started schools and hospitals in Salisbury and Bulawayo in the late nineteenth century, and went on to work in education and health care throughout Southern Rhodesia.
A group of Dominican sisters from Germany had in the 1940s established an orphanage for white children in Salisbury. At that time some sisters bought land near Gwelo (now Gweru) and the Loreto Mission was established. The mission consisted of over 3,000 acres, with a primary school, girls secondary school, teacher training college and farm. The school for the deaf opened on the Loreto Mission was initially run by sisters from Germany. Their aim was to teach practical skills and they emphasised the teaching of speech and auditory training. The early staff trained in Germany and later, when the Montfort College opened in Malawi, run by Dutch Roman Catholic priests, a number of staff trained there. The school grew considerably from its small beginnings and by 1978, when the mission was closed, because of fighting in the war of liberation, the school had 180 pupils (interviews Karikoga 1994, interviews Chimedza 1994).

As the years passed, the number of Dominican sisters from Germany on the staff declined and the number of local sisters and lay staff at the school increased. In 1978 a lay deputy head teacher was appointed, who later became the head teacher (interview Karikoga 1994).

In December 1978 the Loreto Mission closed because of the dangers from the war of liberation, and all the children were sent home. The sisters returned to the Emerald Hill Children's home in Salisbury (now Harare). A number of parents approached the Dominican Mother General and asked her to open another school for deaf children. The children's home was half empty so in the May of 1979 a school for deaf children was opened in the home. Because of the war parents were contacted through the media and many of the original pupils and staff came to the new school.
In 1980 with the cessation of fighting and Independence the staff decided not to return the school to the rural Loreto Mission. They saw advantages with staying in the capital and so the school is still situated at Emerald Hill, in Harare. (interview Tabori 1993).

**Jairos Jiri Association - Naran School**

The Jairos Jiri Association school for deaf children opened in 1968 at the Naran Centre near Gwelo (now Gweru). The Naran Centre had previously been a convalescent home for people with TB. When the centre was closed it was bought by the Naran family, local business people, and given to the Jairos Jiri Association to commemorate their parents.

The Jairos Jiri Association was started in the early 1950s by Jairos Jiri a young man from the rural Bikita region, who went to work in Bulawayo. He was shocked and distressed by the conditions of the disabled beggars he saw in the streets on his way to work and resolved to do something about the situation. Jairos Jiri’s dream was to take care of and assist physically disabled and blind people, whom he saw as disadvantaged and doomed to a life of suffering and often of poverty, homelessness and begging.

The education of deaf children became just one part of the work of the association, which by the 1990s had grown, from a local association to a national organisation, to include schools for blind and physically disabled children as well as rehabilitation centres for disabled adults and homes and care centres for elderly and disabled people.

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The work of the association was initially small in scale and local in nature. It started with workshops for disabled adults in the Makokoba area of Bulawayo. In 1959 a purpose built workshop at Nguboyenja in the Mzilikazi township of Bulawayo was opened. The work expanded, rapidly fuelled by the increasing number of people attending the workshops and in consequence there was an increased need for fund raising (Jairos Jiri Association Leaflet 1993).

By the late 1950s and early 1960s the work had spread beyond Bulawayo and was becoming nationally known. Jairos Jiri became a national and then international figure in rehabilitation work. His initial work of rehabilitation with disabled adults expanded into children's education, partly as a result of parents bringing children to his centres and partly as a result of Jairos Jiri's international travels (Farquhar 1987).

When Jairos Jiri started his work with disabled people in Bulawayo in the 1950s the widely held belief among the African population was that people with disabilities were victims of some kind of supernatural intervention:

...that such afflictions emanated from supernatural sources - the displeasure of ancestral spirits, witchcraft or should a child be born deformed, proof of a mother's infidelity (Farquhar 1987 p. 17).

In the rural areas, where an extended family network existed and community ties were generally strong, people with disabilities were, although an embarrassment to their family, still cared for, but they were often kept in the background. In urban areas however people with disabilities were often "outcast" and forced to survive on their own (Farquhar 1987). Charitable work with disabled people amongst the
African population was not well established in the 1950s, although there was already a tradition of white charitable organisations.

As Moyo (1990) notes the growth of non governmental organisations in the black community began in the 1930s and 1940s as they began to formalise their own lobby through self defence and welfare organisations. During the same period trades unionism and liberation parties began activities at a national level. The churches and colonial white liberal NGOs had already consolidated their welfare programmes by the 1940s and 1950s and these formed a training ground for the next generation of black NGO leaders.

During the 1960s the Jairos Jiri Association expanded considerably following the opening of the Bulawayo Training Centre. Four other centres were opened with places for over 450 people. Then the first purpose built facility for physically handicapped children was opened in Salisbury (now Harare). The children's centre provided rehabilitation and education services. The funding for the centre and other work of the association came from grants and donations from city and town councils, the Tribal Trust Land Board, state lotteries and the Wolfson Trust as well as from overseas donations and national giving and fund-raising.

During the 1960s Jairos Jiri travelled extensively in North America and Europe, visiting adult rehabilitation centres and educational facilities. He became aware of the need for more specialised educational provision for physically disabled children as well as for blind and deaf children, who were increasingly being brought to his centres.

With the transfer of crippled children to Harare, the Bulawayo Training Centre was reorganised...despite the additional space that was available.

it was Jairos' ambition to provide the deaf and blind children with facilities
and specialised training, and the staff they needed, with a centre of their own (Farquhar 1987 p. 47).

In 1968 the donation of the Naran Centre to the association allowed for a school for deaf and blind children to be opened. Later a separate school for blind children was opened in Gatooma (now Kadoma). In 1981, the school for deaf children received donations from a Danish organisation and a Danish teacher visited the school for a year. Later staff from the school went to Denmark for training and to visit schools (Farquhar 1987).

In the 1970s, despite the international sanctions against Southern Rhodesia, Jairos Jiri undertook more international visits and he became an international figure in the field of rehabilitation for disabled people, because of his unique work. The expansion of the work at home meant another increase in fund-raising efforts. The association raised money at home through donations, shops, concerts, competitions as well as from lotteries, Lions and Rotary clubs and the African Reserve Trust. Money was increasingly being raised overseas from America, Germany, Sweden, Denmark, Holland and the UK. International non governmental organisations who supported the Jairos Jiri Association included Bread for the World (Germany), Caritas (Switzerland), Misereor (Germany), Christoffel Blinden Mission (Germany) and the Swedish Free Church Aid Organisation. Prior to 1980, much of the funding for teaching staff and instructors at training centres was borne by the association. After Independence there were more grants from the government.
These two schools have a very different history to the three already discussed and they reflected the racist and segregated nature of Rhodesian society. The St Giles School and the attached Medical Rehabilitation Centre and the King George VI Memorial School and its attached medical centre were opened in 1955, following a polio epidemic in the country. The schools and centres were originally run by the Red Cross but the schools were taken over by the Ministry of Education in 1965. Both schools were for white, coloured and Asian pupils only and although they initially took children who had been disabled by polio they went on to take pupils who had cerebral palsy, as well as those who were blind and deaf. The King George VI Memorial School took children with physical disabilities and deafness, while the St Giles School had provision for blind, deaf and physically disabled children. The medical rehabilitation centres attached to both schools provided physiotherapy, occupational therapy and speech therapy as well as boarding facilities and other services.

Both schools provided day and boarding facilities. The St Giles School covered only the primary curriculum, while King George VI School had limited secondary education for certain groups, as well (interviews Peterson 1993, 1994).

The Colonial Legacy

At Independence Zimbabwe had the beginnings of a special education system, and substantial developments in the education of deaf children, based on religious and charitable initiatives. The education of blind
children had begun before that of deaf children and had by 1980 grown to include special school and integrated provision in 'open education', and provision at primary and secondary levels.

For deaf children provision was in special schools, all of which had boarding facilities, there was no integrated provision and only primary and vocational levels were covered. The largest part of the provision was made by churches and charities and even developments for the privileged white and coloured classes were started in the charitable sector. Special education mirrored the segregated and racist nature of education throughout Rhodesian society. All of the early developments were financed by the churches and charities with assistance financial and in terms of staffing from overseas. Government assistance in terms of grants, capitation fees and salaries followed NGO initiatives.

Providing education for deaf children was not therefore a government priority, and there was no national plan or co-ordination of services. Each school was administered and financed as a discrete unit and set its own policies on such issues as curriculum, admissions and teaching methods. Schools also needed to raise extra funds from fees, fund-raising and overseas sources for new equipment and buildings.

There was no national provision for the specialist training of teachers of the deaf, all of those seeking extra qualifications had to go overseas. In the early years of deaf education staff went to South Africa and the UK to train. In the 1970s a school for the deaf and a teacher training college were established in Malawi by Roman Catholic brothers from Holland, they followed the oral teaching methods used at St Michelsgestel. A number of African teachers from Zimbabwe went to train in Malawi during the period.
of UDI and the Liberation Struggle. As a result western models of deaf education were brought into the country with little evidence of any questioning of their appropriateness or suitability. There was a shortage of suitably trained staff to teach deaf children.

Reliable statistical information on the possible population of deaf children are not available for the pre Independence era. The collection of such information was not a priority for the government or NGOs, however in 1981 as part of its contribution to the International Year of Disabled People (IYDP) the Ministry of Social Welfare with assistance from overseas researchers conducted a sample survey in order to estimate the extent of various disabilities in the new Zimbabwe. The survey’s estimate of the number of children with hearing difficulties, in 1981, in the age group 0-4 years was 800 and in the age group 5-15 years was 5100, giving a total of 5900 hearing impaired children 0-15 years (Powell 1985). In 1981 government statistics noted approximately 560 deaf children in schools, nearly 10% of the estimated total (from Charema 1990).

**Deaf Education in Other Developing Countries**

This section brings together information on the beginnings of deaf education in other developing countries. Material has come from a survey of nearly 60 papers on deaf education covering approximately 35 developing countries, as well as from reports and surveys from UNESCO and World Federation of the Deaf and from interviews with key people from over 7 developing countries. I have sought to identify common themes and issues so that these will shed light on the international context in which education for deaf children was started in Zimbabwe.
International exchange of ideas through correspondence, visits and travel overseas of key people has been a feature of deaf education in Europe and then North America. Also, the publication of methods and their underlying philosophies has facilitated the spread of information on educating deaf children. As new territories were discovered and colonised then deaf people and teachers of deaf people soon followed. The literature on the history of deaf education in Britain, Europe and America (Lane 1984 and McLoughlin 1987) reports many incidences of international exchanges of ideas among people involved in the education of deaf children in the eighteenth and nineteenth centuries right through to the present.

*Educating Deaf Children in the Early Days of the British Empire*

In a paper by Barnes (1929) entitled "The Deaf of the Empire", details are given of schools for deaf children in many countries of the then British Empire. It is interesting that by 1928, when the writer undertook an extended trip overseas from the United Kingdom, he noted details of education for deaf children in a large number of the early British colonies and in particular in those with a large ex-patriate population. A table at the end of the paper notes schools in Canada, Australia, New Zealand, India, Ceylon and South Africa. He also notes the date each school was founded and in many cases the founding organisation or individual.

Schools in Canada, New Zealand and Australia were started in 1851, 1880, and 1860 respectively. The paper records a number of different reasons for the founding of the early schools in these colonies. In New Zealand the first school was established by the efforts of a Mr Van Asch from London and Manchester who managed to secure government backing
for the school from its inception. In Australia in 1929 education for deaf children was compulsory and under state control in all states except New South Wales. Schools had been established initially by both church missions and trained professionals mostly from British schools, who had emigrated to the country. In Canada too there seems to have been the same mix of motives for opening schools. Some were started by the Roman Catholic Church, others by professionals trained in either the United Kingdom or the United States of America. In all three of these early colonies, each with a large expatriate population, education for deaf children was established at the end of the nineteenth century and had in all three cases passed over to the responsibility of the government or state by 1929. The situation was different in the other colonies mentioned by Barnes and in those countries that were colonised later by Britain and other European powers.

Barnes (1929) and Bosse (1985) note that education for deaf children in India was started in 1885 by a woman missionary in Margaon in the area of the Bombay Presidency. In the next fifteen years three more schools were founded two of these by missionary organisations. One of these the Calcutta Deaf and Dumb School was instrumental in disseminating information on deaf education through the establishment in 1896 of a training department. The first principal of this early staff training institution was trained at the National College for Teachers of the Deaf in London. By 1947 India had 45 schools for deaf children all run by missionary organisations, philanthropists or by voluntary organisations.

An oral school for deaf children was established in Burma in 1920 by an English woman, a Miss Chapman. Miss Chapman, speaking at the conference where Barnes gave his paper spoke of the difficulty in
persuading people that deaf children could be educated. She had received plenty of money, but was in need of trained staff. A Miss Miskin from a missionary school in Colombo, Ceylon also noted the need for trained staff and suitable premises. She noted that they received a number of quite young pupils, as families considered these children of no account, and were it seems happy to give them over to the care of the school.

Barnes wrote extensively of deaf education in South Africa, as he spent some time in the country on his travels. Other papers by Macrina (1973) and Van Der Merwe (1972) confirm his findings. The first two schools in the country were established by the churches. The Dutch Reformed Church started a school in 1881 in Worcester, known as the Worcester Institute, this was in Cape Province. Another school in Cape Town was started in 1863 by a group of Dominican sisters most of whom came from Ireland. This became known as the Dominican - Grimley School for Deaf Children. Another school was established by the Roman Catholic Church in King William’s Town in 1888. A later school in Johannesburg was established by a Miss Davis, a teacher trained at Manchester.

The Worcester Institute was started by a Mr de la Bat who had a deaf brother. He travelled to Europe in search of information on educating deaf children. He then returned to South Africa and started the school, with his brother as the first pupil (Barnes 1929). The first schools were for white deaf children only, but in 1925 the Dominican - Grimley School opened a department for coloured pupils. These schools were fully maintained by the churches, and presumably by donations and fund-raising until 1928, when the first South African conference on the education of deaf children was held. At the conference the government announced a policy for special education that was to make it a central government function. This new
centralisation policy meant that the schools and the provinces lost some of their autonomy in favour of central government co-ordination and presumably funding together with a compulsory education policy. The 1930s became a period of expansion of services for white deaf children. But in 1937 a new school was opened in Wittbome ten miles from Cape Town for non-white pupils.

So far the description of deaf education in developing countries has included a brief look at the early British colonies, many of them now considered part of the developed world. Deaf education became established too in countries where there were early trading and missionary links. This next section will consider the establishment of education for deaf children in the more recently colonised countries, mostly in Africa.

_Deaf Education: The Context of More Recent Developments_

The exact nature of European involvement in the countries of Africa varied from the setting up of coastal trading stations and exploration to the arrival and settlement of a European community centred on areas with good agricultural or mining prospects. The major division of Africa by the European powers took place in the last twenty years of the nineteenth century (Oliver and Fage 1988) following the Berlin Conference of 1884. Some areas were explored and settled by Europeans at the end of the nineteenth century, while others were not fully explored until later.

Up until the First World War the attitude of the colonial powers in Europe to their new African colonies was to assign responsibility to the colonial governments. These governments were striving to establish trade as well as to set up local taxation and administration. The colonial governments were
preceded in many areas by missionaries who had established mission stations and contacts with local people. During this early period of colonial rule, no colonial government had the resources to start a programme of education. In contrast, the missionary organisations as part of their evangelising and proselytising work had established numerous schools and were educating groups of native people to work as priests and teachers.

Following the First World War the policy of the European powers changed towards their African colonies. They were increasingly considering the possibility of building up the economic and political capacity of the colonies to make them capable of independence in the future. As part of this aim, the colonial powers sought to increase the provision of services such as health, education and agriculture to the local people. In the 1920s, Britain adopted a policy of expanding educational provision in their colonies, often assisting in the expansion of education in the mission stations, seeing this as a cheaper option to the establishment of an entirely separate state education system. Thus, between the wars, an increased number of Africans received an education, although they were still only a small percentage of the population (Oliver and Fage 1988).

Following the Second World War, a new era of development occurred in the African colonies. Those rich in natural resources embarked on new developments and the levels of investment increased. More progressive policies were adopted with the aim of promoting development and welfare. This included the expansion of educational opportunities to keep pace with economic and social developments. Many colonies extended primary education and developed secondary education for a small minority, an elite, of Africans. Social developments in the areas of health and welfare provision, for Africans, were also expanded. The post war era for many
countries in Africa marked a period of change and improvement, with increased educational opportunities from primary through to university level in most countries (Oliver and Fage 1988 and Fagerlind and Saha 1989).

In the late 1950s and early 1960s, with the growth of nationalist parties and Independence movements in many African countries, the commitment to education increased. This was a period of promises of universal primary education, increased secondary education and adult literacy projects. The majority of countries achieved Independence in the late 1950s and 1960s. Only a few such as Southern Rhodesia, Namibia and Angola, had problems. Education remained an important priority for most countries as it was seen as a necessary prerequisite for the modernisation of the economy. For many countries the 1970s held mixed fortunes, with problems in the world economy and the decline in economic expansion. The role of education was also being questioned although there were still strong demands for education from the people (Fagerlind and Saha 1989).

It is against this backcloth of political, economic and educational developments that we must see the development of education for deaf children in Africa. In a large number of countries it was the period from 1940 to 1960 that saw the establishment of the first schools for deaf children. The founders varied from church people to philanthropists, from professionals to local non governmental organisations. In a number of countries it was missionary organisations who established the first school. For example in Tanzania in the 1960s a group of Catholic sisters in the mission station at Tabora run by a group of Dutch brothers started the first school for the deaf. The Tabora mission had been established before the 1884 Berlin Conference. The school used staff trained in Holland and
followed an oral method that was being taught at the famous St Michelsgestel Institute in Holland (Barcham 1989).

The Work of Rev Andrew Foster

In Ghana and a number of other west African countries, education for deaf children were established by the Reverend Andrew Foster, a deaf African American. Foster became deaf in his childhood following a case of spinal meningitis. He decided to commit his life to missionary work among deaf people in Africa. He founded the Christian Mission for Deaf Africans in 1956. His aim was two fold, to establish schools for deaf children and to evangelise. He started his first school in Ghana in 1957, the Accra Mission School for the Deaf. In 1960 he founded the Ibadan Mission School for the Deaf in Nigeria. This was not the first school for deaf children in Nigeria. A few years earlier a school was established in Lagos by an expatriate welfare officer concerned about the education of deaf children (Alake 1985) In subsequent years Foster worked in Liberia, the Ivory Coast, Togo, Chad, Senegal, Benin, the Central Africa Republic, Cameroon, Gabon, Burundi, Zaire and Kenya. In addition to setting up schools for deaf children Foster arranged for the training of teachers of the deaf and also encouraged deaf Africans to seek further education at Gallaudet College and other institutions in America. (Foster 197?, Hairston and Smith 1983, Van Cleve 1987).

Churches and NGOs: Conflicts and Co-operation

In a number of countries several schools were established by different overseas missionary groups. This resulted in different methods being used in each school. For example, in Ethiopia, a school for deaf children was set
up in Addis Ababa by an American missionary society that used American Sign Language. Later, a Scandinavian mission group set up a school in Keren that used an adaptation of Swedish and Finnish sign language (interview Teferra 1993) (Joutselainen 1988). A similar situation has arisen in Tanzania where a school in Mwanga was established by a Scandinavian Lutheran missionary society. Here teachers use total communication methods, but the sign language used has strong Finnish influences (Barcham 1989) (interviews Harris 1993 and Becker 1993, 1994).

In other countries, education for deaf children was started by a group of concerned professionals, often doctors, teachers and social workers coming together to form a society. In Botswana for example an Association for the Deaf was formed in 1979, this group approached the government, charities and overseas organisations for money to start a school. The funding for the first school in Botswana came from a German charity the Christoffel Blinden Mission (interview Masoko 1993).

In Tanzania, a charity called the Tanzanian Society for the Deaf was established in 1974. This group started a school in Dar es Salaam with donated land and money raised from within Tanzania and from overseas. In Sudan in 1969 the Sudanese National Association for the Deaf was founded to start a school. The association was formed by a number of doctors, social workers and a parent of a deaf child (interview Swar-Aldahabe 1993).

**Government Involvement**

The transfer of education for deaf children from non governmental organisations to governments has happened in a number of developing
countries. For example in Ghana the government took control of all special education provision in 1962 (Aidoo 1980), following the country’s early independence in 1957. Similarly in Nigeria the government in its 1977 National Education policy took responsibility for all special education provision. In Nigeria this has meant government funding for all staff salaries, for buildings and equipment and training (Alake 1985). There is no universal provision for all deaf children in Nigeria, but what provision there is has government funding.

In other countries there is some involvement by government, but the non governmental organisations still have a key role in special education. For example in Tanzania, Kenya, and Botswana the government provides money for the teachers' salaries and a small amount towards equipment, but the NGOs still have responsibility for buildings. The area of government expansion in Tanzania and Botswana for example is in the development of resource units attached to primary and secondary schools. The governments have a policy of integration of disabled children and are therefore working to expand provision in this area.

**International Issues and Themes**

In this brief summary of education for deaf children in a number of developing countries, it is possible to discern a number of emerging themes. Regarding the establishment of the first schools for deaf children there seem to be two main motivators. First, churches and missionary groups have started a large number of schools for example in Tanzania, Ethiopia and Ghana. The churches involved have been Roman Catholic and Protestant. There was also the significant work of the Rev Andrew Foster and his American missionary society in western and central Africa. The
motives of these religious founders have varied from the desire to spread the Christian faith, to providing education for a particular group that they had experience in educating in a European setting, for example the work of the Dutch Roman Catholics in Malawi and Tanzania and the Dominicans in South Africa and Zimbabwe.

The second driving force behind the development of schools for deaf children has been the forming of a society or association concerned for the education and welfare of deaf children. Such organisations usually formed by professionals such as teachers, doctors and social workers, have established schools in Nigeria, Kenya, Sudan, Botswana and Tanzania. These organisations seem to be entirely run by professionals supported by business leaders and dignitaries, but rarely involve parents of deaf children or deaf people themselves.

In none of the countries covered in the literature, or the interviews conducted for this chapter has there been any situation in which non governmental organisations either charitable or religious, whether national or from overseas, have not been the initiators in the education of deaf children. The transition to government organisation and provision in special education has varied. In Ghana and Nigeria, countries in Africa to become independent first, government involvement in special education occurred in the 1960s and 1970s when national policies for education were being developed. In these countries special education and provision for deaf children is mostly government funded and controlled by government policy. However, universal provision of education for deaf children or others with disabilities and difficulties in learning is not yet a reality.
Many countries are still heavily dependent on the provision of education for deaf children by non-governmental organisations and international agencies as the governments are still seeking to provide universal primary education for all, often in situations of little or no economic growth and decreasing overall budgets for education.

In every situation surveyed the initial provision for deaf children has been in the form of special schools. These have either been urban or located on rural church mission stations. These schools are often run in isolation from other special educational provision and although many started with only a very few pupils they have increased in size over a number of years. The early schools did not form part of any national policy on special education and many continued for many years with no financial support from the government. Many were therefore dependent on fund-raising, or money from churches or overseas donations to continue, with some financial support from parents. Even after many years of working, when these early schools often had pupil numbers of several hundred they were limited in the number of deaf children they could provide with an education. Only a small proportion of any nation's population of deaf children could be provided for in these early special schools for deaf children.

Finally the international nature of the education for deaf children in these developing countries must be noted. From the beginning, the key people in starting schools were either overseas church workers or individuals trained overseas. Staff for these early schools were either sent overseas to train as teachers of deaf children, or were trained in their own country by someone who had themselves been trained abroad. Travelling overseas has also been a feature in these early years either to visit schools or to speak to professionals. There has been a significant international input to many
schools from visits by overseas experts, either from charities such as the Commonwealth Society of the Deaf, or from academics and teacher trainers. In the early stages of developing deaf education it would probably be true to say that the early models used for educating deaf children were entirely based on experiences in North America or Europe. Philosophies, methods and technologies from England, Holland, Germany and the Scandinavian countries as well as from America were often transferred in total to the new situation in a developing country. The model for deaf education was entirely colonial or neo colonial in nature with little recognition of local ideas on education, levels of technical development or cultural factors. International influences through non governmental organisations, staff training, teacher education and consultancies and visits have been significant in educating deaf children in developing countries from the beginning.

**Educational Development in Zimbabwe**

In order to fully appreciate the current context of special education in Zimbabwe it is necessary to understand the social, economic and political context of earlier educational policies (Maravanyika, 1990 and Nhundu, 1992). Educational policy in the land now known as Zimbabwe is a reflection of the earlier racist and segregated nature of that society. Throughout the colonial period, from 1890 to 1980, educational policies together with those of land distribution, health services, and housing aimed to preserve the interests of the Europeans against competition from the African majority for control of the economy, politics and administration.

A dual system of education developed which provided a high quality, universal, free and comprehensive education for European pupils financed
by government, but an education for African pupils that was mostly run by missionaries, was often of low quality, in overcrowded schools and was often understaffed and poorly resourced (Csapo 1986).

**Early Settlers**

The exploration of Africa in the early nineteenth century by European powers, for minerals and ivory, expanded to include missionary activity and was followed by the turn of the century by the establishment of full colonial control over most of the continent. The first attempts at establishing formal, western style education were by the missionaries. Their main motive was to spread the Christian faith, which with its requirement for basic literacy skills in order to read the Bible and to follow church catechisms, meant the need to open schools (Barker 1989). Education in Zimbabwe, started by missionary groups, came before the arrival of white settlers interested in farming, trade and mining. The London Missionary Society set up the first mission station in 1859 at Inyathi. This was followed in 1887 by the Roman Catholic mission at Empandeni.

The white settlers began to arrive in the 1880s. Cecil Rhodes (1855-1902) made a fortune in mining and diamonds in South Africa, and pioneers from his British South Africa (BSA) Company began to travel north from South Africa in search of new colonial lands and mineral wealth. Rhodes travelled through Bechuanaland (Botswana) in 1884 then moved north to Rhodesia, partly motivated by news of gold in Mashonaland. The BSA Company signed treaties in 1888 with the Matabele for peace and rights for mineral extraction in 1893 and 1896. In 1890 the BSA Company received a royal charter to administer the area, which became known as South Rhodesia (Atkinson 1972). The BSA Company administered the country
until 1923 when the people rejected a union with South Africa in favour of internal self government as a British colony.

*Early Government Policies*

From the first Educational Ordinances in 1899 and 1903 there was evidence of the conflicting needs of the educational system in Southern Rhodesia. The conflicts were between the needs for educational development for the African population and the political duty to safeguard the interests of the European settler community. Cecil Rhodes advised the first committee to consider the educational system in the country. The racially segregated system that came out of the first educational ordinances set the tone and philosophy for the next eighty years of educational provision. The colonial government developed an extensive, well resourced and academic education system for the children of white settlers, while education for the African majority was left almost exclusively to white Christian missionaries. The missionaries were to bear the major responsibility for African education throughout the colonial period (Zvobgo 1986).

Some financial help was offered to the missionary schools from 1903 onwards in the form of grants in aid. However the schools had to follow the policies of the BSA Company on African education, which were that education for Africans should be practical and vocational in nature and thus not in conflict with the academic education received by white pupils. White pupils were educated for positions of leadership in mining, farming, government and administration, while access to academic education for black pupils was severely restricted in order to prevent competition for employment.
Many missionary schools were eager to promote an academic education for Africans, as they wished in part to prepare Africans to work as priests, evangelists and school teachers. Schools were seen as central to church work in all parts of Africa (Zvobgo 1986). Although primary education continued to expand up to the 1930s, it was not until 1939 that the Anglican Church opened the first secondary school for African pupils. Initially the school was entirely financed by the church.

During the Second World War a number of changes took place in educational policy. The government was concerned by the support of the South African Afrikaners for the fascist government of Hitler, and attempts were made in Southern Rhodesia to appease the African population and avoid conflict. No overtly racist policies were adopted during the war years. Educational provision for Africans was expanded to meet the needs of industry, and more secondary provision was made. After the war with increased white immigration and high unemployment amongst the white population, expansion of African education was again curtailed.

Between 1953 and 1963 the British government established the Central African Federation of Rhodesia and Nyasaland, an experiment in multi-racial partnership that included Northern Rhodesia (now Zambia), Nyasaland (now Malawi) and Southern Rhodesia. Although the aim was multi-party, and multi-racial, rule white politicians continued to dominate and in education racist and segregated education continued. In Southern Rhodesia the national government began to adopt more progressive and liberal education policies in that provision was expanded and improved for African pupils, the underlying nature of the education system was not addressed (Zvobgo 1986). With the break up of the Federation of
Rhodesia and Nyasaland in 1963 due to African nationalist pressures and the eventual independence of Zambia and Malawi, there was a white backlash in Rhodesia. In 1962, the extreme right wing Rhodesia Front party of Ian Smith was voted in at the general election. In comparison with Zambia and Malawi, the white settler community was much larger and saw they had much more to lose by Independence. There was also a much larger investment in industry and infrastructure to defend.

During the period of Unilateral Declaration of Independence (UDI, 1963 - 1979) and the war of liberation the Rhodesia Front Party continued the racist educational policies that had characterised the previous sixty years. The role of the churches in education was taken over by local African councils. These councils had to raise funding for schools and were controlled by central government through the provincial education officer. Secondary education was expanded for Africans, but the newly developed vocational secondary schools were never popular as parents and pupils want academic secondary provision. Access to secondary education was still severely restricted for African students through a series of examinations and high fees.

Throughout the colonial period the government maintained educational policies that preserved white privilege and sought to delay autonomy and independence for Africans.

**Independence**

The struggle for Independence in Rhodesia was a long and often bloody affair. Following the break up of the ill fated Federation of Rhodesia and
Nyasaland (1953-1963) and the independence in 1964 of Zambia and Malawi, Rhodesia entered a period of rule by the right wing Rhodesia Front Party of Ian Smith. Fearful of pressure from Great Britain to introduce constitutional change and a widening of the franchise, the government, concerned about African majority rule, issued its Unilateral Declaration of Independence (UDI) in 1965, and the period of international isolation began. African political organisations, which had been crushed by the Rhodesia Front, reacted by starting a guerrilla war, which became most active after 1972. As a result of pressure from South Africa and others the Rhodesia Front sought to reach an internal settlement in 1978 with a number of minor African parties led by Bishop Muzorewa. But this settlement was unacceptable to the majority and fighting continued until the end of 1979, when Britain brokered peace between the internal settlement parties and the two major African nationalist parties ZANU and ZAPU. The nationalist parties combined to form the Patriotic Front, known as ZANU (PF). The Lancaster House agreement led to the first elections with universal franchise in March 1980, which were won by Robert Mugabe's Zimbabwe African National Union, ZANU (PF) (Foley 1993).

Education along with land and economic reform were the key areas of concern for people during the liberation war. The ZANU 1980 election manifesto pledged to "establish free and compulsory primary and secondary education for all children" in Zimbabwe regardless of race. (McKenzie 1988). The popular expectation was seen to be an education for black students similar to the privileged education received by white students prior to Independence which had led to well paid white collar employment opportunities.
Conclusions

This chapter has shown that the development of education for deaf children in Zimbabwe has followed a similar pattern to those found in other developing countries. With the prominent role of churches and charities in early provision, its uncoordinated nature, and the lack of government involvement. The divided and racist nature of society in Zimbabwe, prior to Independence, is also reflected in the provision of education for deaf children. Although government provision for white deaf children only began in the 1960s.

Yahaya-Isa speaking in 1980, at the International Congress in Stockholm, on the education of the deaf in developing countries notes the lack of indigenous answers to questions in deaf education. Yahaya-Isa was looking specifically for answers in relation to appropriate levels of technological and staff resources as well as in decisions on methods of educating deaf children. Yahaya-Isa (1980) noted the problems facing deaf education in developing countries arose from "blind wholesale imitation of foreign systems from developing nations".

Writing on the development of deaf education in Jamaica, Dolman (1987) notes the colonial and neo colonial influences on the current provision. Dolman considers that the education of deaf children in Jamaica has experienced problems because of the transfer of educational systems and ideas to a different culture to that in which it was first developed.

The colonial and neo colonial influences in the development of education for deaf children have been discussed earlier. The international nature of deaf education right from its earliest stages in developing countries has
meant that voices from Europe and North America have been the loudest. Colonial models of educating deaf children were spread through church and missionary organisations, charities, teacher education, books and journals, professionals travelling to visit schools overseas, as well as trained teachers working overseas. As in other areas of education, casting off a colonial model of education is not always easy for developing countries.

Deaf education in its early stages, in Zimbabwe, was characterised by being institutionalised, charity orientated and tied to a medical model of deaf people. As Coleridge (1993) notes this is true of many early educational and rehabilitation services for disabled people in developing countries. It is not easy to shed these early characteristics. In the subsequent chapters I explore how more recent policies from the Zimbabwean government, non governmental organisations and international agencies have sought to change the agenda in the education of deaf children.
CHAPTER 4

NEW POLITICS, NEW POLICIES

Introduction

This chapter describes and analyses the education of deaf children in Zimbabwe in the period, 1980 - 1984, immediately following Independence. The chapter is divided into six sections, the first two sections of the chapter describes developments of policies and provision in deaf education and special education. Independence in Zimbabwe meant a radical change in educational and other social provision and these changes are discussed in the next two sections of the chapter. The final two sections discuss changes in NGO provision in Zimbabwe and the international context of developments exploring connections with inter governmental organisations and the work of aid agencies.

In the area of education for deaf children there was little change in policy and provision in the immediate post Independence period, but there were a number of significant developments within government and NGO policy making relating to the wider field of special education and disability issues. These developments, in term of government involvement in special education and an expanded integration policy, were to play a significant part in deaf education provision in the late 1980s.
Throughout the chapter the main propositions in the thesis are explored as they relate to developments during the period 1980 to 1984. An understanding of the national context of educational, social and health changes is vital as it provided the backdrop to immediate and also future reforms. The questioning of segregated educational provision for deaf and disabled children is important in this era, as is the development of a community based rehabilitation model of services for disabled adults and children within a health context. Understanding the significant international influences on the new country of Zimbabwe is also important as the country was emerging from a fifteen year period of international isolation and ostracism. The influence of an international organisation of disabled people on a small national NGO is discussed. The significance of donor money in health and education is also considered as well as the role of the UNESCO Eastern and Southern African Special Education Project on special educational developments.

**Educating Deaf Children: Maintaining the Status Quo**

The provision for deaf children in the period prior to Independence only made places available for a small percentage of the estimated total number of deaf children in the country. This early provision was predominantly urban in location. With the movement of the Loreto school (later, to be known as the Emerald Hill School) to Harare during the liberation struggle, only one of the schools was left in a rural situation: the Henry Murray School at Morgenster Mission. The other schools were in Gweru, Bulawayo, and two in Harare. Prior to Independence these schools functioned as independent, autonomous units, and although they received a grant from the central government they were
financially independent and locally administered. The church and NGO schools were restricted by funding difficulties and were dependent on fund-raising, donations and overseas donor moneys for expansion and the development of their provision.

Not only was the level of provision limited to a small percentage of the total number of deaf children in the country, but also the type of provision was limited to basic primary education with a limited amount of vocational education for older pupils. Pupils on leaving school received a school certificate to indicate they had completed a number of years of primary education, but deaf pupils did not at that time sit any of the school certificates taken by hearing children.

An important issue in the early period of education for deaf children was that of a shortage of trained teachers to work in the existing schools. All trained staff were either foreigners who came to work in the schools with specialist training in the education of deaf children received elsewhere, or they were nationals who were sent overseas to train. There had been a limited programme of training in conjunction with the Montfort College in Malawi during the period of the liberation struggle, but this had only given training to a small percentage of teachers. Most schools had a considerable proportion of their staff with no additional training in the education of deaf children, except what might be provided as in service training.

The National Disability Survey (1981) estimated that the number of deaf children in the country of school age was 5,100 out of 54,900 children with disabilities. The figures for those deaf children in education showed that of the
estimated 5,100 total only 526 deaf children were in special education, about 10% of the total.

From these figures it can be seen that during the early years following Independence there was little increase in education provision for deaf children. The type of education remained much the same, with three special schools and educational facilities for deaf children provided at the St Giles School and King George VI Memorial School along with education for children with physical disabilities and blind children. Apart from the opening of the Jairos Jiri Association school for blind children at Kadoma allowing the Naran Centre in Gweru to concentrate specifically on the education of deaf children, there was no significant change in the size or nature or provision for deaf children. There was an international donation to the Emerald Hill School by German Roman Catholic charities, for new school buildings.

In this period there was no increase in NGO provision for deaf children: the church and charity schools did not expand even though the broader educational climate was in favour of increased opportunity and expansion. Government expansion in educational opportunity for non disabled children did not extend to deaf children in this period. Although integrated provision was initiated for children with physical disabilities, by the government, to complement integrated provision for blind children made by the Council for the Blind no such provision was considered for deaf children.
Changes in Special Education Policy

*National Disability Survey - incidence and provision*

In 1981, the International Year of Disabled Persons (IYDP), the Ministry of Social Welfare with additional funding from the Dag Hammarskjold Foundation, and assistance from an international team, surveyed a sample of 15% of the country in terms of area and population to establish the extent and causes of disabilities. The survey focused on more serious forms of disability and also looked at the thousands of people disabled as a result of the liberation struggle. The survey concentrated exclusively on rural areas and sought where possible to identify the causes of disability.

The survey identified eleven categories of disability as listed in table 4.1. The categories and number of disabled children is shown in table 4.2. The survey also collected information on the number of children with disabilities in education as shown in table 4.3 (Davies 1983, Jonsson 1982, Csapo 1986).

The figures given in the tables for the first National Disability Survey should however be viewed with some caution. The papers discussing the survey (Powell 1985, Csapo 1986 and Davies 1983) do not provide any information on the definitions of disability used in the data collection, or on the exact methods used to collect information, whether household surveys were conducted or fieldworkers depended on self reporting. Renker (1982) notes a number of possibilities for errors in disability surveys because of a lack of a sound sampling methods and a lack of rigour in sampling techniques.
Extrapolation from questionable sample figures can then lead to a distortion in term of possible national estimates for various categories of disability.

The survey shows a large percentage of people with visual impairments particularly in comparison to those with hearing impairments. Powell (p.18-19 1985) notes that causes of blindness vary from one geographical region to another. In West Africa river blindness predominates, in dry regions of Africa trachoma is a major cause of visual impairment, while in southern Africa measles is a major cause of visual impairment. In the late colonial period and the immediate post Independence years there were a number of measles epidemics in the area and because of very low levels of immunisation children, particularly those who were malnourished, were badly affected. Measles is however a significant cause of deafness in populations with a low level of immunisation and high levels of malnutrition, so this alone could not account for the major differences in reported incidence.

Fryers (1986 in Marfo et al) notes that in Africa people with communication disorders, including deafness, do not enjoy the same consideration in terms of medical and educational services as those with physical disabilities and blindness. Deaf children are often identified in later childhood after the critical years for language development and as a result make limited progress in education. The late identification of deafness in childhood may have accounted for a certain amount of under reporting. He also identifies that people who are deaf or have speech disorders are often the subject of ridicule or are even considered “lame of mind” in a number of African cultures. As a result people might be more reluctant to have a deaf person identified in their
family than say a blind or physically disabled person, this could have lead to under reporting of deafness in the survey.

A survey two years later by Edquist (1984) showed the same number of deaf children in education: 526. Edquist (table 4.4) also showed the number of trained and untrained teachers in special education and those working without specialist training. In the education of deaf children it noted 526 pupils with 42 teachers of whom 11 had additional specialist training and 31 did not.

Jonsson (1982), working with the survey information, noted three major concerns in special education in Zimbabwe in the immediate post Independence period:

1. the low involvement of the Ministry of Education
2. the lack of a national policy on special education
3. the small number of disabled children receiving an education.

*Changing Government Policies*

In order to fully understand the changes in deaf education in the second half of the 1980s it is necessary to consider the changes within the Ministry of Education and the Schools Psychological Service (SPS) in the first five years of the 1980s, as well as changes in policy and practice towards other groups of children with disabilities. Although as the previous section indicates there were few changes in the education of deaf children, there were changes and expansion in the education of children with physical disabilities and those seen as "mentally handicapped".
Table 4.1

Percentage, number and category of disability*

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Number of Disabled</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>24%</td>
<td>70,000</td>
<td>Visually impaired (22,700 totally blind)</td>
</tr>
<tr>
<td>23%</td>
<td>60,000</td>
<td>Lower limb</td>
</tr>
<tr>
<td>12%</td>
<td>34,000</td>
<td>Upper limb</td>
</tr>
<tr>
<td>10%</td>
<td>27,000</td>
<td>MR or behaviourally disturbed</td>
</tr>
<tr>
<td>9%</td>
<td>23,000</td>
<td>Hearing (8,500 totally deaf)</td>
</tr>
<tr>
<td>8%</td>
<td>20,000</td>
<td>Speech (9,800 unable to speak)</td>
</tr>
<tr>
<td>6%</td>
<td>15,000</td>
<td>Neurological (9,800 epilepsy)</td>
</tr>
<tr>
<td>4%</td>
<td>10,000</td>
<td>Spinal</td>
</tr>
<tr>
<td>2%</td>
<td>5,000</td>
<td>Respiratory</td>
</tr>
<tr>
<td>1%</td>
<td>2,700</td>
<td>Cardio-vascular</td>
</tr>
<tr>
<td>.5%</td>
<td>2,500</td>
<td>Skin diseases</td>
</tr>
<tr>
<td>.5%</td>
<td>1,800</td>
<td>Other (acts of wild animals, snake bite, lightning strikes)</td>
</tr>
<tr>
<td>100%</td>
<td>271,000</td>
<td></td>
</tr>
</tbody>
</table>

*Davies (1983)

Table 4.2

Category and number of disabled children

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visually impaired</td>
<td>10,400</td>
</tr>
<tr>
<td>Disability of lower limb</td>
<td>13,000</td>
</tr>
<tr>
<td>Disability of upper limb</td>
<td>6,700</td>
</tr>
<tr>
<td>Mental retardation and behaviour disorders</td>
<td>6,600</td>
</tr>
<tr>
<td>Hearing impairment</td>
<td>5,100</td>
</tr>
<tr>
<td>Speech disability</td>
<td>7,700</td>
</tr>
<tr>
<td>Neurological impairment</td>
<td>2,600</td>
</tr>
<tr>
<td>Spinal impairment</td>
<td>1,300</td>
</tr>
<tr>
<td>Respiratory impairment</td>
<td>300</td>
</tr>
<tr>
<td>Cardiovascular impairment</td>
<td>100</td>
</tr>
<tr>
<td>Skin impairment</td>
<td>600</td>
</tr>
<tr>
<td>Other impairment</td>
<td>500</td>
</tr>
<tr>
<td>Total</td>
<td>54,900</td>
</tr>
</tbody>
</table>

Table 4.3

Special education opportunities in Zimbabwe, 1982

<table>
<thead>
<tr>
<th>Handicap</th>
<th>Number of Special Schools</th>
<th>Number of Special Classes</th>
<th>Open Education</th>
<th>Number of Pupils</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blind</td>
<td>2</td>
<td>10</td>
<td>539</td>
<td></td>
</tr>
<tr>
<td>Deaf</td>
<td>3</td>
<td></td>
<td>526</td>
<td></td>
</tr>
<tr>
<td>Physical handicap</td>
<td>3</td>
<td></td>
<td>398</td>
<td></td>
</tr>
<tr>
<td>Mental handicap</td>
<td>9</td>
<td></td>
<td>483</td>
<td></td>
</tr>
<tr>
<td>Slow learners</td>
<td></td>
<td>65</td>
<td>733</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>17</td>
<td>65</td>
<td>10</td>
<td>2,679</td>
</tr>
</tbody>
</table>
### Table 4.4

Number of children per category of handicap, trained and untrained teachers in special education schools (1984)

<table>
<thead>
<tr>
<th>Handicap</th>
<th>Number of Children</th>
<th>Number of Teachers</th>
<th>Number of Trained Teachers</th>
<th>Number of Untrained Teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical handicap</td>
<td>398</td>
<td>45</td>
<td>13</td>
<td>32</td>
</tr>
<tr>
<td>Blind</td>
<td>437</td>
<td>41</td>
<td>3</td>
<td>38</td>
</tr>
<tr>
<td>Deaf</td>
<td>526</td>
<td>42</td>
<td>11</td>
<td>31</td>
</tr>
<tr>
<td>Mental handicap</td>
<td>483</td>
<td>49</td>
<td>31</td>
<td>18</td>
</tr>
<tr>
<td>Slow learners</td>
<td>783</td>
<td>64</td>
<td>7</td>
<td>57</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,577</strong></td>
<td><strong>241</strong></td>
<td><strong>65</strong></td>
<td><strong>176</strong></td>
</tr>
</tbody>
</table>
Before Independence the Ministry of Education that was concerned with the education of white children, had set up a Schools Psychological Service (SPS). In 1979 a Working Party undertook a review of its work and development in the light of the imminent Independence. The main thrust of the working party as indicated in the Ministry of Education Annual Reports for 1980 and 1981 (Ministry of Education and Culture 1983, 1984) was to "advocate a more equitable distribution of the service to all sections of the community". This included the extension of the service to Group B schools (previously schools for African pupils), the provision of greater in-service education for teachers, and an investigation into the broader professional aspects of educational and psychological problems in schools.

Prior to Independence there was little government involvement in the special schools run by non governmental organisations, except for the provision of grants. There was no national provision for the training of specialist teachers, no control over what was taught in the schools or how it was done. Immediately after Independence there was some loss of specialist teachers and also a lack of training both of specialist staff and of in-service provision.

The 1980 Annual Report (Ministry of Education and Culture 1983) indicates that the SPS had had a difficult year with staff shortages and widely increased responsibilities. The need for more psychologists was noted along with the 25% increase in the number of referrals. The need to extend services to Group B schools was noted and the need to modify existing tests. There was only a back up careers and guidance service and this also needed extending. The part of the report on the SPS notes that "It is clear that the new social and educational circumstances that pertain in Zimbabwe offer great challenges to
the profession" (p. 15) At that time central government and regional services were run almost entirely by psychologists.

The 1981 report as well as noting the need to implement the main points of the Working Party Report of 1979 also continues to note the problems of staff shortages and increased demands. The needs of the old Group B schools were revealed by means of questionnaires, observations and surveys. The SPS ran courses in remedial reading, careers guidance and other topics. Although there was no specific mention in the Report of the needs of children with disabilities, it does note the beginnings of better relations with other organisations such as the Department of Social Services. King George VI School and also the University of Zimbabwe and teacher training colleges.

The Annual Report for 1982 (Ministry of Education and Culture 1984) indicates the first explicit government concern and commitment to the education of children with disabilities. After mentioning the great momentum in educational transformation in the country, the increased funding for education, the increases in donor funding and the increased training of teachers, the report goes on to mention the new open door policy in education and the free tuition in primary schools. Then it notes the closer liaison between the Ministry of Education and Culture and the Ministry of Health and the Ministry of Labour and Social Welfare and their general commitment to assisting voluntary organisations involved with the education of the "handicapped". The ministry was anxious to see greater developments taking place in provision of special education facilities for blind, "deaf and dumb" and "mentally handicapped" children.
1982 marked a change in the philosophy of the SPS - de-emphasising the curative, individual referral system and of moving towards the diagnostic and preventative model: and of on-going evaluation of all innovative projects (p. 13 Ministry of Education and Culture 1984).

There was greater liaison between the government and schools for the deaf and blind and greater liaison with voluntary organisations. The service was decentralised away from the capital to six regional offices. Along with increased work in remedial classes in mainstream schools the government opened its first special class for physically disabled children and planned the opening of more.

In 1983 the government formed a Special Education Unit within the SPS and acknowledged its responsibility in this area of education. Liaison between departments was continued and the problem of specialist teacher education was addressed for the first time with the opening of the first course at United College of Education (UCE) in Bulawayo to train teachers of blind children.

Between 1980 and 1984 there was a considerable transformation in the government’s attitude to and responsibility for the education of deaf children and special education generally. There was the recognition of the inter-ministerial nature of responsibility between education, health and social welfare, and the need to work with non governmental organisations already making provision. There was also a recognition of the enormity of the task and the need for co-ordination and planning. Active steps were taken in the provision of special classes attached to primary schools for some groups of disabled children, marking the beginnings of a government integration policy.
Responsibility for staff training was also taken by the Ministry with the provision of the first national one year course for teachers of blind children.

A number of government ministries were also active in seeking overseas aid for disability issues during this time and the co-operation of SIDA (the Swedish International Development Agency) was secured not only in the expansion of special education, but also in the development of community-based rehabilitation projects.

**Role of SIDA in special education**

The Swedish International Development Agency's (SIDA) aid to special education in Zimbabwe started in 1982 as a result of a request by the government for co-operation by SIDA in the disability field in Zimbabwe. Assistance in health and rehabilitation services also began in 1982:

The Zimbabwean Government requested that one million Swedish Kronor from the bilateral frame for 1982/3 should be allocated to projects within the disability field......A delegation from Sweden visited Zimbabwe in November 1981 in order to study the situation....and to investigate in what way the Swedish government could best support this sector (p1 SIDA Memorandum 1982).

The assistance in these early years took the form of consultancies and study tours and work on analysis and planning following the National Disability Survey in 1981, as well as support for training in special education at United
College of Education in Bulawayo. A number of teachers were funded to take special education courses overseas and funding for in-service training of teachers was given. Finally SIDA money was used in the initial years for the procurement of equipment for special schools run by non governmental organisations.

Jonsson (1982), who worked as a SIDA special education consultant, in analysing special education in Zimbabwe noted not only the lack of government involvement in special education, the lack of policy and low number of children provided for, but also:

1. the low scale programmes mostly for white urban children
2. financing and administration by non governmental organisations
3. no national co-ordination and planning
4. the shortage of trained staff
5. the deep rooted philosophy of charity
6. no government organisation to finance on going programmes
7. government shortage of funds, qualifications, personnel and academic capacity.

In addition Jonsson noted the need for an overall planning and development of vocational training and the establishment of regional resource centres.

In the 1984/5 financial year SIDA funds were used for mobile teams of education and health workers to develop rural village disability projects. Some SIDA money went to NGOs including funding of the Zimcare Trust community project working with families and local groups on the education
and rehabilitation of "mentally handicapped" children (Tiroler and Rubens 1985). By 1985 SIDA consultants were noting that:

Swedish experts in the field of special education have made repeated study tours to Zimbabwe. Their recommendations have resulted in support to the training of special educators. Another important programme is that of mobile units with training laboratories. The aim is to integrate disabled children into normal schools. The special educators either give them additional training or assist their ordinary teachers. The Swedish contribution to this sector has amounted to some 7 000 000 SEK (Swedish Kronor) so far, (Tiroler and Rubens 1985 p. 21-22).

**Education Policy**

As the previous chapter describes in detail, the colonial government, both prior to and during the liberation struggle, used the education system as a powerful tool in the maintenance of its racist regime. Education for white children was both free and compulsory. The standard of education was high and the funding allocated was far in excess of that available for African pupils. Access to education for African pupils was limited, funding was poor and the opportunities to progress to secondary or higher education were severely restricted. The war of liberation was fought as much about the right to education as it was about the right to land. For many, land and education were seen as the twin routes to economic self improvement and political participation (Barker 1989).
During the period of the liberation struggle, the nationalist political parties had time to plan for educational change at Independence, as well as experimenting with a number of educational innovations. The education plans of the two major nationalist parties ZANU (Zimbabwe African National Union) led by Robert Mugabe and ZAPU (Zimbabwe African People's Union) led by Joshua Nkomo, became the blueprints for the development of education after independence (Nhundu 1989). These included policies on the provision of free education for all at both primary and secondary levels. During the elections of 1980 the ZANU promise of schooling to sixteen for all who wanted it was considered to be a major vote winner (Barber 1986).

On winning the election in 1980, ZANU (PF) was faced with a number of pressing educational problems. The first priority became the rebuilding and reopening of the schools, mostly in rural areas, that had been closed during the liberation war. This included nearly a third of all primary and secondary schools. There was also the problem of providing for the large number of children and teachers displaced during the fighting. The party's second priority was the expansion of education at all levels, but particularly at the secondary level. These educational aims were spelt out by the new President Canon Banana in his first speech at the opening of Parliament saying that: "In the field of education, it is the intention of my government to pursue vigorously the reopening of the many schools in the rural areas which were closed as a result of the war... and to introduce free education on a phased basis beginning with the primary sector"(in Mungazi 1985). The government recognised that education is a basic human right. It also recognised that education is an investment in human capital which sustains and accelerates the rate of
economic growth as well as socio-economic development (from the Transitional National Development Plan, quoted in Maravanyika 1990).

The major reforms of education in the immediate post independence era included:

1. the right to education for all citizens
2. free and compulsory primary education and uninhibited access to secondary education
3. the development of non racial attitudes among young people
4. the right to basic literacy and adult education
5. the inculcation of respect for labour among learners (Dorsey 1989).

The government's educational mandate soon became clear after Independence, but its programme of educational expansion had to be met within a limited resource allocation. Pupils in primary education rose from 819,586 in 1979 to 2,132,304 in 1984 with the number in secondary education rising from 885,801 in 1979 to 2,548,717 in 1984. To accommodate this expansion a school building programme was undertaken which was achieved with both central government and local community funding.

The other major area of expansion was in the teacher education programme. With the rapid expansion of education both in the primary and secondary sectors there was a growing need for trained teachers. The government undertook a programme of recruiting teachers from overseas, mostly Britain, Canada and Australia, along with a rapid expansion in national teacher education. A major innovation was the development of an in service training
of teachers programme, including distance education and residential courses. The government had to rely on large numbers of untrained teachers to allow its expansion to go ahead (Zvobgo 1986).

The financing of educational expansion involved a massive increase in public expenditure. Prior to Independence in 1979 the education vote represented 11.6% of the total budget. In the first year after Independence it doubled, to 22.1% and in every budget since (up to 1989) it had the largest vote of any government ministry (Dorsey 1989). In 1983 the Minister of Finance warned of the strain of educational expansion on national resources, and noted that responsibility for expansion needed to be shared with local communities and community based organisations.

There was also considerable overseas assistance in the expansion of educational services. Millions of dollars were pledged by overseas donors for the physical expansion of the schools and colleges as well as for the training of teachers. The major donors in the education sector following Independence were Sweden, Canada, the Netherlands, USAID and USSR. After Independence Sweden committed US$57.6 million for the building of rural schools, teachers' houses and curriculum materials. The USSR pledge was US$19.5 million in scholarships to the USSR. Numerous smaller international charities and aid organisations made financial contributions to the rebuilding of education after Independence (Auret 1990).
Social Context

As the earlier chapter and sections indicated, there was a dual social system in Rhodesia. Separate residential areas and social facilities were established, including those for health care and social support, there were also separate charities and voluntary organisations for Africans and Europeans. In employment, the social and educational system worked to provide privileged white collar jobs and well paid work in farming, mining and manufacturing for white people, while the African population were restricted to poorer farm land in the Tribal Trust Lands, to poorly paid work on farms, in factories and in domestic service. Only a small number of professional jobs were available as agricultural workers, priests and teachers within the black community.

Health provision

At Independence the Zimbabwean government took control of a health system which reflected the inequalities and underprovision for the African majority. The health care system was oriented towards the white minority, the cities and the provision of expensive curative medicine. Half of the practising doctors were in private practice aimed at providing care for white patients. Poor government services for black people were supplemented by church missions, who provided over half of all rural services (Palmer and Birch 1992). As a result of such an inequitable system the health indicators for the black population showed high infant mortality, inadequate immunisation, considerable malnutrition and low life expectancy.
The future health care policy was formulated in a government document "Planning for Equity in Health" which stressed:

1. redirection of the majority of resources to the needy
2. removal of rural/urban, black/white and class biases in provision
3. integration of service providers
4. bringing health care within the reach of the majority
5. integrating preventative, curative and rehabilitation services
6. increasing community participation in health care (Auret 1990).

The government adopted the World Health Organisation’s Primary Health Care programme as its policy guide line in 1980. The new approach adopted by the Ministry of Health was preventative rather than curative with an emphasis on immunisation, health education, mother and child programmes, improved nutrition, water and health care delivered primarily at village and community level. A programme was started of decentralisation of expensive hospital care from major city hospitals to provincial and district facilities (Auret 1990, House et al 1990).

International support was sought for the major new initiatives in health provision, to supplement the increased government allocation to health care. The cost involved in the health care reconstruction programme was considerable in order to achieve the aim of "Health for All by the Year 2000". Government spending on health doubled on Independence to Z$108.9 million, in ten years this spending was to treble. Auret (1990) notes the considerable amount of overseas funding that was given, either through bilateral funding from individual countries such as Norway, Sweden, Austria.
Canada, Egypt, Finland, Japan, Italy, Denmark, Switzerland, UK. New Zealand, Spain and the Netherlands or through multilateral donations from UNDP, UNICEF and the EEC. Numerous smaller donations to health care projects and programmes were also made by smaller international aid charities and church groups, such as Oxfam, Save the Children Fund, Lutheran World Federation and World Vision.

**Disability provision**

At Independence the provision for disabled people in Zimbabwe, particularly the black majority was grossly inadequate (House *et al* 1990). The services that did exist were mostly undertaken by non governmental organisations run on charitable lines. These included organisations such as the Jairos Jiri Association concerned for the training and rehabilitation of adults with disabilities as well as the education of disabled children, and the Zimcare Trust, a major charity involved in the education and care of children and adults seen to have "mental handicaps".

At Independence the need for rehabilitation and training for disabled ex-combatants from the liberation war acted as an urgent impetus for changing and the extending existing services. The need for further action in terms of provision for disabled people was emphasised during the International Year of Disabled People in 1981, only a year after Independence.

Shortly after Independence the "Health For All" strategy was adopted by the government. In 1981, the Ministry of Health formulated a plan for the expansion of rehabilitation services in Zimbabwe between 1981-1984. It was
planned to introduce community based rehabilitation services to ensure that the majority of disabled people received rehabilitation services within their family and community surroundings. The aim was to avoid referral for institutional care. The plan, did however, envisage a system to allow for effective referral for more specialised services for those who needed it (Njini et al 1991).

The rehabilitation plan was designed to be implemented at various levels: national, provincial, district and in rural community health centres. There were also plans for a national rehabilitation centre with full specialist facilities. The immediate plans were to establish provincial and then district level rehabilitation departments, with trained physiotherapists, occupational therapists and speech therapists. The development of full community based rehabilitation services were to follow after the first two levels of staff and facilities had been established (House et al 1990).

In 1982 the Ministry of Health started a one year programme to train rehabilitation assistants, later to be known as rehabilitation technicians (RTs), to provided the primary rehabilitation services to the rural population. The rehabilitation assistants were trained to identify different disabilities and to initiate basic treatment. They were also trained to refer people with disabilities to other health workers or to appropriate other services such as social, educational and voluntary services within the community. The assistants were also trained to encourage family and community members to participate in any rehabilitation including teaching simple techniques and the making of appropriate aids (Njini et al 1990, Tiroler and Rubens 1985).
Staffing at all levels was a key factor in the development of rehabilitation services. In 1981 there were only 18 therapists employed by the Ministry of Health and they were based exclusively in the two major cities of Bulawayo and Harare. All rehabilitation staff physiotherapists, occupational therapists and speech therapists were trained overseas. Staff were concentrated in the major hospitals. In the early years following Independence the emphasis, in rehabilitation services, was on the establishment of national training for physiotherapists and occupational therapists and a degree course for these two groups began in Zimbabwe in 1987. Reflecting this emphasis, the training of rehabilitation assistants in the early years also favoured physiotherapy and occupational therapy. There were few speech therapists in either the health or educational services and so the needs of adults and children with communication difficulties, including deafness, were not a priority in the early years (Njini et al/1991, House et al/1990). A number of overseas volunteer speech therapists worked in Zimbabwe in the 1980s and early 1990s.

SIDA became involved in rehabilitation provision shortly after Independence, when the government of Zimbabwe requested that one million Swedish Kronor from the bilateral agreement for 1982/3 should be allocated to projects in the disability field. A delegation from Sweden visited to study the situation and investigate how best SIDA could provide support in that area. Out of seven possible sub sectors identified as suitable for Swedish support three were accepted for further investigation. Special education was at that stage taken out of the sub sectors for discussion in a different context (probably education). The 1982/3 agreement looked further at:

1. consultancy services to support the working out of a national plan of action in the disability field
2. consultancy support in the production of appropriate technical aids

3. support in the implementation of the rural rehabilitation plan (SIDA Memorandum 1982).

Early in SIDA's involvement with the rehabilitation services in Zimbabwe it became clear that there was a great need for services for parents of "mentally handicapped" children especially in rural areas. The Zimcare Trust initiated a programme of home training for "mentally handicapped" children in rural areas. Also, in the early years of Independence the Zimbabwe Red Cross began a community based rehabilitation project pilot programme in one area. They received funding from the Swedish Red Cross mostly for salaries and the purchase of two vehicles. This project was the forerunner of later CBR programmes, it demonstrated the value of using trained local volunteers and it contributing towards changing attitudes towards disabled people (Tiroler and Rubens 1985).

In 1982 a Seminar was held in Harare on "Disability Issues in Zimbabwe" which as part of its recommendation included the setting up of a National Rehabilitation Council or similar body to co-ordinate the development of government plans in a number of Ministries on disability issues.

In rehabilitation provision, private organisations and charities continued to receive government funding to carry on their work, however there were cuts in some instances. A Report for SIDA (Tiroler and Rubens 1985) noted that there were still disparities in provision between the previously whites only hospital and the previously African Harare hospital.
The Report, while mentioning concerns about the role of rehabilitation assistants in the developing health service, noted successes in the decentralisation of services away from the few major hospitals to the many district hospitals. Also, the referral system in place made it possible for many poor and rural disabled people to receive specialist services in provincial or central rehabilitation departments. The Report also notes the gradual positive influence on public attitudes to disabled people made by developing rehabilitation services. The report also notes the development of organisations of disabled people who expressed their needs and began to influence services.

**Non governmental organisations**

A number of non governmental organisations working in the field of rehabilitation were founded prior to Independence; these included the Zimcare Trust and Jairos Jiri Association. Many of these organisations had developed with a charitable ethos, needing to raise funds from private donations and fund raising nationally as well as overseas. Some, such as the Jairos Jiri Association, had considerable institutionalised provision: adult rehabilitation centres and homes, residential special schools, old people's homes, hostels and training centres.

A smaller number of non governmental organisations were formed in the immediate post-Independence era. These included the National Association of Societies for the Care of the Handicapped (NASCOH) and the National Council of Disabled People in Zimbabwe (NCDPZ). These organisations
developed with rather different aims and objectives in terms of advocacy and lobbying. Moyo (1990) noted a mushrooming of NGOs, in Zimbabwe, in the immediate post Independence period with a broader interest base, including community and welfare groups, professional and trade organisations as well as foreign based NGOs.

_Jairos Jiri Association_

The Jairos Jiri Association continued to expand its work throughout the period of the liberation struggle and Jairos Jiri continued his extensive travelling overseas both to raise funds and to learn of new methods in rehabilitation work. The biography of his life (Farquhar 1987) lists a number of overseas trips to Europe and North America during the late 1970s. The association had by then an international reputation and received funding from large numbers of international charities and aid organisations.

From 1977 into the 1980s the organisation was working with a considerable deficit in its funding. This rose from Z$60,000 in 1977/78 to over Z$281,000 in 1980/81. The Association had continued to expand its work, but on occasions without adequate funding to cover costs. Despite its deficits the Association continued to raise considerable overseas aid, which in 1979 amounted to Z$300,000 (Farquhar 1987).

After Independence the Association was promised full Ministerial support and government grants increased to cover the salaries of teaching and rehabilitation staff. Also after Independence, the number of visits from representatives of international aid organisations increased. Jairos Jiri continued his extensive overseas travelling and in 1981 the International Year of Disabled Persons
the work of Jairos Jiri received international recognition. He was awarded the Goodwill Industries International Award for Humanitarian and Rehabilitation Work as well as the Rotary International award for Africa. The citation read for "The Greatest Contribution to Rehabilitation in Africa, IYDP 1981".

However the work of the Association was still dogged by financial difficulties and a scandal about financial irregularities clouded its work. There was also the "problem" of the disabled residents in the institutions demanding the right of representation on committees. Jairos Jiri was annoyed and concerned about the threat to the Association posed by the organisation of disabled persons.

We decided to transform our club into a registered organisation, "The Council for the Welfare of the Disabled". The name confused Jairos Jiri because it sounded like a service organisation, but what we had in mind was nothing to do with service: it was an advocacy or pressure group. When Mr Jiri realised we were advocating power for disabled people, he suddenly felt threatened (p138 Phiri in Coleridge 1993).

But in 1982 at the age of 61, Jairos Jiri died of a heart condition. In 30 years his Association had grown from a shed providing training for a number of disabled beggars to an organisation with numerous centres and educational facilities. In many ways the association was a product of its time, initiating institutional provision where previously there had been none, and building on a foundation of charitable giving. It was an organisation driven by the concerns and vision of one man which harnessed wider concern in the African and white population for a particular disadvantaged group.
Today the disability movement in Zimbabwe is seen as one of the most vigorous in Africa and although the beginnings of this movement lay in the period prior to Independence, it is the immediate post-Independence period that saw its development into its current form. The roots of the National Council of Disabled People of Zimbabwe (NCDPZ) lie firmly in the Jairos Jiri Association. In the 1970s a group of disabled people, many of whom had grown up in the Association’s homes and schools, formed a group known as the Kubatsirana Club (Shona for ‘to help each other’). The club organised social events but also acted as a focus for people to discuss their problems and grievances. They were looking for educational opportunities beyond the vocational training given and were seeking ways of encouraging integration and greater representation for their ideas within the organisation. The club eventually became a registered welfare charity. In 1975 it became known as The Council for the Welfare of the Disabled. Jairos Jiri was upset and annoyed by the development of this organisation fearing it would threaten his current and future work with disabled people (Farquhar 1987 and Coleridge 1993).

During the period of the liberation struggle disabled people were undergoing their own struggle. There was resistance to the new group not only from the government who feared that it duplicated the work of other organisations, but also from the Jairos Jiri Association. The organisation was founded on the belief that disabled people could control both their own organisation and their own lives. The organisation was not specifically concerned with institutional provision, but with the civil rights of disabled people in general. It was aiming
to make disabled people aware of their rights and to raise awareness throughout the society about the integration of disabled people (Driedger 1988a, 1988b).

To this end the organisation sought to lobby the government. Six months before Independence they produced a policy paper on rehabilitation. The paper included recommendations for the formation of a National Council for Welfare and Rehabilitation, pro-disability legislation, and community-based rather than institutionalised services (Coleridge 1993).

The final step in the development of the organisation came when one of its leaders, Joshua Malinga, went to the momentous 1981 Rehabilitation International meeting in Winnipeg. This meeting was the beginning of the international disabled persons organisation "Disabled Persons International" (DPI). This meeting marked a turning point in disabled people’s fight to gain control of their lives against the medical rehabilitation model of the professionals.

It marked an end to the international isolation of disabled people and their organisation in Zimbabwe and brought a realisation of the international nature of the fight by disabled people for their right to education, equal access and opportunities. Following the Winnipeg meeting the organisation in Zimbabwe dropped its welfare role and changed its name to the National Council of Disabled People of Zimbabwe. Its primary purpose became lobbying the government, professionals, organisations and the general population on the rights of disabled people to full integration in all aspects of life, their right to
share in decision making on rehabilitation issues and the need for positive legislation.

The movement developed into a membership organisation and in 1982 started a rural outreach programme with overseas support from Horticultural Therapy and Oxfam. The programme sought to identify disabled people in rural areas, assess their needs, raise their awareness and help them acquire the services they require. Local branches of NCDPZ were formed.

As Coleridge (1993) notes, the situation in Zimbabwe highlights many of the tensions in the development of services for disabled people in developing countries. Where the situation goes from one of no provision at all to the development of a "charity industry" focused on the needs of individual disabled people, to the development of a disability movement with its focus on the universal rights of disabled people. In Zimbabwe the beginning of the transition from charitable institutions to disability movement took place in the immediate post-Independence era.

NASCOH

The final organisation in this section again marks the beginning of a transition in affairs relating to disabled people. The National Association of Societies for the Care of the Handicapped (NASCOH) was founded in 1980 and was registered as a welfare organisation concerned with the care and rehabilitation of disabled people in Zimbabwe. NASCOH acts as an umbrella organisation for all voluntary organisations for or of disabled people. The Association aims to promote the rights, interests and needs of disabled people. It co-ordinates the work of member organisations to prevent duplication and to assist
development. It researches into disability related issues and provides advice and information to member organisations, the government, overseas organisations and individuals. The Association has an advocacy role and works to improve access and change public attitudes as well as working for the provision of aids and appliances (NASCOH 1985, interview Gotera 1994).

From its inception the Association has worked to co-ordinate the work of non-governmental organisations working with or for disabled people. It is also recognised by the government as the official co-ordinating body for disability organisations. The Association acts an official adviser to the government as well as to overseas aid organisations. NASCOH has representatives of NGOs and government officials for several ministries on its executive committee.

Deaf people's organisations

Deaf people were originally part of NCDPZ in the early 1980s, but the Deaf gave up as the council could not meet their expectations. The view of the much later formed Association of the Deaf (ASSOD) was that NCDPZ, although claiming a cross disability status, was in fact mainly catering for people with physical disabilities (ASSOD 1993). It was not until 1988 that an organisation of and for Deaf people was formed in Zimbabwe. Some Deaf people were meeting during the period 1980 -1984 at a deaf football club in Harare. This not only provided social contact, but also started to address some of the wider issues facing Deaf people, such as access to employment.
National Council of the Hard of Hearing

The only other non-governmental organisation concerned specifically with the welfare of deaf children and adults was the National Council of the Hard of Hearing which was also registered in 1980. It was started in 1979 by two ear nose and throat surgeons, members of the Lions Club, a private hearing aid dealer and a number of teachers of the deaf. Since 1973 the Lions Club had sponsored hearing tests and where necessary the purchase of hearing aids for children in the white areas of the then Rhodesia. This council was formed by professionals and charity representatives and had continued to 1994 in this manner. It has sought to provide services and equipment to a very limited group of deaf or hard of hearing people in the community (interview Evans 1993, interviews Portsmouth 1993, 1994).

International organisations, context and influence

Independence brought the government and key people in public life in Zimbabwe back into the international community, this included membership of UN organisations such as World Health Organisation (WHO) and United Nations Educational Scientific and Cultural Organisation (UNESCO). In focusing on the development of deaf education in Zimbabwe these are the two most significant organisations to influence policy and provision in the post Independence period. The World Health Organisation, with its emphasis on community based health and rehabilitation services, provided a radically different model of provision to the highly professional, urban, centre based services predominantly for white people in colonial times. In the late eighties this would lead to community provision for pre school deaf children being started. The influence of UNESCO can be seen on a number of levels, firstly
with the sub regional Project on Special Education in Eastern and Southern Africa 1981-1983, secondly through the international focus on the International Year of Disabled Persons and finally through the dissemination of information specifically related to deaf education.

**Community Based Rehabilitation - World Health Organisation**

The concept of community based rehabilitation adopted by the Government of Zimbabwe for future rehabilitation programmes was first developed in the World Health Organisation (WHO) in the 1970s as part of a "Health for All" campaign. It built on:

1. the commitment of governments to develop services for disabled people using national resources
2. the use of government resources complemented by family and community resources
3. the transfer through training programmes of knowledge to families and communities from professional staff
4. wider use of mainstream educational and vocational programmes for disabled people
5. a greater emphasis on human rights (O'Toole 1991).

Out of this thinking the WHO manual on *Training the Disabled in the Community* (WHO 1989) was developed. The first versions of the manual date to the late 1970s. Since then CBR programmes were implemented by many governments and NGOs in developing countries. In Zimbabwe the idea of CBR was adopted in the early 1980s, but apart from a few pilot projects by NGOs full government implementation came after 1984.
A radical shift in rehabilitation provision was proposed by CBR taking services away from buildings, professionals, and equipment and giving responsibility back to individuals, families and communities. CBR programmes involve communities in planning and implementing services, while providing for referral to district or regional centres for specialist needs. CBR programmes use local people, skills and resources to benefit people with disabilities and their families (O'Toole 1991).

**UNESCO**

The UNESCO Sub-Regional Project for Special Education in Eastern and Southern Africa was established with a grant from SIDA. It set out to explore and assess ways in which a small UNESCO team could contribute to the development of special education for children not able to make progress in ordinary schools. The project also looked at links between education services and welfare and health services as well as at vocational training. The project collected information from many sources and disseminated it through regional seminars, publications and a final book of the project (Ross 1988). The project hoped to provide a base line for further studies, encourage exchanges of good practice and maintain a journal for a five year period of the project, which spanned the 1981 International Year of Disabled People (IYDP).

The Project collected important baseline material on incidence of disabilities, current provision and the role of NGOs and governments. Regional seminars were held during the project to discuss development in particular areas of special education, for example the education of deaf and blind children. There were also meetings of Ministry staff looking at planning and development for special education.
Zimbabwean special educators and Ministry staff were involved in a number of seminars. Of particular concern to the development of education for deaf children was *The Sub-regional Training Seminar on the Education of Hearing Handicapped Children* held in Zambia in 1982 (UNESCO 1982a). The final report notes the strong oral tradition in the education of deaf children in the region and the resistance of some participants to "non oral methods". It also notes that "only a few countries now have an organisation of deaf persons which is interesting in itself" (p 16). The seminar members recognised that the issue of communication methods and the use in particular of total communication approaches,

...will become increasingly important in the subregion, and that teachers and administrators of educational services for deaf children will need to give consideration reasonably soon if their response is to be in the best interest of deaf children and adults (p 17 UNESCO 1982a).

At the *Sub-regional Seminar on Planning for Special Education* held in Nairobi in 1982, Zimbabwean Ministry of Education and Health staff discussed with others the need for short and medium term plans for special education and the appointment of ministry staff with expertise in special education. The seminar recognised the importance of NGOs, "particularly churches, in administering and financing special schools...and the need for these services to operate as part of a national programme for special education" (p. 6 UNESCO 1982b). The seminar also discussed and acknowledged

The growing importance of the assistance provided by United Nations agencies, national aid authorities (particularly those of the Nordic countries)
and other aid agencies...and the potential value of continuing consultation
between these organisations on their aid programmes (p. 6 UNESCO 1982b).

In the period immediately following Independence key staff in a number of ministries and senior school staff were through the UNESCO project introduced to important new areas of development in deaf education and special education policy making. The main role of SIDA and UNESCO in the sub regional project ensured that the Zimbabwean staff were exposed to the views from the Scandinavian countries and UNESCO in particular. They were also able to exchange views with colleagues for other neighbouring African states.

In a wider sphere of influence UNESCO convened its second consultation on deaf education the: Alternative Approaches for the Education of the Deaf in June 1984 (UNESCO 1984), Twelve specialists were asked to consider "...issues and strategies relevant to curricula, methods and techniques suited to such education in terms of different regional background" (p. 3 UNESCO 1984). The consultation was also asked to pay particular attention to questions of relevance to the education of deaf children in developing countries. The consultation conclusions and suggestions focused on matters relating directly to developing education for deaf children, it also considered means of promoting international cooperation in the field. General considerations included the need for improvements in early detection and intervention and in collaboration with parents. The report noted the lack of parent organisations and the need to promote assistance with their development. The report noted the need to train teachers of the deaf in their own country whenever possible to encourage more culturally sensitive
approaches, it also noted the need for practical training in manual communication as well as the "traditional" subjects in teacher training. The report also reflected international trends and developments in recommending the use of a variety of methods for communication and language development including sign language, oral communication, cued speech and total communication.

This report also recommended that UNESCO and the World Federation of the Deaf work in co-operation to encouraging Member States to identify, develop and strengthen their own sign language. Other suggestions for international co-operation included developing guidelines to facilitate the integration of "handicapped" children into ordinary schools and further material on approaches to language development and instruction.

A number of the conclusions from these seminars and publications were acted on in Zimbabwe including the developments of a national special education programme and national teacher training course, and a partnership with a bilateral aid agency was initiated (SIDA). Other conclusions were not developed in Zimbabwe including an improvement in early detection, support for a parents’ organisation and early development of manual communication training.

**SIDA**

The Swedish International Development Agency was created in 1965 to take over the government’s bilateral aid programme and multilateral contributions. Sweden, a European country without a colonial history, has a policy of choosing a small number of countries on which to concentrate aid. In choosing
recipients Sweden is motivated by two main factors. Firstly there is a preference for English speaking countries, the second preference is for countries pursuing policies of social equality. In the past Sweden has worked with countries such as Cuba, Tanzania and North Vietnam. In the more recent years education aid has been given to Angola, Bangladesh, Botswana, Ethiopia, India, Mozambique, Namibia, Sri Lanka, Tanzania, Zambia as well as Zimbabwe (Abraham 1992).

SIDA extended its interest in countries in southern Africa in the 1960s to include Botswana, Lesotho, Swaziland and Zambia. This expansion was for foreign policy reasons, to support the liberation struggles in the region. Assistance was given to refugees in the area fleeing from the racist governments in South Africa and Rhodesia. As the liberation movements in Angola, Mozambique and Zimbabwe succeeded in the 1970s and 1980s so the countries became aid recipient from SIDA in their own right. SIDA’s humanitarian assistance in the areas followed an active policy of solidarity in southern Africa, making the region the largest in terms of bilateral Swedish aid.

Conclusions

This chapter has given an overview of social and educational developments during a period of rapid change and has reflected on how wider policy changes and trends have or will influence the education of deaf children.

The role of the government in education was changed and widened in this period, with policies to allow equality of access and opportunity for all. The
government for the first time saw education as a basic right for its citizens. However, to achieve the incredible rate of growth in primary and secondary education in this period it was necessary for education to be seen as a partnership. Few schools became government run in this period. Instead, education as a partnership between local communities, city councils and numerous other organisations was accepted, allowing government funding to be supplemented by local communities and organisations.

In this period the government, in both education and health provision took on greater responsibilities regarding the education and rehabilitation of disabled people. In conducting the National Disability Survey in the International Year of Disabled People the government became more fully aware of the extent of needs in this field, as well as the extent of existing services. The government sought the assistance of SIDA, one of its major donors in health and education, to fund part of the expansion of services and to assist in the establishment of plans and policies in special education and rehabilitation. The government also took formal steps to co-ordinate activities in the disability area by improving liaison between Ministries and also with non governmental organisations working in special education. The liaison with NGOs was not only done directly through funding, training and administration but was also through NASCOH the umbrella organisation of disability NGOs.

In the immediate post-Independence period Zimbabwe re-entered the international education community, participating in Commonwealth education meetings as well as UNESCO activities. The timing of the UNESCO Sub-Regional project on Special Education for Southern and Eastern Africa 1981-1983 gave Zimbabwean special educators considerable international
contact in this period. The funding of the project by SIDA further emphasised their strong commitment to policies of equality and education for disadvantaged groups in developing countries. The influence of World Health Organisation policies on primary health care and community based rehabilitation was also identified. Following a fifteen years period of isolation the government was exposed to many new concepts in rehabilitation and special education through the activities of intergovernmental organisations and international non governmental organisations. The early funding through SIDA of disability programmes also brought Swedish ideas into policy considerations and decisions at a formative time in health and education developments.

The role of NGOs in advancing ideas of the rights of disabled people to education, equal access and participation in society marked a radical change in thinking in Zimbabwe. The charity model of educational and welfare provision, although still strong in this period, was being challenged by calls for rights and legislative change. Although in the period these were not yet manifest in the Deaf community, the environment for change was set.

In the immediate post Independence years the churches and the charity running three of the schools for deaf were however unable to increase their provision. This could have been because of the lack of advocacy NGOs of parents or Deaf people lobbying for change or because of difficulties in fund-raising. The existing NGOs and the churches also failed to put sufficient pressure on the government to consider expansion as in the case of other disability groups.
This first five year period following Independence in many ways saw very little obvious change in the education of deaf children in Zimbabwe. But the social, political and educational context changed considerably. These changes provided the basis for expansion and development of education for deaf children in the next ten years.
CHAPTER 5

POLICIES OF EXPANSION AND INTEGRATION

Introduction

In this chapter I describe a period of expansion and diversification in the provision of education for deaf children in Zimbabwe. I argue that much of this was due to increased government responsibility for special education and rehabilitation along with increased liaison and co-operation with national non governmental organisations. The chapter also investigates the influence of funding from SIDA, a bilateral aid agency in the expansion of educational and rehabilitation services for deaf children. I argue that extra funding to the government from bilateral aid sources allowed for the expansion of services that would not have been possible otherwise.

Government involvement in the education of deaf children, discussed in the first section, included the first appointment of special education personnel in the Ministry of Education and Culture, in charge of education for hearing impaired children, the start of a national specialist teacher training, and the development of an integration programme based on the establishment of resource units. Government involvement also extended to technical and curriculum issues specific to the education of deaf children, for example, the provision of hearing aids and technical equipment to
resource units, the establishment of a communication policy for schools and units and the setting up of a sign language research project.

Further government involvement in the education of deaf children was reflected in the setting up of pre-school provision for deaf children and their families, by the Ministry of Health Children’s Rehabilitation Unit. This unit also undertook pilot community based rehabilitation programmes also involving outreach work, awareness campaigns and liaison with local and national non governmental organisations.

In the next section I argue that the role of NGOs in the education of deaf children in the period was in transition. The government was still reliant on charitable NGOs to maintain and continue running special schools, while advocacy and lobbying NGOs challenged the government on a number of different issues.

In the final sections of the chapter I argue that during the period 1985-1989 much of the expansion of provision, for deaf children and the policies of both government and NGOs, reflected the direct and indirect international influences on policy making in Zimbabwe. Firstly through funding, such as the SIDA money for rehabilitation and special education projects that were part of a government-to-government aid programme. Second through the acceptance of international ideas and models for rehabilitation and special education in developing countries from WHO and CBR programmes as well as UNESCO regional developments.
As in previous chapters, I explore national and international developments to make sense of the complex social phenomena that are deaf education and rehabilitation services in Zimbabwe. National developments in education and health care are discussed. Finally the international situation regarding economic development and the debt crisis needs to be appreciated in order to fully understand constraints and impetuses to future developments.

Throughout I consider the clashes of cultures and ideologies that were evident, between the agendas of the government and NGOs, between different methods of educating deaf children and between different models of rehabilitation and special education.

**Expanding Deaf Education**

This section describes and analyses the changing and increasing role of the government in the education of deaf children in Zimbabwe. It documents the changes and expansion in policy and provision and the development of government involvement with issues specifically related to the education of deaf children: integrated provision, communications policies, sign language research and the provision and maintenance of hearing aids and technical equipment.

In this period there was little expansion or development in the NGO sector of deaf education, except for the development of integrated provision through the Jairos Jiri Naran School in Gweru. The dominance of special
schools and their staff in the field was finally being challenged by the appointment of a specialist Ministry officer and active government measures to address the issue of expanding services.

As part of the government expansion of provision, policies extended to include an integration programme, teacher training and liaison with non governmental organisations, other ministries and overseas funding agencies. In order to expand educational provision and policy in the area of special education there was also a need for the government to increase its own capacity in special education, both nationally and regionally through the appointment of education officers within the Ministry with specific responsibilities for a number of areas of special education, visual impairment, hearing impairment and "mental retardation" as well as increasing Schools Psychological Services staff expertise regionally.

**Government and Deaf Education**

In the education of deaf children in Zimbabwe the Ministry of Education took on a number of responsibilities that had previously been left to the individual schools. These included

- the in service training of heads and practising teachers. The first in service course was held in 1987
- responsibility for the communication policy in schools, a change from oral methods which had been common in all the schools until 1988 was advocated in favour of total communication methods by Ministry staff
• research into sign language in Zimbabwe and its possible use in the education of deaf children was co-ordinated by the Ministry of Education and funded with SIDA money

• equipment for the new resource units was decided on and provided for by the Ministry of Education again with SIDA funds.

Finally Ministry involvement extended to the procurement and dispensing of hearing aids.

**Integrating deaf children**

Chimedza (1985), speaking at the NASCOH *Seminar on the Disabled Child in Zimbabwe* articulated much of the thinking behind the government’s future plans on the integration of deaf children in Zimbabwe. At the time Chimedza worked in one of the schools for deaf children. He went on to be one of the first lecturers on the hearing impairment diploma course at United College of Education, (UCE) in Bulawayo, and then between 1988 and 1991 was the Education Officer (Hearing Impairment) in the Ministry of Education and Culture.

Chimedza acknowledged the world-wide nature of the integration philosophy and put forward an idea of de-institutionalisation of special schools. "There is a world-wide strong philosophy towards integrating the disabled.....it is in the light of these world issues that the speaker...wishes to explore ways and means of integrating the Zimbabwean hearing impaired child" (p.51 Chimedza 1985). He noted the development of a Deaf culture in schools for deaf children, where children boarded for many years, and considered that this may hinder later integration. He called for boarding
special schools to promote integration right from pre school. Chimedza (1985) put forward the proposal that when possible children at boarding schools should become day pupils remaining at home with their family and travelling daily to school. Also that although the existing special schools should remain for "economic reasons", "it is advisable that new additional facilities for the hearing impaired should be in the form of units" (p. 52).

Chimedza (1985) proposed the development of small units for deaf children attached to mainstream primary and later secondary schools. He proposed one unit in each small town. The integration would be partial to begin with leading to full integration for children with good communication skills later. The proposal was for deaf children wherever possible to stay at home with their family and to become day pupils the same as their hearing siblings. Boarding facilities should only be used where necessary. Chimedza was not in favour of a Deaf community developing based on special schools, he considered that children educated in a special school where a "deaf culture" has developed have "very little chance of mixing with hearing children". In 1985 he was in favour of oral communication "...for the purposes of integrating the hearing impaired child in the community it is best to communicate orally".

At the Jairos Jiri Association school, the Naran Centre, in Gweru the first small scale integration project involving deaf pupils was started in 1985 (Dakwa 1989?, interview with Charema 1994). Four units were set up in two local primary schools and 30 children from the Naran Centre attended the units. Initially the plan was for social integration and contact during practical lessons such as physical education, music and art and craft. For a
number of pupils this was extended to other subjects in the curriculum. For others "academic" lessons or those requiring good communication skills were taught in the resource unit. The unit proved successful and a number of children transferred to the roll of the local school. Most still returned to the Naran Centre hostel after school and also used it for other support. Further units in primary and a secondary school were later opened in Gweru (interview Charema 1994).

The Naran Centre pilot project then became a model for the government, who began a national integration programme. In 1988 a unit was opened in Bulawayo and from there the provision mushroomed around the country.

A number of problems with the integration programme were noted: that deaf children remained in isolated groups and did not interact socially, that parents were resistant to integration and some wanted to have boarding school placement for their child, that there was initially a lack of awareness in the mainstream schools about the needs of deaf children, and that the children and staff were marginalised (interviews Karikoga 1994, Charema 1994).

Integration was being promoted by the government on a number of grounds particularly cost and an assimilation model of education for deaf children. For many children integration was in the form of separate resource units within a mainstream school, with limited social or academic contact with their hearing peers.
**Teacher training**

A national teacher training programme for specialist teachers to work in special education was seen as the backbone of Zimbabwe's integration programme. "Without trained personnel integration becomes a flop" (Ministry of Education 1989). Training prior to 1985 for specialist teachers was obtained overseas. There was a recognition in the early years after independence of the low level of specially trained staff (Edquist 1984). Most special schools only had about a quarter of their staff with specialist training. The national course to train teachers of blind children started at the United College of Education (UCE) in Bulawayo in 1983. This provision was extended to include the training of teachers for hearing impaired and "mentally retarded children" in 1986 and 1987 respectively (interview Musegedi 1994).

The government's aim was to establish diploma level training within an established teacher training college to provide the much need personnel for the expansion of special education. There was also an aim to start a degree level course in special education at the University of Zimbabwe.

The first intake of students at UCE on the hearing impairment diploma came from established schools. A number of the first group of graduates (1986) were sent overseas for additional training to Finland, Birmingham University and Newcastle Polytechnic (interview Chiswanda 1994). In later years teachers with two years experience were taken from primary and secondary schools following an advertising campaign to attract students (interview Musegedi 1994). There was also the on going need for training
for staff already working in special schools three quarters of who had no additional specialist teacher qualification.

There was during this period a full recognition of the need for suitably qualified and nationally trained staff to enable the expansion of special education to take place. There was a shortage of personnel not only in the classroom, but also of experienced staff for senior management and academic positions in regional offices, teacher education colleges, in university departments as well as within the Ministry to advise on expansion and new policies and initiatives, also to direct research and coordinate aid provision.

In 1988 the Ministry of Education and Culture was reorganised and a separate Ministry of Higher Education was formed, to deal with teacher training and other training issues.

The Ministry organised inservice meetings for teachers of deaf children from 1987. After that meetings of headteachers and practising teachers became an annual event, providing an opportunity for training and a forum for discussion of policies and their implementation.

*Communication policy and sign language research*

The ministry involvement in a communication policy to be followed in schools and resource units and the development of the sign language research are intimately connected. Prior to this period individual special
schools had been able to develop their own communication policy, and all of them with the exception of one followed an oral approach in the education of deaf children.

Setting up the Sign Language Research Project

A position paper given at the 1988 World Federation of the Deaf, East African Sign Language Seminar in Arusha, Tanzania, gives details of the background to the sign language research project. The seminar was arranged jointly by the Finnish Association of the Deaf with funds from the Finnish Ministry of Foreign Affairs and The Evangelical Lutheran Church in Tanzania and the Mwanga School for the Deaf.

In the mid 1980s there was controversy in the world of deaf education in Zimbabwe regarding the best method of education. Following a number of years of debate the 1987 teachers' workshop resolved to change the method of education for deaf children from oral to total communication (Chimedza in Joutselainen 1988).

At that time four of the five schools were oral, one had just began a programme of total communication. There was concern about the academic progress of deaf children and the cause was identified by the Ministry of Education and Culture as being due to a lack of effective communication between teachers and children. It was also noted that in all schools pupils signed both in the classroom and outside (interviews Peterson 1993, 1994).
As a result of the 1987 workshop a committee was set up to carry out research and "develop the Zimbabwean sign language". The first committee had nine members these included:

- the Ministry of Education, Education Officer (hearing impaired)
- two speech therapists
- an educational psychologist
- one teacher of the deaf
- one research adviser
- three lecturers from the programme for teachers of the deaf.

There is no mention about whether any of the members of the committee was deaf. However I think it can be assumed that they were all hearing.

An early investigation was made to establish whether children in the schools for deaf children and deaf adults were using the same signing system. The findings of this brief investigation were that although there were a lot of variations, there was a common base.

The committee developed a full research proposal and funding of ZS100,000 (ZS to £ sterling exchange rate in 1994 was ZS8 to £1 sterling) was obtained from the SIDA money to the Ministry of Education and Culture for the period 1988/1989. Further funding of ZS100,000 per year was later obtained for the project for the years 1991/2, 1992/3, 1993/4 and 1994/5 from the SIDA allocation to Schools Psychological Services and Special Education Unit of the Ministry of Education. Once funding was secured the team was expanded to include a further 18 teachers of deaf children, who were used as research assistants in the collection of the data.
and some of its analysis. The Association of the Deaf (ASSOD) was also included at this stage along with a number of filming experts. A pilot project was carried out in 1988 at one of the schools for deaf children in order to assess any problems or loopholes. The teachers involved in data collection attended a film workshop to train to collect the data required (Chimedza in Joutselainen 1988).

The stated aim of the project was to produce a dictionary and other material that would result in the use of signed English and eventually signed Shona and Ndebele for use in education. Although the team stated that they recognised and respected "sign language as a language in its own right, but we observe that for academic work a signed system was more suitable. Signed system will follow the syntax, semantics and pragmatics of the conventional language" (Chimedza in Joutselainen 1988).

Research Methodology and Data Collection

A vocabulary list was made of about 3000 words, including words used by hearing pre school children additional words were added from the schools for the deaf.

The country was divided into five regions. The teachers used as research assistants videoed a random group of children from the schools for the deaf signing the words on the vocabulary list. The members of ASSOD and the lecturers collected videos of deaf adults signing the words on the vocabulary lists. Material was collected from deaf adults in urban and rural areas, those who had been to school and those who had not.
The research was originally planned as a three year project to be completed in three phases:

1. Data collection and analysis
2. Development of a sign language dictionary
3. Implementation, evaluation and monitoring.

Analysis

Once all the data had been collected the analysis began. A group of about 20 people, ministry staff, teachers and lecturers were involved in this stage. They met together at regular workshops. The videos of adults and children signing each word on the vocabulary list were compared. In cases where there were a number of different signs for one particular word then the research team chose one sign out of the many to include in the dictionary. The aim was in part the standardisation of Zimbabwean signs for consistent use in all educational situations. Factors that influenced the selection of signs included "logic, and meaning, particularly in compound words", as well as a desire to have an "indigenous signing system that reflects the culture of the people" (Chimedza in Joutselainen 1988).

The sign language research went on for some time after the period of this chapter 1985-1989. But for many it was a significant event in the education of deaf children in Zimbabwe. It marked not only the beginning of government control in the education of deaf children in areas previously the domain of the individual schools. It also marked a considerable change in policy for most of the special schools away from the oral methods that they had used since their inception. The government’s announcement of a
preference for total communication methods in educating deaf children was not followed up by extensive training for staff in the philosophy of total communication or in the learning of sign language. Different schools implemented the policy in different ways. In those with orally trained heads and some staff they continued much as they were, awaiting further Ministry assistance. A number of staff learnt sign language from the pupils and used it in their teaching, others continued teaching orally. In the school where the head was interested in total communication the use of Zimbabwean Sign Language continued and developed.

With the expansion of provision for deaf children in resource units from 1988 it would appear that a uniform policy on communication would have been preferable. However the research, as will be seen in the next chapter took a lot longer than anticipated and as a result there has been little opportunity for staff training and co-ordination at various levels of provision pre-school, special school and unit, around a common communication policy.

**Hearing aids**

The Ministry received a donation in 1985 from a national NGO and ministry speech therapists dispensed the aids. Later SIDA funds were used to acquire a bulk order of hearing aids for use in education. These were available for pupils in the new resource units as well as those in existing schools. To support this involvement with hearing aids the government sent a small number of experienced teachers overseas to the UK for technical training in repairs and ear mould manufacture (interview Chiswanda 1994). There was very little experience and capacity in the
country to support hearing aid assessment, dispensing, repair and mould manufacture. In the 1980s there was one private hearing aid dealer in Harare who could supply aids, make moulds and do repairs. One school had a hearing aid laboratory provided by a West German charity. Otherwise there were limited resources and expertise in the many aspects of hearing aid provision and support for users in schools (interview Evans 1993).

**Government Special Education Policies**

This section looks in detail at the wider special education context for the developments in deaf education. The section considers the government's legislative and policy framework, integration in other areas of special education provision and finally the Ministry structure and role. This was a period of proactive developments in deaf education and the expansion of government role in other areas of special education. For the NGOs this was a period of adjustment to government developments.

*Legislation and policies*

The Ministry’s Annual Report of 1985 (Ministry of Education and Culture 1986) noted in its Schools Psychological Services (SPS) and Special Education section that..."new strategies have been formulated as special education has come into line with national policy by attempting to ensure equal educational opportunities for children with handicaps into normal schools" (p. 20). The policy aims for that period were given as the
development of nationally relevant training, the procurement of necessary
equipment, the establishment of ministry specialist personnel and the
maintaining and co-ordinating of special education policy.

The numbers of referrals to SPS in 1985 increased as did the total number
of special classes to 73 in the year. There was an anticipation of further
increases in the year to come. The new special classes were supplied with
recommended equipment and books, from SIDA funds. This material
meant that new classes started with basic supplies. SIDA money was also
used in that year for the purchase of mobile units and Land Rovers for use
in outreach work in co-ordination with health rehabilitation projects.

Throughout this period, the Report noted that speech therapists, many of
them recruited from overseas, were used in SPS and special education in a
regional training capacity. In 1985 four regionally based speech therapists
ran courses for teachers on simple skills of speech correction. Speech
therapists also ran seminars and workshops. In 1985 the speech therapists
received a donation of 100 hearing aids from the National Council for the
Hard of Hearing (NCHOH) which they distributed to needy pupils.

The 1985 Report also noted the receipt of SIDA funds of Z$138,000 for
NGOs, to the Council for the Blind to equip resource rooms, to Zimcare
Trust for rural home based learning programmes and to the King George VI
Memorial School for its Education for Living Centre for deaf pupils. In
1985 discussions were held with SIDA to secure further funding for a
further two year period.
In 1985 the three posts of specialist education officers for children with visual impairment, hearing impairment and "mental handicaps" were advertised. This was in line with UNESCO recommendations (UNESCO 1982b) to increase Ministry expertise in special education, and it brought experienced teachers into a department previously dominated by psychologists.

A Canadian writer Marg Csapo (1986) noted, at that time, the lack of a national policy to co-ordinate existing provision. She also noted a need for money and expertise to allow for the expansion of special education. When Csapo interviewed Dr Samkange the Senior Education Officer, responsible for special education, she noted government policy intentions which in that year (1985/6) included the extension of the special education teacher training diploma, the appointment of ministry special education officers for visual impairment, hearing impairment and "mental retardation", the formulation of policy, co-ordination of non governmental organisation work and inservice education for existing heads and teachers.

The 1985 Annual Report (Ministry of Education and Culture 1986) noted the large numbers of staff in special education who do not have the necessary special education training; nearly three quarters of staff were not specially trained. There was also understaffing and under qualification of staff at ministry level, so that in 1986 there was insufficient staff to meet the needs of all aspects of special education including proposed expansion.

In 1987 the government passed an Education Act setting out an individual's rights to education and details of school classification.
collection of fees and the regulation of government and non-government schools and colleges. Although the Act set out a child’s right to education it did not mention the right to education of children with disabilities.

(1) ..........every child in Zimbabwe shall have the right to school education.

(2) No child in Zimbabwe shall be refused admission to any school on grounds of race, tribe, colour, religion, creed, place of origin, political opinion or the social status of his (sic) parents (Government of Zimbabwe 1987).

Although the act’s declaration of the right of all Zimbabwean children to an education regardless of race, tribe or religion was considered to extend to children with disabilities and difficulties in learning, it would seem clear that this was one group of children to whom the right of an education was not specifically extended by the government.

However in 1987 another government document Policy Goals and New Directions in Special Education, possibly written for external readership, stated that the government of Zimbabwe was committed to the education of "handicapped children" through:

- the provision of educational opportunities comparable to those enjoyed by all children in Zimbabwe
- integration with and acceptance by non handicapped children without prejudice in schools
- provision of special assistance and special compensatory aids to learning in whatever form it is available
acceptance in employment, vocational training colleges and universities, according to skills, knowledge and qualifications (Ministry of Education and Culture 1987).

By 1988, in an entry, most probably written by Ministry of Education staff, to a UNESCO (1988a) publication the details for Zimbabwe noted the government's six main policy aims for special education as being:

- to provide adequate education to handicapped children within the regular system
- to develop teacher training facilities
- to develop resources to enhance prevention of handicaps, promote early detection and public awareness and support rehabilitation measures
- to assist non governmental organisations
- to promote degree courses at university level
- to develop assessment instruments (UNESCO 1988a).

By 1988 special education provision by the government covered five disability areas: "mental retardation", "physical handicap", visual impairment, hearing impairment and learning disabilities. The government did not make provision for emotionally disturbed children or those with language disorders.

Approximately 4,000 pupils were enrolled into special education provision by 1988, approximately 0.2% of the school aged population. The majority of the provision, for all groups, was in primary education. Pre school provision was widely available for pupils with visual disabilities, but there
was limited provision for other groups. The available provision was in the form of home teaching programmes and special nursery schools or classes. At the other end of the school age there was in 1988 good post secondary provision for pupils with physical and visual disabilities, but provision otherwise was limited.

Support services in mainstream education were provided by the Schools Psychological Services and its Special Education Unit and included psychologists, speech therapists, remedial tutors and special education officers to both regular and special schools. Physiotherapy was only available in special schools.

The chief education officer's *Circular Minute no 3* (Ministry of Education and Culture, 1989) noted the government's intention to control the curriculum for all pupils in special education. The circular noted that education for visually impaired children had already followed the regular school curricula for some time and this had facilitated their integration into regular schools. However, schools for hearing impaired children until 1989 followed curricula different both from each other and from that set by the Ministry for regular schools. From 1989, all special schools, resource units and centres were required to follow the regular school curricula as laid out by the Curriculum Development Unit of the Ministry. The circular was seen as essential if the policy of integration was to be followed and "handicapped children" could compete with their non handicapped peers.

A document entitled *Special Education in Zimbabwe: Integration of Handicapped Children* (Dakwa 1989?) written by F.E. Dakwa Education
articulated the government's policies for the late eighties. Although
recognising that special education included eight categories the
government continued to concentrate on children with visually
impairments, hearing impairments and physically and mentally
"handicapped" children. Integration had by 1989 become the "accepted
policy in Zimbabwe" (p. 2).

Special schools were still seen as having an "important educational
function", but the emphasis was on integrated provision. The document
acknowledges the need to provide for different levels of integration,
depending on the needs of the child, from locational and social integration
through to functional integration. The much later development of
integrated provision for deaf children in comparison to blind, physically
handicapped and mentally handicapped children is documented. Over 270
blind children were integrated in primary, secondary and higher education
while 1352 mentally handicapped children were integrated in 91 special
classes, in contrast only 44 deaf pupils were provided for in integrated
settings: six resource units. No separate provision was made for physically
disabled children in regular schools.

Integration

Integration had been a policy in special education in Zimbabwe since
1962 when the National Council for the Blind with assistance from the
Royal Commonwealth Society for the Blind introduced "open education"
at the Waddilove Mission near Marondera. At Waddilove the first
specialist training for black teachers of blind children was started. This course closed a few years later. The type of provision was in line with trends elsewhere in the developed world towards integrated or open education in regular schools with a specialist teacher based in a resource room. In the early years following independence there were two schools for blind children in Zimbabwe. One initially provided by the Dutch Reform Church, later the Reformed Church of Zimbabwe and the other opened by the Jairos Jiri Association shortly after independence (Zvobgo 1990 and Addison 1992). Integrated education for blind children had begun as an NGO initiative.

At Independence there were also seven resource rooms attached to mainstream schools in Zimbabwe. The expansion of this existing form of integration increased in the first decade after Independence until, in 1989, 32 schools, both primary and secondary, had resource rooms and specialist teachers. Blind students had during this period been accepted at teacher training colleges, and at university. The expansion of education for blind children and its extension into integrated open education as early as 1962 is in part due to work of the Council of the Blind in Zimbabwe. It was formed in 1956 and has played a vital role in education for blind children. Its work had extended to co-ordinating assistance from overseas, providing technical support for blind pupils, brailling school texts and lobbying education authorities on the needs of blind pupils and the value of open education. It provided financial assistance to schools to build resource rooms, assisted in their maintenance and encouraged sponsorship schemes to pay for the education of blind children (Zvobgo 1990 and Addison 1992).
The government had assisted in the education of blind children through organising teacher education first in neighbouring Malawi and later in Zimbabwe. The first national teacher education course in special education, at United College of Education in Bulawayo, was for teachers of visually impaired children. The government has also provided in-service training and also given full support for salaries for teachers of blind children. It was with this history of integrated provision in the education of blind children that a wider policy of integration was developed by the government that covered all aspects of special education.

From 1982 when the government acknowledged its responsibility for special education, it was under pressure to increase provision. The schools for deaf children had waiting lists as did other special education institutions. The National Disability Survey of 1981 for the first time gave some statistical evidence of the size and nature of the disabled school population, and revealed the large percentage of children without school provision. A policy of expansion through integrated provision was gradually adopted, in the case of the education of blind children and those with physical disabilities. "There is a policy of encouraging integration, especially as regards pupils with visual handicap and some pupils with physical handicap and mental handicap" (UNESCO 1988a).

The government was aware of the costs of both building and maintaining special schools and was therefore in favour of integrated provision on the ground of cost. Most of the existing special schools received considerable additional financial support from charities, churches, overseas donations
and fund-raising. Boarding special schools would have been an expensive option for expansion. It would also have gone against all world-wide trends in special education in the 1980s that were towards the integration of children with disabilities and difficulties in learning.

Integration policies also derived from issues relating to the rights of children to be educated within their family and community and with their peers. The original policy of integration within Zimbabwe, was for less disabled children or those thought able to cope with integration to be placed in the resource class and those more disabled children to go to the existing special schools.

By 1988 the government was fully committed to integrated provision for all children with disabilities. "The main issues concerning the future development of special education are the integration of the handicapped in regular schools and making the necessary provision" (UNESCO 1988a). Although integrated provision for the three other recognised groups of children: blind, physically disabled and mentally disabled was proceeding with few documented problems it was only in 1988 that the first government integrated provision for deaf children was opened.

Ministry Structure and Role

Administrative responsibility for special education during this period lay with the Schools Psychological Services, Special Education Unit, part of the Ministry of Education and Culture. The unit was headed by a Chief Educational Psychologist, and there was an education officer for special
education. There were four administrative offices covering the nine educational regions, each headed by a senior educational psychologist responsible for psychologists, education officers (special education), remedial tutors, speech therapists and research assistants.

The Ministry of Education assisted in the co-ordination of programmes in NGO institutions in terms of funding, staffing, policy implementation and monitoring (UNESCO 1988a). The breakdown of service provision in 1988 was as follows:

- state special education 20%
- non governmental organisations 80%.

Responsibility for implementing education policy in general was held at various levels: national, regional, and local. In contrast responsibility for implementing special education was held at national level (UNESCO 1988a).

Funding of special education was the same as that for regular education. The state provided teachers' salaries and a capitation grant for each pupil. There was a substantial contribution through aid and NGOs. Parents also pay school fees and examination fees (UNESCO 1988a).

The role of the Ministry of Education and Culture in the provision of special education had thus developed during this period to include a number of new and extended roles. These included the development and implementation of special education policy particularly in the areas of
integrated provision and teacher training. The ministry also increased its liaison role with both NGOs and bilateral aid agencies.

The ministry did not take control of the existing special schools run by various NGOs such as the Jairos Jiri Association, the Reformed Church and the Roman Catholic Church as well as the Zimcare Trust and others. Instead, the government provided financial support in terms of salaries and capitation fees, but allowed the NGOs to continue with the necessary extra funding for boarding facilities and equipment and non teaching staff. The government was, however, increasing its role within these schools through policy decisions such as that on curriculum, through teacher supply as well as in specifics relating to the education of the children such as in hearing aid supply, and communications policy. Previously each individual school had had control over these issues. The government was therefore still dependent on the NGOs for the continued existence and running of the special schools. The government’s integration policy meant that government controlled and funded the areas of expansion through resource units and special classes.

The second area of Ministry of Education expansion was its role in liaison with other ministries and with NGOs through the formal channels of the Interministerial Committee. This committee started in 1987 included the Ministry of Education, Ministry of Health, Ministry of Finance, Ministry of Labour, Manpower Planning and Social Welfare as well as having NGO representation through NASCOH the umbrella organisation of NGOs concerned with disability issues. NGOs lobbied the Committee on access and equal opportunities issues as well as on disability legislation, it also
co-ordinated areas of overlap in provision, particularly in pre school and rehabilitation, outreach and awareness projects (NASCOH 1993).

The final key area of liaison work for the Ministry of Education SPS and Special Education unit was linking with donors on issues of funding and support. SIDA (Swedish International Development Agency) was the major donor into special education for the government. This funding had started in 1982 and continued into the period under consideration 1985-1989. The extent of SIDA funding for special education between 1985 and 1989 was approximately 4 million Swedish Kronor per year. The total SIDA funding to special education from Independence to June 1989 was 14.4 million Swedish Kronor (Colclough et al. 1990).

The main emphasis in special education spending with SIDA funding up to 1989 had been the training of specialist teachers, the provision of equipment and funding to NGO schools, the inservice training of teachers and the funding of Zimbabweans to train overseas. There was also joint Health and Education funding for mobile units used in outreach and awareness programmes (Colclough et al. 1990).

Funding from SIDA to education in general in Zimbabwe amounted to about (Millions of Swedish Kronor) MSEK50 per year. SIDA priorities were to promote equity, quality, efficiency and effectiveness in education, with a special emphasis on disadvantaged groups. Over the first decade funding was used for capital construction, teacher training, curriculum development, administration, teaching materials, special education and
non formal education. Special education’s average of 7% of the SIDA total funding was designated under equity and priority to disadvantaged groups.

A SIDA report on education in Zimbabwe during the 1980s (Colclough et al. 1990) indicated concern over the low level of provision in special education in Zimbabwe, estimating that only about 10% of the possible 60,000 children with disabilities were receiving formal education. Although numbers in special education had increased to 5,700 children this was seen as a matter of concern. The study noted that neither the Ministry of Education nor the NGOs had sufficient resources and staff to met national demand for special education facilities.

The 1990 report made a number of recommendations for the future development of special education, these included:

- basic information on types and numbers of disabled people in the country needs to updated through surveys and systematic research
- there is a great need for teachers and experts in the various specialities of special education
- there is a great shortage of high-level university trained specialists ...
- there was a need for the inclusion of special education components in initial teacher training...
- there was a need for better co-ordination between all those involved in working with the handicapped...
- there was an overriding need for policy guidelines to co-ordinate and streamline services, integrated classes, teacher training (Colclough et al. 1990).
NGOs in Transition

During this period the new social movement of disabled people lobbying and working to secure their rights was strengthened and expanded. The Association of the Deaf (ASSOD) was formed officially in 1988 when it was recognised by the Ministry of Welfare.

A number of deaf people had belonged to the National Council of Disabled People in Zimbabwe (NCDPZ), but had not felt that it dealt with their specific problems. Following the development of the deaf football club in Harare in the early 1980s, the group became particularly concerned over issues of employment for deaf people. A head of a school for deaf children in Harare convened a meeting of former pupils to discuss these and other issues and it was from this that ASSOD was born (interview Mazhande 1993).

NCDPZ continued its work and received funding from overseas from SIDA and a UK charity to expand its outreach work into rural areas. Disabled people particularly those in isolated rural areas were contacted and encouraged to meet together. Also training projects were started to give disabled people opportunities to learn new skills and so increase their financial independence. In this period NCDPZ started its own theatre group Tose Sanke, a mixed company of disabled and non-disabled people, which toured presenting plays initially on disability issues, but later on other current social issues such as AIDS, family planning etc. (House et al. 1990). Their aim was to promote integration and counter negative attitudes.
to disabled people. NCPDZ also co-operated in the pilot community based rehabilitation projects and in the awareness and outreach programmes that formed part of the initial stages of CBR projects. (House et al. 1990).

The NGOs increased their influence over government policies on disability issues including special education in a number of ways: through NASCOH and the Interministerial Committee, through direct lobbying and indirectly through public awareness raising. NGOs received funding through the government from SIDA and other sources to expand and continue work in special education. Organisations such as the Council for the Blind and Zimcare Trust who were initiating new programmes in special education became more involved in government policy. Although they received funding from government and aid agencies they were left to continue new and innovative work.

NGOs were also more formally included in policy formation, and legislative programmes and co-ordination through the establishment in 1987 of the Interministerial Committee on disability issues. This included a number of Ministries: Education, Health, Finance, and Social Welfare as well as NASCOH the umbrella organisation of disability NGOs. The NGOs began lobbying the government on issues of access to buildings and later on disability legislation.

By the end of the 1980s a large number of disability NGOs were in formal contact with the government regarding education and other areas of social policy. These included organisations representing blind people, those with physical disabilities and people with learning difficulties. An NGO directly
representing Deaf people was quite late in joining this group and had not been accepted as legitimately representing the interests of Deaf people.

**International Trends and Organisations**

As this chapter has illustrated in a number of ways, provision for deaf children in Zimbabwe was increasingly responding to indirect international pressures and trends. Policy and provision conformed in a number of ways to international trends and changes. At the beginning of this section I discuss the international trends in special education and community based rehabilitation as well as those specifically related to the education of deaf children. Then I illustrate how changes in Zimbabwean policies and provision reflected these wider changes.

During the late 1980s international developments in special education, the education of deaf children and community based rehabilitation were moving towards the integration of all children, within the mainstream education system, highlighting the responsibility of local communities for their disabled children and adults and the rights of all children to an education.

Within the field of deaf education there was a general move towards the consideration of the total communication approach in the education of deaf children. The dominance of oral education was beginning to be questioned and new practices were being tried in a number of countries. There was in a number of Scandinavian countries, most particularly in
Sweden, the growth of bilingual approaches. These called for the education of deaf children initially in sign language and then the teaching of the national spoken and written language as a second language through the medium of sign language.

In this period a new international non governmental organisation was started devoted to issues relating to the education of deaf children in developing countries: Initiatives for Deaf Education in the Third World. The WFD commissioned a survey in 1988 on the lives of deaf people in developing countries (Joutselainen 1991). One part of the survey related to access to education for deaf children.

*International governmental organisations*

*World Health Organisation*

It was in this period that the World Health Organisation policy of community based rehabilitation was fully adopted by the government of Zimbabwe. The government funded community based rehabilitation (CBR) programme started in 1988, although rehabilitation services were being developed at national, regional and provincial level prior to 1988. In 1988 the provision was extended to district and community level.

The Ministry of Health adopted a CBR model for development as it fitted into the overall health objectives of "Health for All", which was being implemented to strengthen health services at the primary level of a preventative rather than a curative approach. The aim was for community health care to be accessible, affordable and accepted by all communities.
The Permanent Secretary for Health, Dr D. Makuto explained the rationale for CBR:

Firstly the government recognised the integration of disabled people in society should be the ultimate aim of the rehabilitation programme. Institutions are not only very expensive to run but they are also limited in the number of people who can actually benefit from their services. Authorities worldwide have come to realise their mistake. Now they decry institutional care for disabled people and are trying to provide assistance and support in the community (in House et al. 1990).

In Zimbabwe there was a recognition of the two basic models of CBR development. The first model was based on grassroots primary health care programme where members of the family and community perform rehabilitation functions. The second CBR model developed as an outreach or extension programme based on bringing professional rehabilitation services to larger numbers of people particularly those in rural and remote areas. In Zimbabwe CBR drew on both schools of thought. CBR was an extension of recently established and extended services, but it also recognised that full community involvement was vital for success (House et al. 1990).

As in other developing countries the impetus for government CBR programmes, in Zimbabwe, was in response to a number of needs. The size of the rehabilitation problem was large and an institutionally based, professionally staffed expansion was economically not possible. The international trend was away from institutionally based provision towards
integrated community services. Disabled people’s groups were in favour of integrated community provision. In many situations as in Guyana and Zambia as well as Zimbabwe, pilot projects run by NGOs, often with overseas funding, had already proved the value of CBR programmes and highlighted benefits and difficulties (Mariga and McConkey 1986). Government involvement then was to expand provision in a number of provinces with the eventual aim of national provision. Seven government pilot projects were initiated, one in each province for later evaluation and expansion.

**UNESCO**

UNESCO was until 1988 continuing its policy objectives set down in its 1979 (UNESCO 1979) planning document. In 1988 a meeting of specialists and experts set new special education objectives for the period 1990-1995 (UNESCO 1988b). These UNESCO consultation meetings were significant in setting priorities for work in the future. For the Third Medium Term Plan 1990-1995 there was an emphasis on UNESCO extending its advocacy and catalytic role in special education and on working with other organisations to make good use of existing facilities. The extension of work with disabled children within the ordinary school system was also highlighted as a priority.

The 1988 meeting suggested four key areas for work in the period 1990-1995. These included: providing information and raising awareness, working with member states on planning, organisation and management of special education, training of personnel and the mobilisation of resources.
and co-ordination of work done by international organisations, NGOs and governments.

Other UNESCO publications and developments of note for the period, 1985-1989, include those relating to the education of deaf children, and the 1988 *Review of the Present Situation of Special Education* (UNESCO 1988a). There were two UNESCO documents relating specifically to the education of deaf children. The first *Education of Deaf Children and Young People* (UNESCO 1987) was one in the Guides for Special Education Series aimed at teachers, parents and community workers to give basic knowledge and practical advice on the education of deaf children. It arose out of the 1984 *Consultation on Alternative Approaches to the Education of the Deaf* (UNESCO 1984) which stressed a need to share information and elaborate training materials. The guide was written for UNESCO by staff of the Danish Centre of Total Communication in Copenhagen, and does therefore advocate a total communication approach in the education of deaf children. The aim of these guides was for their dissemination and use in developing countries as well as in the developed world. One year later UNESCO produced a *Language Curriculum Planning for Deaf Children* (UNESCO 1988b) pack with slides and teachers' guide. This pack was aimed to complement the previous year's guide and focus teachers' attention on curriculum planning in language education for deaf children.

The final UNESCO document for consideration is the 1988 *Review of the Present Situation of Special Education* (UNESCO 1988a). This, along with a number of individual country case studies of special education, was
an attempt to survey special education policy and provision in a number of developing and developed countries. The aim of the review was to gain up to date information on policies, legislation, administration, financing and provision for disabled children. Over 80 countries were contacted to be part of the review, fifty-eight were eventually used in the document and analysis. The review gave a distillation of information on special education world-wide, it also highlighted trends and brought to light a number of current issues in special education. The government of Zimbabwe provided information for the survey in 1986-1987.

UNESCO's role in this period in relation to the education of deaf children was to continue with the publication of information and its dissemination, particularly in developing countries. UNESCO also sought to collect and disseminate information on special education throughout the world. In its own policy on integration UNESCO did not differentiate between different disability groups, so that the policy of provision in the mainstream included deaf children along with blind, physically disabled and other children.

WFD

The specialist international non governmental organisation (INGO) the World Federation of the Deaf (WFD) was, however, beginning to question the generally accepted policy of integration for all disability groups. They were also changing their support for total communication to an advocacy of a bilingual approach. The WFD in their 1987 Commission on Pedagogy and Psychology advocated a bilingual environment as a right for deaf children. The WFD in the same commission recommendations supported
the retention of special schools with a bilingual curriculum. They also noted the marked increase in the number of deaf children in mainstream education and went on to reject any type of mainstreaming that does not have the appropriate support services for deaf children. These services included communication accessibility, social interaction with peers and full opportunity for a bilingual education.

The same 1987 commission also noted that "...the status of education of the deaf in developing countries continues to be impoverished and unacceptable. Only a few deaf children are able to get an education and the need for educational activities remains enormous" (WFD 1987).

*Initiative for Deaf Education in the Third World*

Finally in this section the setting up of a new INGO related to the education of deaf children needs to be considered. Initiative for Deaf Education in the Third World started during the International Congress on the Education of the Deaf held in Manchester in 1985. The developing countries were under represented at the congress and delegates from developing countries met separately to discuss issues of interest as they felt these were not being addressed. From this meeting of third world delegates it was decided to set up a network to support professionals from developing countries concerned with the education of deaf children. Initiatives was formed as a network of deaf people, parents of deaf children and professionals providing educational, social, medical and para medical services for deaf people in developing countries (De Carpentier 1995).
International organisations' influence in Zimbabwe

The research has shown that in Zimbabwe the policy and provision for deaf children in the second half of the 1980s reflected major international trends. Also Zimbabwean policy makers were increasingly aware of trends in special education and deaf education in their work. Since Independence in the field of health and rehabilitation the government was committed to WHO "Health for All" policies, and these were extended to include rehabilitation services in the mould of CBR in the late 1980s. The realisation of CBR policies for provision for deaf children meant in Zimbabwe the employment of overseas speech therapists from the UK who initiated and developed the hospital based service in Harare. This pioneering work with pre school deaf children was dependent on overseas therapists as the country had so few Zimbabwean speech therapists.

In education the policy of integration was extended to include deaf children again in the late 1980s. This was in line with the trend worldwide. Similarly with the total communication policy and the initiation of the sign language research this paralleled international trends. The research has indicated interaction between ministry staff and UNESCO and WFD in regard to special education surveys and the sign language research. There was also on going exchanges with SIDA staff and ministry officials regarding current and future special education developments. A number of ministry officials and teachers of the deaf also had the opportunity to study overseas and these experiences brought new ideas into the country.

Finally the NGOs in Zimbabwe organised by deaf and disabled people were involved in the wider deaf and disability international network.
through organisations such as Disabled Persons International (DPI) and the World Federation of the Deaf. With ASSOD joining the WFD this provided the national deaf pressure group with formal contacts with international deaf leaders and current ideas and trends in deaf issues. Through these organisations new ideas and trends in education and other social policies were brought into the country and became included in the factors influencing policy development in Zimbabwe.

This period clearly illustrated the web-like network of relationships between IGOs (UNESCO and WHO) and INGOs and national NGOs surrounding issues relating to the education of deaf children. As has been illustrated this network was in a number of ways influencing the government’s policies, but it was generally beyond the government’s direct influence.

**Government education policies**

At the beginning of the period under consideration (1985-1989), Zvobgo (1986) noted that the education system needed to face the current economic realities and warned that the country could not spend more on education, but needed to make use of existing facilities. He also noted that there were other imperatives for social spending including health, rural development and resettlement programmes. As a result of austerity budgets there had been cuts in public spending and a directive for no new schools to be built after 1984. There was also a review of the free education for all policy and a consideration of charging fees for those able to pay. Also,
Zvobgo noted the need to expand within the existing facilities as well as the need to face the issues of growing youth unemployment and the consequent need to consider a more practically based curriculum emphasising practical skills.

Auret (1990) summarising the developments in the first decade also noted challenges to the education system regarding the relevance of the type of education offered as the curriculum was still highly weighted to an academic education. Auret (1990) also noted the continued divisions in education between classes as well as differences between urban and rural provision.

Dorsey (1989), also writing at the end of the first decade since Independence, argued that reforms had up to then delivered expansion, but a replication of the pre Independence educational structure, which was highly differentiated in quality and highly stratified in terms of life style chances. The government had been highly responsive in terms of the political imperative of expansion, but by implication less so in terms of transforming the education system, either to a socialist model as initially advocated or to a more appropriate model, responding to the intellectual and technical needs of the society.

At the 1980 and 1985 elections ZANU(PF) promised to establish free primary and secondary education for all regardless of race, sex or class, but these promises proved difficult to accomplish. However, in the first ten years they had achieved a rapid expansion in education at all levels. Even the World Bank (Maravanyika 1990) noted that Zimbabwe had achieved
the elusive goal of universal primary education. But there had, however, been a decline in secondary transfer and staying on rates in the second half of the decade.

The initial aims in education were the equalisation of educational opportunities, particularly with increased access to education for previously marginalised groups such as those in remote rural areas. In the early years this entailed large amounts of community input into building programmes in education particularly in rural areas. In the second half of the decade construction was frozen in favour of the upgrading of existing schools, with an emphasis on quality not quantity.

By the end of the first decade since Independence a number of problems had arisen in the education system as a result of the unprecedented educational expansion, these included:

1. unmet expectations of employment following education, a growing problem of youth unemployment particularly in white collar jobs
2. a decline in the quality of education as a result of rapid expansion
3. teacher shortages, as well as a brain drain from the rural areas
4. financial difficulties as education took larger percentages of the national budget against other competing social and strategic needs. In 1980/1981 education took 21% of the national budget in 1989/1990 this had increased to 23.1%. In addition there were educational costs to be
borne by the community and by parents in terms of buildings and exam fees and uniforms.

5. an increase in social differentiation (Dorsey 1991, Auret 1990).

A number of difficulties faced the education service at the end of the first decade: these included financial costs to the government and individual families, overcrowding despite the building programme, and the relevance of the curriculum. A number of writers (Auret 1990, Dorsey 1991 and Palmer and Birch 1992) were making recommendations for the next decade: these included making the examination system and curriculum more relevant, and changing attitudes and expectations of education.

Throughout the first decade there was a lack of appropriately trained teachers to sustain the expansion. The ZINTEC project produced over 8000 teachers by 1986 but there were still over 40% of teachers who were untrained. There were a number of overseas initiatives to train teachers including a link with Cuba to train science teachers.

**Government, health and rehabilitation**

By the end of the decade there was still unequal access to health care. The system still favoured the urban areas and the wealthier Zimbabwean. There had been considerable increase in health facilities but still division in terms of distances for rural people to travel to adequate health care. There was
also an imbalance in cost of health care, which was higher in cities and urban areas (Auret 1990).

**CBR pre school provision**

The government funded community based rehabilitation (CBR) programme started in 1988, although rehabilitation services were being developed at national, regional and provincial level prior to 1988. In 1988 the provision was extended to district and community level.

The early development of rehabilitation services and the training of rehabilitation assistants (RAs), later rehabilitation technicians (RTs), had a strong emphasis on physiotherapy and occupational therapy. In 1988 the first CBR project was started in Makoni District in Manicaland province. Seven more projects were started in each of the remaining provinces in the following years. These projects would eventually be extended to form the core of the Ministry rehabilitation provision.

To supplement community provision in 1988 a Children's Rehabilitation Unit (CRU) was set up at Harare Central Hospital. This central provision was funded by Save the Children (UK) and the University of Zimbabwe and acted as a referral point for children and their parents for whom additional investigation or rehabilitation was required, beyond that which could be provided locally. The unit was also used for training of RAs and others. It was here at the Children's Rehabilitation Unit in Harare that work with pre school deaf children and their families was started, by overseas speech therapists on volunteer programmes. There was still no
national training for speech therapists in the period 1985-1989. The provision developed in terms of short three to four day courses for parents and their children. These courses were later used in other health provinces of Zimbabwe and staff trained in this type of provision (House et al. 1990, interviews Portsmouth 1993, 1994). This essential new development in preschool provision for deaf children was, because of the lack of trained national staff, lead by overseas staff. This was another area where ideas and models of development were brought in from overseas.

National social and economic context

Politics

ZANU (PF) came to power as a mass movement party, but with Marxist Leninist aspirations, but without the means to change the economic structures. The new agenda of the 1980s reflected new economic priorities, for government expansion and more equal access to education, health and employment and for rural development. The rhetoric of the government was socialist, but the economic reality was capitalist. In line with its aims and ideals the government expanded its spending in the 1980s from 30% of GDP in 1980 to 44% of GDP in 1990.

By the end of the first decade of Independence there had been remarkable growth in education in Zimbabwe, but brakes were being put on further expansion for a number of reasons. As mentioned earlier there were other calls on government spending in terms of defence, health and rural
development. There was also an increasing debt burden, a balance of payment deficit, lower than forecast economic growth and, therefore, a need to curb rising government expenditure. The need for international loans and the subsequent structural adjustment programme will be discussed in the next section. However it needs to be noted that there were still demands for expansion and improvements in quality at all levels of education. Also with the annual rate of population growth at around 3% there was a growing need for educational provision.

In the early years after Independence educational spending took around 24% of government expenditure, by the late 1980s this had fallen to around 22%, but it was still the highest area of government expenditure. However, this expenditure had, with community and parental money brought about one of the most rapid expansions in education in Africa. Primary school enrolment rose by 178% in the ten years 1980-1990 and the number of primary schools rose from 2401 to 4501. In secondary education the growth was even more spectacular, enrolment in the same period rose by 950% and the number of schools rose from 177 to 1502 (Graham-Brown 1991).

Throughout the period of the late 1980s it became increasingly evident that, since Independence, although the government still retained control of the political system the control of the economy remained firmly in the hands of white settlers and the large multi-national companies. Although the government had introduced some state controls in the economy and had taken a strong role in the public sector, a mixed economy remained. And there was little evidence of a transformation to a socialist economy.
and with internal and external pressures on the remaining capitalist economy.

Capitalist economic reality

Economic and political development in Zimbabwe in the 1980s needs to be seen in the light of a world recession, several national droughts, instability in oil and other major export and import prices and the increasing costs of importing machinery. A number of factors had undermined the socialist aspirations of earlier years including:

1. the inherited structure of the Lancaster House agreement, allowing for retention of property and businesses and no nationalisation
2. ethnic rivalries during the first decade
3. the continued large scale presence of multinational companies in Zimbabwe, 80% of the economy was foreign owned, 50% of the arable land was retained by white farmers
4. during the 1980s Zimbabwe was in an area of considerable regional conflict, with unrest on two of its borders - those with South Africa and Mozambique, entailing large expenditure on defence and lowering of regional trade.

Thus powerful social and economic factors meant that there was a strong capitalist hold on the economy (Balleis 1993).

The economy of Zimbabwe had a high rate of growth in 1980-1981 followed by two years of decline. There was a further upturn between 1984
and 1985. The government's aims in the early years following Independence were rapid economic growth, full employment, price stability and equitable distribution of resources, but in the first five years there were problems of increased unemployment, particularly amongst school leavers, increased inflation, low investment and an increased budgetary deficit running at around 10% of GDP. The large public sector investments had drained national reserves and led to the need for loans.

In the second half of the 1980s the need for further loans was evident. Between 1981 and 1987 nine loans from the World Bank and four loans from the International Development Assistance fund had brought borrowing to US$6 million. Further IMF (International Monetary Fund) loans were sought by the government of Zimbabwe, but stringent conditions were placed on further borrowing.

Conditions of liberalisation and structural adjustment were developed in the early 1980s by the World Bank and the IMF aimed at achieving rapid economic growth and these were applied to most developing countries seeking loans. In many countries with a longer history of dealing with the IMF and the World Bank these conditions had placed great strains on the economy and caused hardship to most of the population.

Further loans from the IMF and World Bank of US$375 million were agreed and the government devalued their currency, cut development spending, reduced maize subsidies and froze civil service recruitment as well as cutting foreign currency allocations. Thus already Zimbabwe was trapped in IMF conditionality in order to borrow money for economic
growth programmes. Further loans were taken out with the IMF and World Bank between June 1987 and January 1988 in a deteriorating economic situation and demands for further austerity measures were imposed. These included a wage and salary freeze, and measures to stimulate foreign and national investment and encouraging key imports. The aim was to encourage investment, promote employment and encourage foreign currency (Balleis 1993, Berridge 1992).

In 1989 the government introduced trade liberalisation policies to promote investment in agriculture, industry, mining and commerce. It also aimed to increase foreign as well as national investment. These policies and loans were just the beginning before the full introduction of a Economic Structural Adjustment Programme (ESAP) in 1990. Although the government denied at the time that it was forced on them by the IMF and World Bank, what happened was in line with IMF economic programmes for most other developing countries. The economic crisis of the 1980s brought about partly through internal factors, and partly because of external economic factors, had after one decade of Independence forced the country to follow most of its African neighbours into economic dependency on international financial institutions (Palmer and Birch 1992).

**Conclusions**

By the end of this period a policy of integration in special education, including deaf education, was widely accepted. An integration policy for
the education of deaf children had fallen behind that for blind and physically disabled children for a number of reasons. First there was little pressure on the government from national non governmental organisations concerned about the education of deaf children. Second there was a lack of trained staff within the Ministry of Education to develop and implement new policy. Third there was a lack of trained teachers to deploy to new resource units.

This period saw an increase in the development of NGOs with an advocacy and rights based agenda, in particular with the formation of ASSOD. ASSOD was still in its infancy and was just developing its policy on education. It was however linking with the WFD and learning of overseas policies and programmes on sign language and education.

The conflicts regarding communications policy were evident in the change to total communication and the varying levels of implementation in schools. The oral legacy made it difficult for staff trained in one method of education to change to a new approach. There was also conflict and resistance to integration from the professional establishment used to special schools provision, and concerned about change and a possible dilution of their influence.

To conclude returning to the four propositions, regarding the internationalisation of the debates in deaf education, this period witnessed an increase in the international contacts in the field. There was an increase in the number of national staff training overseas and also in staff involved in pre school provision brought in from overseas to develop provision. This
period also saw the first contacts with WFD through the recognition of ASSOD and the regional contacts through the sign language seminar in Kenya. Also between 1985 and 1989 there was the continued funding of special education with money from SIDA. In this period deaf education benefited directly with funds being used in setting up the teacher training programme, for equipment for the new resource units and also for the sign language research.

This period witnessed a major shift in the balance of provision between NGOs and the government. The NGO special school provision was no longer the only type of provision, the NGOs had been unable to increase provision significantly since Independence and this period saw the government becoming an important player through its integrated provision. The government was important also in addressing other areas necessary in the expansion of provision such as in starting teacher training and in providing a national and regional management structure. The government was also able to secure additional funding through SIDA for the new units and the sign language research.

This period also saw the beginnings of a diversification in the NGO community regarding deaf issues away from the charity and professional organisations with the founding of an NGO run by Deaf people. The forming of a Deaf run NGO came a number of years after the founding of organisations run by blind and physically disabled people.

Between 1985 and 1989 the controversy regarding the methods used in the education of deaf children took a major change in Zimbabwe. Previously
all of the schools except one had been oral in method, while the last had changed fairly recently to total communication. In this period the government for the first time took a lead in seeking to set a national communication policy. The sign language research was started, but not completed and these two policies set the climate for change in this area, but neither was fully implemented or completed so on the ground in the schools and classrooms teachers were able to continue as they saw best.

Finally this period saw the significant beginnings of a deaf advocacy organisation run by and for Deaf people. It was started over forty years after the start of deaf education in the country. A number of issues may have contributed to the later development of this organisation, the low level of education achievement for deaf children, there was no secondary schooling up to this time and the problems in communication with other disability groups in order to learn from their experience.
CHAPTER 6

CONSOLIDATION AND THE DEAF DILEMMA

Introduction

In this chapter, covering the period 1990 - 1994, I describe the development of the government's integration policy in the education of deaf children. I follow the increased government involvement in critical issues in the education of deaf children: teacher training, communications policy, sign language research and hearing aid provision. This chapter analyses the development of ASSOD, the Association of the Deaf, and its growing involvement in issues relating to the education of deaf children. I also consider the role of NGOs in the development of disability legislation. The international influences of organisations such as UNESCO, SIDA and WFD are also discussed in the light of Zimbabwean developments. Finally in this chapter I discuss the political and economic context of the period in the light of the economic constraints brought about by the economic structural adjustment programme (ESAP).

In this chapter the evidence for a Deaf dilemma (Miles 1995) is discussed in relation to international and Zimbabwean developments in deaf education. Miles (1995) considers that "deafness and deaf education... (are) arguably, the most neglected aspect of special/integrated education (p. 7)". She argues that the special school model of education
for deaf children is unsustainable and only reaches a minority of children. but equally many professionals and Deaf people "say 'no' to integration". Miles (1995), speaking of developments in all of southern Africa, notes that the lack of professionals, and the fact that some deaf educators jealously guard their knowledge, are major barriers to development. This coupled with a poor understanding of deafness within the disabled peoples' movement, and the slower organisation of Deaf peoples' groups, has limited the pressure for change from such NGOs.

Finally Miles (1995) notes the importance of developing sign language and improving standards in deaf education.

If Deaf education is to improve, fundamental changes need to be made in schools for Deaf children and in the training of teachers. Partnership is needed between Deaf people and professionals in order to develop sign language and revolutionise deaf education (p. 8-9 Miles 1995).

This chapter focuses on the particular issues that characterise the Deaf dilemma in both the Zimbabwean and the international setting, such as the tensions and conflicts between: special school and integrated provision, NGOs and government, professionals and Deaf people, and oral or bilingual communications policies.
Expansions in Deaf Education: the Role of Government and NGOs

The Role of Government

During this period despite the need for financial constraints in overall educational developments in Zimbabwe, in the area of education for deaf children there was considerable expansion in government provision. The number of resource units rose from 23 in 1990 to around 46 in 1993. The teacher education programme continued at diploma level, and in 1994 a new degree level course in special education was added. Work on the sign language research continued, but with few obvious results for deaf children in the classroom. Regarding hearing aids the new Educational Services Centre initially for a new braille printing press was extended to include a hearing aid services centre. This centre was just beginning its work in 1994.

In the wider arena the government passed its first disability legislation in 1992, the Disabled Persons Act that enshrined equality of opportunity for all disabled people including in the field of education. The new Disability Board provided for in the Act had not started its work in 1994, although members of the board had been appointed.

Further work regarding rehabilitation provision for deaf children was also put into action by the rehabilitation unit of the Ministry of Health and the identification, assessment and support work with pre school children and their families continued to expand.
Expanding Resource Units

The expansion of resource units for hearing impaired children was considerable in this period as table 6.1 below indicates. One of the major drives towards expansion had been the increase in the number of deaf children being identified, from a number of sources, and being referred to the SPS, Special Education Unit for placement.

Interviews with a number of regional staff from the SPS as well as Ministry and ex Ministry staff indicated some of the thinking behind the expansion of the resource units as well as the procedure for opening new units (interviews with Barrett 1994, Mpofu 1994, Afarko 1994).

Table 6.1 Numbers of Resource Units for hearing impaired children in Zimbabwe 1990-1994

<table>
<thead>
<tr>
<th>year</th>
<th>number of units</th>
<th>number of pupils</th>
</tr>
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<tbody>
<tr>
<td>1990</td>
<td>23*</td>
<td>167*</td>
</tr>
<tr>
<td>1991</td>
<td>26**</td>
<td>191**</td>
</tr>
<tr>
<td>1992</td>
<td>40***</td>
<td>253***</td>
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** These figures came from the UNESCO report 1992
*** These figures came from the Schools Psychological Services section Annual Report for 1993.
^ These figures obtained from interviews with ministry staff, academics
The units were being opened at a rate of 2-3 per region per year in the five years, 1990-1994. Once a number of hearing impaired children were identified in a particular area then a suitable school to take a unit was found. The children were increasingly being referred to SPS from a number of different sources: hospital staff, doctors and speech therapists, community based rehabilitation staff, school and pre school teachers as well as a number of direct referrals by parents. There was no universal screening of children for deafness during this period.

In some regions finding appropriate schools to take a resource unit was a difficulty. Firstly there needed to be a spare classroom and in many schools with hot seating arrangements (two shifts of pupils, one in the morning and one in the afternoon) this was a problem. There needed to be a sympathetic headteacher and staff, and it needed to be within a reasonable distance for up to seven deaf children known in the area. Once the school was identified a teacher needed to be found. Many new teachers from the United College of Education (UCE) course were deployed to new units in a number of areas. Also, funding for the extra teacher needed to be obtained from the planning department of the Ministry. Once the school and teacher had been identified then training was given to staff as well as information for parents on the needs of the deaf children. As the programme of opening new units gathered pace, a number of schools, particularly in urban areas, were asked to take two resource units for deaf children. These made it possible for teachers to share resources as well as preventing the isolation of the specialist teacher (interviews with Barrett 1994, Afarko 1994).
A number of problems were identified by teachers and regional staff regarding the current integration policy. There was no national, forward planning regarding the opening of units. A unit was opened in an area when a number of deaf children were identified in the vicinity. There were no screening programmes to identify children on entering school or earlier. Regarding staff, it was not considered appropriate, by a number of senior teachers and lecturers, to take newly qualified staff straight from college and place them in a unit with little support.

There were a number of constraints to expansion of resource units. The number of units opened in each region in a year was limited by the number of staff trained at UCE, usually 15-20 per year. With 9 education regions this meant 2-3 trained teachers of the deaf per region per year. There were also problems, in common with other areas of education, of placing staff in remote rural areas. Many teachers were reluctant to go to rural schools, preferring jobs in the urban areas (interviews with Moyo 1994, Afarko 1994, Barrett 1994).

The numbers of referrals of deaf children were still increasing in 1994 but there was no knowledge of what the total number of deaf children might be in the country as a whole or any one particular region. There was therefore limited data available for planning future services. Regional offices’ plans for opening new units were reacting instead to increased referrals and were making best use of the limited number of new staff deployed to their region each year (interviews Afarko 1994, Barratt 1994).
The lack of any recent survey data on the incidence of various disabilities, including deafness, amongst pre school and school aged children was an added constraint to future developments. Without a good estimate of current and possible future populations of deaf children the regional officers and Ministry officials could only react to waiting lists and demands rather than plan an comprehensive national service.

**Staff Training**

The training of staff to diploma level at University College of Education (UCE) in Bulawayo continued in the 1990s much as it was set up in the 1980s. The number of teachers of deaf children trained rose from 15 to about 20 per year, but this was identified as a limiting factor in the expansion of the service.

In 1994 a bachelor’s level degree in special education was started at the University of Zimbabwe. This course was for qualified and experienced special education staff who had been working in schools and units for a number of years. The two year full time course offered a common first year in special education, with options in the second year in hearing impairment, visual impairment, "mental retardation" and learning difficulties. This course was aimed at providing specialist staff for work in monitoring, evaluating and policy making in special education programmes working at senior levels in the Ministry and regional offices (interview Peresuh 1994).
In addition to the longer full-time courses the Ministry provided shorter courses, as well as workshops and inservice courses for practising teachers. Also during this period (1990-1994) a number of Zimbabweans were sent overseas to the UK to train as speech therapists. Once qualified a number of speech therapists were to return to Zimbabwe to work in education, and others were to work in health. Staff continued to be trained overseas in the UK on SIDA and British Council funding. In 1990 a bilateral arrangement with CIDA (Canadian International Development Agency) allowed for a number of staff from the University of Zimbabwe and teacher training colleges to train on post graduate courses overseas, in Norway and Canada.

Although the period covered in this chapter saw an increase in specialist teacher training, at diploma level, for classroom teachers and the introduction of a bachelor’s qualification for more senior staff, there was still a shortage of staff with an in-depth knowledge of the educational needs of deaf children. It was still the case that developments in deaf education within Zimbabwe were dependent on staff at higher levels in the Ministry of Education and in teacher training needing to go overseas for postgraduate training at masters and doctorate level (interviews Chiswanda 1993 Peresuh 1994). By the mid 1990s senior staff involved in the education of deaf children at Ministry and at senior teacher level had been overseas to the UK, Australia, Canada, Scotland, Norway Finland, Denmark, Sweden and the USA for additional training. In a period of considerable changes internationally in the education of deaf children with a transition from oral methods to total communication and then the consideration of bilingual approaches the wide variety of overseas
experiences of senior staff has possibly lead to some uncertainty regarding the best way forward in Zimbabwe.

Sign Language Research

During this period the sign language research continued to collect data and analyse the material collected. However apart from the printing and distribution in 1991 of number, alphabet and mathematical symbols charts the work on the dictionary progressed slowly. By 1994 the analysis, of all the individual words collected on video from deaf children and adults, was nearing completion. There had been considerable changes in the team of 20 or so who had worked on the analysis. There was some limited contact with ASSOD, as well as another organisation of deaf people. In May 1994 a ministry artist was being commissioned to draw the illustrations for the dictionary. There were plans to distribute the dictionary to all schools and units with deaf students once it was complete, but no mention was made of training for teachers in the fluent use of sign language (interviews with Rinashe 1994, Chimedza 1994).

The person involved in setting up the research, although in 1994 a university lecturer, was still involved in the analysis. His hopes for the future of the research, and the use of the dictionary, were to have sign supported English used with more academic deaf children, and have sign language used with less able deaf children (interview Chimedza 1994).

Speech therapists and Ministry of Health rehabilitation staff were anxiously awaiting the publication of the sign language dictionary, as they
were operating a total communication policy regarding pre school deaf children, but had their hands tied in the teaching of sign language to parents and young deaf children, because of the lack of a national available dictionary (interviews Chidyausika 1994, Portsmouth 1993, 1994, Jefferson 1994).

Communications Policy

The situation regarding a communication policy to be adopted in schools and resource units in the education of deaf children remained much the same as in the previous five years. The education officer (hearing impairment) had indicated in workshops and in service training the desire to change from predominantly oral education for deaf children to a policy of total communication. However, most heads and staff with additional specialist training were trained to teach orally. There was at the time little knowledge of Zimbabwean Sign Language amongst teachers and little contact with the Deaf community in most schools. One school was already using sign language in its work with deaf children, but had been discouraged by ministry staff from using members of ASSOD to teach sign language to the staff (interviews Peterson 1993, 1994).

In 1994 the situation, in the schools and units that I visited, and in the interviews I conducted with teachers and staff, seemed confused. The school that had adopted a total communication policy in the 1980s had continued and sign language was used extensively in the school, although there were a number of teachers in the school who still used a predominantly oral approach. In other schools the situation was patchy.
Some teachers used little or no signs in their teaching and contact with deaf children, others had learnt to sign from the children and could communicate to some extent in sign language.

In the teacher training course at UCE the syllabus had changed little since it was written in the mid 1980s and therefore did not have a component in the course related to sign language or alternative communication methods. The 1994 group of students contained a number of teachers who had worked with deaf children already, and these teachers were comparing signs and teaching others with no knowledge of Zimbabwean Sign Language. The lecturer had been orally trained and was not well placed to lecture on total communication or sign language. He did indicate that in recent times the Ministry of Higher Education had indicated a need to change the syllabus for the course to reflect current practice (interview Moyo 1994).

Although issues relating to the education of deaf children concerned a number of different Ministries and organisations within Zimbabwe schools, rehabilitation and resource units, colleges and charities there was little evidence from the interviews of constructive dialogue regarding important areas of development. In the case of teacher training there was little evidence of communication between the Ministry of Higher Education and the Ministries of Education or Health particularly regarding the sign language research or the communication policy.

The lack of continuous strong leadership in the Ministry of Education regarding the education of deaf children (in 1994 there was no Education
Officer, Hearing Impairment in post) had been a contributing factor to poor interministry dialogue and slow development on a number of key initiatives, for example the sign language research.

_Educational Services Centre (ESC)_

During my second period of fieldwork (April and May 1994) the Educational Services Centre in Harare was just starting its work as a braille printing press and as a hearing aid maintenance laboratory. Staff were just being appointed and teachers, heads and regional staff were beginning to learn about the centre and its future work.

The centre was originally planned as a braille printing press with the cost of the press to be funded with SIDA money. A Swedish consultant had visited the country in 1991 and again in 1993-4 to advise on the type of press and its installation. The extension of the Educational Services Centre to include a hearing aid maintenance laboratory came a little later and was the result of information and complaints to the Ministry of Education regarding the provision of aids, repairs, availability of parts such as leads and ear pieces and the provision of ear moulds. In 1994 there were still problems in most schools and resource units in getting the impressions, ear moulds, leads, ear pieces and batteries needed to keep aids working and properly fitted.

A number of teachers were sent overseas in the later 1980s to gain experience in hearing aid repair and fitting and ear mould manufacture. Also in the late 1980s and early 1990s some of the SIDA money for special
education was used to buy and import body worn hearing aids. In 1990/1991 a large number of Philips and Oticon body-worn hearing aids were imported and distributed to individual schools and also to regional offices for distribution to deaf children in resource units (interview Barratt 1994).

The hearing aids were however Ministry of Education property and were only provided for pupils to use in the classroom. In residential schools the aids were not for use in out of classroom hours. For day pupils at special schools or those in resource units again the aid had to stay in school at the end of the school day. If pupils wanted an aid to wear at home or in out of school hours in a residential school then the family need to buy an aid from a private hearing aid dealer. A number of people commented on this as being a problem as children had no aid for most of their day "a gross misuse of hearing aids" (interviews Chigumo 1994, Moyo 1994).

Regarding the issuing of hearing aids there were a number of people who questioned the criteria for dispensing hearing aids (interviews Afarko 1994, Peterson 1993, 1994). Moyo (interview 1994) considered that many SPS staff, without a full appreciation of the nature of hearing aids, felt that any hearing aid could be given to any deaf child. This was without any understanding of the extent or nature of the hearing loss. Some of the children in schools and units did not have full or recent audiograms and so it was difficult to provide an aid suited to their loss. There was felt to be little recognition of the need to fit an aid to a child individually. There was also thought to be little understanding of the need for training in the use of an aid and the need for regular follow up, maintenance and repairs. There
was also very little understanding in the general population about the benefits and problems associated with hearing aid use (interview Portsmouth 1994).

Speech therapists with limited experience of providing aids to young pre-school deaf children noted that the aids were not fully used by the child and parents. In some cases it was put away for use on special occasions. For most families the cost of a private hearing aid and ear mould was prohibitively high. Also batteries were expensive and were needed regularly if the aid was to be worn continuously (interviews Portsmouth 1993, 1994 and Jefferson 1994).

The level of hearing aid use I observed in the schools and resource units that I visited was very varied. In the school that had its own laboratory, a gift from a German charity, there was a high standard of hearing aid use. with children having their own aid and ear moulds. Similarly, in a previously whites and coloured school the head told me they enjoyed good audiological services. In the past, audiological services to the two whites and coloured only schools, were provided by the one private hearing aid dealer in the country, funded by the Lions Club (interview Evans 1993). However, in one school there was a problem regarding the provision of ear moulds and this had an obvious effect on hearing aid use. Children were being given old ear moulds or temporary tips, and a number of children did not have hearing aids. Although a member of the staff had received further training overseas he had no access to impression-taking or ear mould making material and also lacked some of the requirements for repairs of
existing aids for example leads and ear pieces. The school also had no budget for ear mould manufacture and batteries.

The situation regarding hearing aids and audiological services in Zimbabwe, although in its infancy, was expanding. There were considerable advances in government provision and responsibility in the provision of hearing aids and repair services. However policy was not clearly developed and seemed to be going ahead on an ad hoc basis. The provision of hearing aids to all deaf children or even a selected number of deaf children in Zimbabwe is a major undertaking, problems exist in a number of areas:

- All the technology and equipment came from overseas, and was dependent on donor support.
- The technology of hearing aids, audiometers, etc. could not be provided in a one-off manner. Aids and audiometers required on going maintenance and repair.
- Hearing aid users, particularly children, need regular checking and supply of new ear moulds if the aid was to be used to its maximum. As children grow they need new ear moulds. Mould manufacture is a relatively complicated technical process involving taking an impression of the ear, making the mould and then the fitting of the mould to the child. Each stage needs trained staff and specific equipment, supplies and machinery.
- For optimum use children needed to have their aids fitted at as young an age as possible. In 1994 there was no government provision for pre school children.
• Children and their parents needed follow up services to ensure good use of the aid and an understanding of the possibilities and limitations of hearing aids.

Hearing aids are unquestionably of value to many deaf children, but they were expensive for the government to provide. Required considerable technical and professional support and for success needed to be provided by the government to pre school children and to school aged children for out of classroom use.

The intention for the new Educational Service Centre was for it to provide a mainly centralised service based in Harare, but with the provision of a Land Rover to meet the need for services away from the capital. A number of people interviewed in regions away from Harare were in favour of a more de-centralised service, with greater provision of ear mould manufacture and repair and maintenance in the regions. In the years to come it will be interesting to compare provision in and around Harare with areas further away. Also a number of staff interviewed in the Ministry of Health rehabilitation services were awaiting developments regarding the use of the ESC for their service for pre school deaf children. To duplicate the service for health would be an unnecessary copying of services, but it awaits to be seen how provision will be made for clients from another Ministry.

A number of staff involved in the education of deaf children were questioning the government policy of an aid for every deaf child. One head questioned the use of aids for profoundly deaf children considering it an unnecessary dimension, as well as expensive for both parents and the
government (interview Peterson 1993, 1994). Speech therapists were also concerned about the provision of hearing aids to pre school deaf children without good audiological services and good follow up provision (interviews Portsmouth 1994, Chidyausika 1994).

The government had taken a "big step forward" in this period in becoming involved in the provision and maintenance of hearing aids for deaf school children. This was a complex technical area of deaf education and required not only a regular supply of aids, but also on going supplies of parts and ear moulds, a technically trained staff as well as ongoing education for deaf children, their parents, and the non specialist staff involved in the service. The added difficulties were that hearing aids were relatively expensive to provide and the aids and all the parts and equipment need to be imported.

In the past the provision of aids to schools was on an ad hoc basis with imports of aids from charities, churches, and individuals. Some schools had enough technical support and money to sustain a hearing aid service for their pupils, whereas others did not. Most schools did not have easy access to overseas companies for the supply of parts. To ask the new resource units to attempt to support their own hearing aid provision would have been virtually impossible.

The provision of aids and technical equipment was still highly dependent on funding from a donor, now SIDA. Funding from SIDA and CIDA had also been used to send staff overseas for further technical training. It is unsure for how long this financial support by SIDA to special education will continue and although a system for aid provision and repair and maintenance maybe put in place, maintaining it through government.
funding alone in the future could be expensive. A few have voiced
questions over the need for hearing aid provision for all deaf children.
These were people concerned with a total communication approach to the
education of deaf children, where sign language could play a major part in
developing communication skills. This option was not under consideration
by Ministry officials or the majority of teachers and heads interviewed.

**CBR pre school deaf children**

Work with deaf children in community based rehabilitation began in 1986
with the opening of a provincial centre, the Children's Rehabilitation Unit
(CRU) at Harare Central Hospital. The unit, funded by the Ministry of
Health, and Save the Children Fund (UK), was run by the Ministry and
the Department of Paediatrics of the University of Zimbabwe. The unit
saw children under 12 for a wide variety of conditions, including
developmental delay, cerebral palsy, Down's Syndrome and neurological
difficulties as well as sensory disabilities. The unit's staff included
physiotherapists, occupational therapists, a speech therapist as well as
medical staff, doctors and nurses. Most patients were seen on an out
patient basis, but some came into the unit for intensive rehabilitation for a
short period of time. The work with deaf children at CRU was begun by a
British speech therapist, and had been carried on by an Australian woman.
Both were placed in their post by the volunteer agency ICD (International
Co-operation in Development) formerly CIIR, as there were no trained
Zimbabwean therapists available at the time. This key development in pre
school provision for deaf children was therefore, by necessity, initiated by
specialist staff from overseas and eight years after the unit had opened
there were no Zimbabwean nationals working as speech therapists with deaf children in the country.

In 1988 Community Based Rehabilitation projects were started in 9 districts around the country under the control of the Ministry of Health. These had expanded to 30 districts by 1994. The aim of community based rehabilitation projects was to use local support and leadership to develop programmes of rehabilitation for people with disabilities and difficulties in learning. The projects started with 3-4 week workshops and covered issues such as prevention, attitudes to disabled people, services in health and education. A house-to-house survey was undertaken as part of the workshop. The programmes encouraged local leaders, NGOs and volunteers to work with them. The main staff involved in CBR projects were the rehabilitation technicians who were trained to recognise young deaf children, assess them and then refer them to district or provincial hospitals for detailed assessment.

The role of the speech therapist, at Harare Hospital, and also at the Mpilo Hospital CRU in Bulawayo, was to do a detailed assessment of the child and then to work with the child and their family in encouraging communication, an understanding of deafness and working with the child (interviews Portsmouth 1994 and Jefferson 1994). The speech therapist in Harare has audiological equipment to do free field and pure tone audiometry, she also had a limited supply of donor hearing aids. However there were few facilities for repairs or maintenance and no facilities to make ear moulds. The local private hearing aid dealer supplied the ear moulds. The unit in Bulawayo has limited access to a local school for ear
moulds. Most children were not fitted with hearing aids although for some with detectable residual hearing there was the provision of a low technology funnel and tube aid. The rehabilitation services had a policy of using a total communication approach in the training of pre school children. This included the use of Zimbabwean Sign Language and spoken Shona or Ndebele (the language of the home). The work had been hampered by the lack of the Zimbabwean Sign Language dictionary although in Harare deaf adults were used in the sessions to teach parents signs.

Once the children reached 5, school age, they were all referred to the Ministry of Education Schools Psychological Service (SPS) for assessment and placement. A number of pre-school facilities for deaf children had developed in the 1990s. The two schools for deaf children in Harare ran pre school sessions for a limited number of deaf children. A number of deaf children were assisted in getting a place in a local pre-school. In Mutare a small pre school class had been set up by an expatriate teacher of the deaf.

The SPS link with the CRU in Harare Hospital assisted the parents in finding a school place for their deaf child. All the schools had long waiting lists and parents often had their child’s name on the waiting list for all of the schools. Not all pre-school children got a place in a school for deaf children. Increasingly children were being placed in resource units nearer their homes, as these opened.
The Chief Therapist at the Ministry of Health, Mrs Chidyausika (interview 1994), although encouraged by the expanding work with deaf children, highlighted a number current difficulties.

- Many children were diagnosed late, some even after school entry age.
- Hearing aids were expensive beyond the means of most parents, there was also limited understanding of hearing aids among the general population,
- Until recently there had been little training for rehabilitation technicians (RT) in speech and communication problems. Their course was stronger on physiotherapy and occupational therapy. This had been addressed with the appointment of an overseas speech therapist at the RT training school. There was a lack of national speech therapists although seven were being trained in the UK in 1994 for deployment in the Ministries of Education and Health.

Mrs Chidyausika (interview 1994) was concerned that provision for deaf children was not developing as smoothly as for other groups of disabled children and hoped to have interministerial discussions in the future regarding the provision of hearing aids, the sign language research and the differences in communication policy between Ministries. She was also concerned about levels of support for deaf children in ordinary pre schools and the long waiting lists for school places.

In 1994 the speech therapists wrote a draft document for the Ministry of Health on guidelines for services for pre-school deaf children. The document included a number of recommendations, including early screening, assessment and referral of pre school children, improved training
for health staff in identifying and working with young deaf children and their families, the use of speech therapists in provincial and regional centres and their role in training. The document recommended the implementation of hearing aid services only when a good level of audiological services was in place with a good provision of aids and back up services, and better training of staff in the use of and teaching of sign language.

Although services for pre-school deaf children were firmly established in Zimbabwe, provision in 1994 was only reaching a small percentage of the total population. Although policy and structures have been put in place for pre-school work with deaf children as one speech therapist told me "the sustainability of what is happening is touch and go" (interview Afarko 1994).

Special Education Policy Development

A number of government special education policies were changed or modified in this period and government objectives were articulated in a number of documents, including the Ministry of Education and Culture Annual Reports, a document presented at a UNESCO regional meeting and in specific policy documents.
Ministry Annual Reports

The Annual Report for 1990 (Ministry of Education and Culture 1992a) noted the arrival of 2 Land Rovers for use by the Special Education Unit for its outreach work in rural areas. It also noted the arrival of equipment, supplied from the SIDA funds, for the increased number of resource units. 1990 also saw the launch of the Canada General Training Facility and Short Term Training courses. Part of the Canadian General Training Facility was used to train staff in the repair and maintenance of special education equipment. SIDA approval was obtained in 1990 for a Maintenance Laboratory for equipment for children with sensory disabilities.

The Ministry of Education and Culture 1991 Annual Report (Ministry of Education and Culture 1993) noted further work on the SIDA funded maintenance laboratory that was to include a braille printing press. A Swedish consultant advised the Ministry on equipment. The link between Sweden and Zimbabwe was reinforced by the visit to Sweden of three senior Ministry staff, to look at facilities for special education. Further SIDA funding was used for equipment for special schools and units as well as for Zimbabwean participants to go to the Daniko Special Olympics in Hong Kong.

Government UNESCO Report

This report presented by the Ministry of Education at the UNESCO Sub Regional Seminar on Planning and Organisation of Education for Children
and Young People with Special Needs, in Botswana, in 1992, highlighted six major policy strategies for special education in Zimbabwe, including:

- Early detection, intervention and prevention of "handicap"
- Integration of children with "handicaps" into ordinary school whenever possible
- Development of local, relevant training facilities at college and university level
- Procurement of equipment, funds permitting, and development of resource centres in order to localise integration efforts
- Establishment of government personnel services to monitor and coordinate programmes
- Assisting non governmental organisations as funding permits (Ministry of Education and Culture 1992b).

This document confirms the government's commitment to integrated provision:

The Ministry of Education and Culture places great emphasis today on the integration of children with special educational needs into ordinary schools and into the community, so that they can also benefit from provisions that are available to their able-bodied peers (p. 3 Ministry of Education and Culture 1992b).

This policy of integration meant that "no new institutions are encouraged", instead children with special educational needs were being educated in special classes within ordinary schools as well as in resource units or classes. The resource units were classes for children with one particular disability. The children were brought together from the
surrounding area and placed in the unit with the specialist teacher. The government's view was that the ultimate goal of integration was for children to be taught in the mainstream grades and forms by ordinary standard teachers with the help of the specialist teachers. The government used the term functional, locational and transitional integration to describe its plans for integrated education.

Locational integration included integration where the child mixed socially with their peers, but was taught all academic lessons in the unit. From this type of locational integration the child might have gone on to transitional integration when they took lessons both in the resource units and in the mainstream. Functional integration, when the child was fully integrated in the mainstream was considered the ultimate aim of integration, social integration was considered as being a reception stage (p. 8 Ministry of Education and Culture 1992b).

Ministry policy documents

The government also issued policy decisions regarding special education through the use of circulars and specific policy documents. The Ministry of Education and Culture Secretary's Circular Minute No. 36 addressed the issues of placement procedures into special classes, resource units and special schools. The circular defined "Children with special educational needs" as:

those children who cannot be expected to benefit from schooling without the provision of either special equipment or special teaching or some combination of these. Handicapping conditions may relate to vision, to
hearing, to speech, to mobility, to general mental competence, to emotional status, to extreme environmental deprivation and to a combination of these (Ministry of Education and Culture 1992c).

The document noted the placement procedures, as well as the types of special educational provisions. It also included information on responsibilities for special education, the opening or closing of classes and units, removal from special education programmes, examinations and age limits for disabled children in special programmes. This circular represented the ministry's detailed instructions to regional directors and heads of primary, secondary and special schools on the day to day administration of special education in Zimbabwe.

By 1994 the government had clear and detailed policy aims and objectives in special education, with procedures for expanding provision. It had also decided on the children for whom services were to be provided as well as on entrance and removal from programmes.

*Disability Act*

The Disabled Persons Act (Government of Zimbabwe 1992) was the result of nearly 10 years of lobbying by NGOs. The lobbying started in the early 1980s when NCDPZ began raising the issue, through NASCOH, of the high importation costs for aids and appliances for disabled people. NASCOH had on its executive committee a number of ministry officials and the issues were raised with them. With the establishment in 1986/87 of the Interministerial Committee the issues were brought to a wider
government audience. The original drafts of the bill were much longer than the final act.

The Act covers the prohibition of discrimination against disabled people in employment and the denial of access to disabled people to public premises, services and amenities. The main provision of the act, however, is the setting up of the position of Director of Disabled Persons' Affairs and also a National Disability Board. The post of Director of Disabled Persons' Affairs is a public appointment with direct responsibility to the Minister of Labour, Manpower Planning and Social Welfare. The Director's role is to formulate proposals, liaise and co-ordinate the work of the Disability Board, liaise with other ministries and local authorities, and co-ordinate the activities of non governmental organisations.

The Disability Board, as referred to in the Act, was to consist of not more than twenty people: ten members appointed by non governmental organisations, one member each from the Ministries of Health, Education, Local Government and Labour, also employers and trades union representatives are included, as well as coopted members. The main functions of the Board are:

- to formulate and develop policy to achieve equal opportunities for disabled persons in education, employment, sports and recreation, and cultural activities
- to ensure full access to community and social services,
- to enable disabled people to lead independent lives,
- to effect any international treaty or agreement relating to the welfare or rehabilitation of disabled persons to which Zimbabwe is a party.
• to encourage rehabilitation, employment and income generating schemes for disabled people, encourage and secure rehabilitation services within local communities, encourage and secure vocational and employment training, co-ordinate services in welfare and rehabilitation.
• to provide as far as possible aids and appliances,
• to provide skilled staff for welfare and rehabilitation services (Government of Zimbabwe 1992).

The Board also has the function of estimating and reporting on the cost of proposed measures, to review and evaluate services, but the Board is not able to incur any costs on behalf of the state except with the approval of the minister.

By mid 1994 the Board had only met a few times as budgetary allowances had not been made for it in the previous financial year. The funding for the work of the Board began in the financial year 1994/1995. There was some anticipation of the work of the Board, but also concerns expressed regarding the changing role of the many members of the Board from, working within pressure groups to acting as policy makers and advisers to government.

**NGO Developments**

The most significant development in terms of the education of deaf children in the period 1990-1994 was the expansion in the activity of the Association of the Deaf (ASSOD). Although the work of ASSOD had
seemingly little effect directly in the classroom, they were beginning to articulate the aims and wishes of Deaf people regarding education and the use of sign language. A Deaf peoples' organisation was beginning to challenge the domination of teachers and other professionals in the area of deaf education. Other NGOs continued to adapt to changes in government policy and recent legislation, but did not have a major impact on educational developments.

ASSOD

The Association of the Deaf (Zimbabwe), ASSOD, grew in size and developed its work in a number of different areas during this period. Its work on Deaf people's rights, in organising the first celebration of International Deaf Week in 1993 and the successful lobbying for some sign language to be included on television, helped to increase the profile of ASSOD in the country.

ASSOD's aims were to advocate equal opportunities for Deaf people, through challenging social attitudes to deafness, advocating the use of sign language as the natural language of Deaf people and encouraging opportunities in education and employment.

ASSOD was a member of the World Federation of the Deaf, as well as NASCOH and the Zimbabwe Federation of Organisations of the Disabled. The association had received seed money and a salary grant from the Ministry of Labour, Manpower Planning and Social Welfare, as well as funding from the US embassy Self Help fund. Canadian funds, National
Breweries, UNESCO and ILO. It also receives funds from membership fees (ASSOD 1993, interview Mazhande 1993).

As a member of WFD, ASSOD had been active in advocating WFD policies on the recognition of sign language, the rights of deaf people to use sign language as their first language and the recognition of the rights of deaf people for equal status. They also advocated a number of specific priorities in Zimbabwe namely:

- interpretation into sign language of public information to give accessibility to deaf citizens
- research and study of the life, culture and language of the Deaf in Zimbabwe
- equalisation of opportunities in all aspects of life including more educational centres (ASSOD 1993).

**ASSOD and Education**

ASSOD in the early 1990s was active in a number of areas, but one area of its work that was distinctive was in education. The views of ASSOD on the education of deaf children seem to have been drawn out of the personal experiences of ASSOD members, together with the views of the WFD.

ASSOD recognised the low level of enrolment in education among deaf children in Zimbabwe, approximately 1,100 deaf children in education in 1993. ASSOD used an estimate of 20,000 deaf children in Zimbabwe, although the Disability Survey of 1982 estimated the total to be 5,000. ASSOD was aware of numbers of deaf children without school places and
had been informed by the Ministry of Education that expansion was hampered by the lack of trained teachers and hearing aids.

ASSOD had concerns about education in a number of key areas

- Until recently no deaf children were receiving a secondary education. All went from primary education to vocational training.

- The history of deaf education in Zimbabwe has been oral. No school in 1994 had officially embraced the use of Zimbabwean Sign Language (ZimSign), although one school was actively following a total communication policy, with the use of sign language.

- ASSOD was concerned about the trend towards integrated education for deaf children, fearing isolation and lack of contact for deaf children with the wider Deaf community and culture. Also they had worries about the acceptance of resource units in some schools, and that units may in fact be more expensive in their need for equipment and special services, as the units were spread around and each only provided for a small number of children.

Instead ASSOD's aims in the education of deaf children had been developed to include:

- Schools for deaf children being fully bilingual with ZimSign as the first language and medium of instruction, with all staff being bilingual to enhance communication between staff and pupils.

- All teachers and other school staff to have a knowledge of sign language, also staff in public services such as nurses and court officials to understand sign language.

- Schools for deaf children organised so that pupils of all ages can meet
• Pupils taught about the history and culture of the Deaf community and given every opportunity to grow up in a signing environment. Schools to provide secondary academic education as well as vocational training (ASSOD 1993).

ASSOD has advanced its policies on education in a number of ways, through interviews and lobbying of Ministry of Education staff, through discussions with SIDA the main funder of special education about its policy, though limited co-operation with the sign language research and advocating the use of ZimSign in education. Also ASSOD has used the media and public occasions such as the celebration of International Deaf Week to get its ideas to a wider community.

Attitudes to ASSOD
In a relatively short while ASSOD had established itself as an organisation of Deaf people with both a welfare and political role, particularly in the area of education and sign language research. In taking a clear stand in favour of bilingual education for deaf children and the inclusion of Deaf people in the collection and analysis of data for the sign language research, it had set a path in opposition to government policies. The acting chairman of ASSOD was active in meeting with Ministry officials, as well as approaching the SIDA representative who co-ordinated the SIDA Ministry of Education funding. He also organised a demonstration outside government education buildings about the lack of school places for some deaf children.
In response ministry staff, academics and heads told me of their view of ASSOD and in particular its acting chairman. An academic (interview Charema 1994) told me that the Ministry would consult ASSOD on certain issues, but "will not consider what they say as final. it will not affect the ministry's decision". A Ministry special education officer (interview Oderinde 1994) told me that ASSOD were seen by the Ministry as "a pressure group", that its chairman "was a problem". The SIDA representative, Troedsson, had been visited by the chairman of ASSOD who was concerned about the sign language research and the lack of participation of Deaf people. Mr Troedsson (interview 1994) felt unable to comment on details of government spending, also that he was not knowledgeable enough to evaluate the situation. But he spoke with Ministry of Education officials who informed him that ASSOD were not representative of the wider Deaf community and that they were now working with another organisation of deaf people. With two members of ASSOD appointed to the National Disability Board it will be interesting to see how ASSOD's aims are pursued in this policy making body.

There were however a small minority of senior teachers and academics sympathetic to the work and aims of ASSOD. These mainly younger staff with less loyalty to an oral tradition in deaf education, could have in 1994 represented the beginnings of some acceptance of ASSOD's ideas in the professional field of hearing deaf educators. The majority of teaching staff I interviewed were in favour of an orally based assimilation model of deaf education and did not recognise or value the views of the Deaf people and their potential contribution to deaf education.
Other NGOs

The other major organisations in Zimbabwe that have been influential in changing attitudes to disabled people and in effecting political change have been NASCOH, The Jairos Jiri Association and NCDPZ.

NASCOH

NASCOH during this period had been active in working on the disability legislation, writing drafts and approving rewrites. Also it had increased its work with the Interministerial Committee. The director of NASCOH, Mrs Gotera (interview 1994) considered one of the continuing priorities of NASCOH was that people with disabilities should be able to take charge of their own lives, and for the government and community to empower them to do so. She also saw a priority in ensuring disabled people had the same rights and opportunities as other Zimbabweans to take an active part in employment, community life, sport and leisure activities. Although the future work of NASCOH would change once the National Disability Board was fully operational, Mrs Gotera still saw a role for the NGO in terms of working against negative attitudes and increasing awareness of the contributions of disabled people, as well as having an important function in acting as an umbrella organisation. In this role NASCOH acted as a go-between between government departments and NGOs on issues such as grants, lobbying on specific issues, matching donors to organisations and assisting in finding funds for capital projects.

Mrs Gotera reported that relations between NGOs and the government were generally good. The main problem was in the funding of new
initiatives by the government. Because of a lack of government funding, NGOs were seen as a way of providing additional services. This situation would remain until there was comprehensive government provision. Although Mrs Gotera thought there was still a place for institutions, there was a hope that in the future better services would be provided at community level.

**Jairos Jiri Association**

Jairos Jiri Association has adapted to the new situation in special education, as have other organisations. The funding of special schools run by the Association was more secure, with government funding for teachers' salaries as well as a per capita grant for each child. Staff from Jairos Jiri Association, however, confirmed what staff from other NGO schools said about the need for considerable extra funding requirements to maintain special schools. The Association provided additional funding for extra staff, such as those needed to provide boarding facilities, as well as for extra equipment and services such as hearing aids, maintenance and repair. There was also a need to raise money through fund-raising within Zimbabwe and from overseas. The Association received about a third of the running costs for special schools such as the Naran Centre for deaf children from the government and the rest from donations, fund-raising and income generating projects. The government had increased its influence in the NGO schools through paying teachers' salaries, controlling the deployment of teachers and in the introduction of the communication policy. The schools were still administered by the Association and all welfare provision was met by them. The headteacher was answerable to the
Association on welfare matters, and the Ministry on educational matters (interview Zaharare 1994).

The role of the Association as a major provider of special education had changed since Independence, as the government had expanded special education provision in integrated settings. The Association and other NGOs were developing more specialised, distinctive roles. The Jairos Jiri Association had in recent years consolidated its involvement in education and vocational training and had also been active in public education campaigns to raise awareness on disability issues. It was keen to be seen as a training organisation not a welfare organisation. In the special schools the aim for the future was for them to take children with more profound or multiple disabilities while those with less of a disability were educated in integrated settings. The aim was for schools and centres to provided long term rehabilitation and education programmes for those with greater difficulties. In one area the Association had provided a hostel for disabled children from a mainly rural area that allowed them to come for integrated education in a town. The children attended mainstream schools, but went to the hostel in the evening as it was too far for them to travel home (interview Zaharare 1994).

The Association staff considered they had generally good relations with the Ministries of Health and Education, the main area of conflict was over funding, the Association felt it did not receive as much as it anticipated.
Attitudes to NGOs

The government official for special education whom I spoke to told me of the changing work of NGOs in special education in Zimbabwe. These organisations had gone from being the main providers of special education mostly in terms of special schools to being more concerned with the welfare provision in these schools. In the past relations between the NGOs and the government were "dodgy", but had improved as result of better public relations. Mrs Oderinde (interview 1994) thought that NGOs were relieved that the government had taken over the financial responsibility for teachers' pay and in giving a per capita grant. The policy on integration was solely a government initiative and used ministry staff and schools and was not dependent on NGOs.

The research indicated a separate and divided model of provision in deaf education. A power struggle between the NGOs and government had been evident in the past, and the government was proud of its own separate developments in resource unit provision. There was little evidence of a positive partnership between NGOs and government, between special schools and resource units, although the potential from the pooling of expertise and resources could in the future be considerable.

International Influences

The pattern of international influences on the education on deaf children in Zimbabwe had continued and developed in this period. The funding from SIDA had grown in the years 1990-1994 and had made much of the
Zimbabwean government’s expansion in special education possible. International NGOs such as the World Federation for the Deaf had increased their interest and influence in the education of deaf children in developing countries. Their indirect influence on policy and thinking in Zimbabwe was extended through the work of ASSOD and in the development of regional seminars and workshops as well as through the recent establishment of a regional office for southern and eastern Africa in Kenya. There were also increases in the influence of UNESCO in Zimbabwe. This took the form of a direct influence through the appointment of an associate expert for special education in the UNESCO Harare sub-regional office. UNESCO also influenced policy through the organisation of regional and sub regional meetings on teacher training and on the planning and organisation of special education.

**UNESCO**

UNESCO influenced policy making in the education of deaf children in Zimbabwe, both directly and indirectly, more than in any time in the history of deaf education. UNESCO’s influence was evident in a number of ways;

- through information collation and distribution, in publications and conferences
- through regional activities in promoting teacher training for inclusive education, and on planning and organisation of special education
- through liaison with national non governmental organisations and international non governmental organisations in promoting special
education and in investigating alternative models in the education of deaf children

• through work in promoting the Education for All conference in 1990 and subsequent Salamanca Statement in 1994. This had brought the issues of education for children with disabilities and difficulties in learning to national and international attention. Governments, including Zimbabwe have signed protocols and agreements to work towards specific targets in basic and special education.

Mittler (1995) notes that under the Education for All initiatives world leaders are committed to setting national targets to increase the proportion of children from various minority groups and with disabilities in basic education. Mittler considers that international resolutions are useful in providing a framework for monitoring and accountability, but that progress in individual countries is dependent on the political will to allocate resources to inclusive education. In the 1990s intergovernmental organisations such as UNESCO have shown a greater commitment to promoting inclusive education.

UNESCO priorities

In an interview with WFD News (Saleh 1991) and in an interview with myself Lena Saleh (interview 1993) the head of the UNESCO special education unit, outlined the work of UNESCO specifically in the area of the education of deaf children. UNESCO was a specialist agency of the United Nations for intellectual and technical co-operation in specific fields, it had a catalytic role. UNESCO was not a funding agency. Its role was as "a platform and a channel of exchange of information. experiences
and knowledge to bring about change" (p. 10). (Saleh 1991). UNESCO was the only inter governmental organisation looking specifically at the education of children with disabilities.

UNESCO fulfilled its role in a number of ways. Its main work was with governments and non governmental organisations. The work with governments was to try to persuade Ministry of Education staff of their need to assume responsibilities for the education of people with disabilities and learning difficulties. UNESCO’s aim was to maintain a dialogue between governments, particularly Ministry of Education staff on the one hand, and NGOs on the other, facilitating the sharing of resources, and promoting changes in attitude to special education. Once attitudes to people with disabilities had been challenged then it was assumed that concrete steps could be taken to change educational policies.

UNESCO’s priorities in special education in the early 1990s revolved around four main areas. These included:

- The elaboration of guidelines, orientations and strategies for national and international action in special education
- The compilation and dissemination of information and material on general and specific issues
- Technical co-operation between member states in national and regional activities
Working with non governmental organisations

Working with WFD, UNESCO assisted in the organisation of the bilingualism in deaf education conference in 1993. Documents produced on special education by UNESCO in the later part of this period have begun to reflect WFD views on integration for deaf children. Prior to the mid 1990s UNESCO general documents on special education failed to recognise any particular requirements for deaf children in an integration policy. The aim of all UNESCO policy was in favour of inclusive, integrated education for all children with disabilities and difficulties in learning. More recently, the Salamanca Statement has made exceptions in the education of deaf children arguing instead that provision in special schools may be a suitable alternative to assist in linguistic development and cultural transmission (UNESCO 1994a).

Educational policies should take full account of individual differences. The importance of sign language as the medium of communication among the deaf, for example, should be recognised and provision made to ensure that all deaf persons have access to education in their own national sign language....their education may be more suitably provided in special schools or special classes and units in mainstream schools (p. 18 UNESCO 1994a).

Regional developments

UNESCO’s regional work in Southern Africa was enhanced by the appointment in 1993 at the sub regional office in Harare of an associate expert for special education, a Dutch woman with a special interest in the education of deaf children. Her role was to promote UNESCO initiatives in the sub region. A number of teacher training courses were convened on the pack on inclusive education, produced by Mel Ainscow. Also in 1992 a
UNESCO sub regional seminar, on planning and organisation of education for children and young people with special needs, took place in Botswana. These two UNESCO meetings were part of wider international developments to promote inclusive education and the adaptation of mainstream teaching and curricula, as well as the perceived need to raise special needs issues with key staff in national government and the Ministries of Education (interviews Becker 1993, 1994)

Publications

Publications in this period included not only the international declarations of 1990 and 1994, but also the O'Toole (1991) book *A Guide to Community Based Rehabilitation Services* as well as the publication *Making it Happen: Examples of good practice in special needs education and CBR programmes* (UNESCO 1994b). There was also UNESCO collaboration with WFD and University of Stockholm in the publication of the proceedings of the bilingualism conference in 1993, *Bilingualism in Deaf Education* (Ahlgren and Hyltenstam 1994).

International declarations

In the 1990s UNESCO had also taken on the role of setting international goals and objectives in education. The Jomtien declaration in 1990 and the Salamanca Statement of 1994, form a part of this strategy.

The World Conference on *Education for All* held in Jomtien, Thailand in March 1990 was convened by a number of inter governmental organisations: UNICEF, UNDP, UNESCO and the World Bank. The aim, through the conference and the preceding regional and international
consultation meetings, was to reach a consensus on the development of basic education for all children and young people. Over 155 governments were present at the conference and were party to the published *World Declaration on Education for All and the Framework for Action to Meet Basic Learning Needs* (WCEFA 1990). Under Article 3, Universalising Access and Promoting Equity, there was a commitment to expand provision to include children and young people with disabilities. Statement 5 reads

The learning needs of the disabled demand special attention. Steps need to be taken to provide equal access to education to every category of disabled persons as an integral part of the education system (P. 5, WCEFA 1990).

The Salamanca conference was convened in Spain in June 1994 to further the objectives of *Education for All* "by considering the fundamental policy shifts required to promote the approach of inclusive education, namely enabling schools to serve all children, particularly those with special educational needs". These documents commit the signatory governments and organisations to give highest priority to improving their education systems to enable them to include all children and adopt as a matter of law or policy, a principle of inclusive education.

**WFD**

The beginning of the 1990s saw a widening of WFD interests to include issues relating to the lives of deaf people in developing countries. This concern was expressed through publications, the gradual establishment of
regional offices in less developed regions, as well as the co-ordination of regional workshops on issues such as sign language research and interpretation. WFD also continued through its Commission on Pedagogy to develop and extend its support for a bilingual approach to the education of deaf children. One key forum where this approach was outlined and explained was at the 1993 WFD/UNESCO international conference on bilingual education held in Stockholm. Finally in this period WFD increased its contact with inter governmental organisations such as UNESCO, ILO and WHO, lobbying on such issues as educational provision for deaf children in special schools, the recognition of deaf people as a linguistic minority rather than a medical impairment group, and on the need for equal access to training and provision.

ASSOD was recognised by WFD as the national organisation of deaf people for Zimbabwe at the end of the 1980s. It had been active in attending regional workshops such as those on sign language research and interpreting. ASSOD had also a number of aims in relation to the education of deaf children and the recognition of sign language that overlap with those of the WFD. In 1992 WFD established a regional office for southern and eastern Africa in Kenya with the aim of improving regional dialogue and promoting key issues.

*Developing countries*

The publication in 1991 of Marg Joutselainen’s WFD *Survey of Deaf People in Developing Countries* (Joutselainen 1991) helped to highlight for the first time the full picture regarding the lives of deaf people in developing countries. It was the first major survey of developing countries
to cover issues of education, sign language use, employment opportunities and human rights. Replies were received from 68 countries. The report highlighted the acute lack of educational opportunities for deaf children in developing countries. As a result of the survey, the Commission on Pedagogy for WFD committed itself to making the educational needs of children in developing countries its first priority (Makipaa 1991). WFD had highlighted the educational needs of deaf children with agencies such as UNESCO. Also WFD had tried to generate information and awareness of deaf issues in these countries, through regional workshops and seminars and publications on education and communication practices (Makipaa 1991).

**Educational**

During this period the WFD was consistent in its advocacy of a bilingual approach in the education of deaf children, which had first been recognised at the Congress of 1987. The WFD resolution called for "Recognition and acceptance of the native sign language of each country as the primary mode of instruction" and the "Implementation of bilingual/bicultural approaches to teaching deaf students at all grade levels" (WFD 1987).

The 1987 resolution of WFD regarding the type of educational provision for deaf students emphasises "the importance of residential and day schools for the deaf as important options". There was concern expressed about the level of communication between deaf children and their hearing peers, both within class and in out-of-school activities in mainstream
settings. The WFD view was that in a signing environment in a school for the deaf children do not miss out on essential communication.

In 1993 WFD and UNESCO held a major international conference on Bilingualism in Deaf Education. The conference attracted over 350 delegates from over 70 countries. Delegates included deaf people representing national associations together with government officials, researchers, teachers and academics. A number of delegates from developing countries received financial assistance to attend. The speakers were mostly from Europe and North America. The aim was to increase knowledge and understanding of a bilingual approach in deaf education. It also provided information on the developments of bilingual education in Scandinavia and the USA. Although there were a considerable number of delegates from developing countries there was little input on the possibility or desirability of this type of education for deaf children in developing countries.

The international conference and the publication that came from it has done much to promote the ideas of bilingual education for deaf children in developed as well as developing countries and has brought the developments in Scandinavian countries particularly Sweden, and to a lesser extent Denmark, to a much wider audience. Bilingualism with its emphasis on the primacy of sign language as the means of instruction and as the means of learning the national language in written and spoken form had been championed consistently by WFD for over 8 years, and was widely gaining in international recognition and credibility in many countries.
However, for developing countries the issue of access to education for deaf children is just as important as the type of education they receive once in school. For many countries it would be impossible to emulate recent Scandinavian and other European and North American developments in bilingualism. As in Zimbabwe, there is a legacy of oral education, a lack of research on sign language and low levels of provision for deaf children. Many issues would need to be resolved before a bilingual programme could be introduced, if it was considered desirable.

**Intergovernmental organisations**

In 1991 senior staff of WFD met officials from UNESCO in Paris. This was the result of a WFD plan of action to increase co-operation and work more intensively with UNESCO and other UN agencies.

The meeting in 1991 was used by WFD to promote awareness about deaf education to highlight the low level of provision in developing countries and to promote WFD policies on bilingualism, the recognition of sign language, Deaf culture and the need for improved access to information for deaf people. WFD were seeking UNESCO co-operation in stopping the oppression of deaf people.

The aim of the meeting was to increase co-operation between the two organisations. A proposal was put forward to organise an international conference on bilingualism in deaf education in either 1992 or 1993. UNESCO also suggested promoting WFD views at prestigious international conferences where ministers of education, educational
administrators and academics would be present, as well as members of the NGO community. There was also a proposal to produce a WFD policy paper on alternative policies in the education of deaf children, to give governments information on new developments. UNESCO officials recognised the need for better information prior to working towards concrete proposals such as the employment of deaf teachers and the use of sign language.

The final issue that was discussed at this meeting was WFD's unease with a policy of mainstreaming for deaf children. This was counter to UNESCO policy. WFD views were that it was difficult for deaf children to integrate in mainstream schools if there was not a good sign language environment or a community of Deaf people "Policies that are good for one disabled group are not always good for all.......More flexibility is needed in society where points of view brought up by deaf people and their organisations must be discussed" (p. 9) (Power 1991).

In the early 1990s WFD senior officials also made representations to other UN agencies with a concern about some aspect of the lives of deaf people. In 1993 visits were made to the International Labour Organisation (ILO) and also to the World Health Organisation (WHO). At the ILO, WFD officials proposed future co-operation in the area of vocational training, and the labour market for deaf people. The WFD proposed a survey of working conditions for deaf people, the development of vocational training, specially for deaf women, and the wider use of sign language for deaf people in training and the work place. ILO response was that it was not a funding agency: its aim was to develop policy not fund projects.
At the WHO, the WFD concern was that the WHO and medical professions should adopt a much broader view of deafness emphasising the linguistic and social aspects as well as the medical. The WFD suggested the production of a pack for WHO on deaf people and sign language. There was also opposition expressed by WFD members about the aim in CBR programmes for deaf people to be integrated in the community. WFD was opposed to individual integration as it leads to the isolation of the deaf person. WFD argued, instead that there was a need for deaf people to be encouraged to meet in groups with a common language and then for the group to be integrated in the community. The suggestion from WFD was for better training of CBR staff in the needs of deaf people. The WHO staff suggested that CBR programmes were “not yet well developed when it came to children with hearing impairments” (p. 17). There was agreement on the need to revise the language used when referring to deafness and other disabilities (Makipaa 1993).

The recognition by WHO staff in 1993 that CBR programmes were not yet well developed in relation to working with deaf children, accurately reflected the situation in Zimbabwe in the early 1990s. In Zimbabwe the training of staff and the provision of pre school services for deaf children were in their infancy, with only the beginnings of initial services in the major cities as well as the later training of rehabilitation technicians in hearing and communication disorders.
SIDA funding

During this period the SIDA funding for special education entered its second decade. The government was aware and appreciative of the fact that much of the provision in place in the 1990s was a direct result of overseas funding. The government fully recognised the fact that it would have been impossible for them to finance all of special education "without the support from local and international donors and non governmental organisations. These have played a major role in providing financial support to special education in Zimbabwe" (Ministry of Education and Culture 1992a). The government had financed staff salaries, per capita grants for pupils, buildings and their running costs. SIDA the major donor in special education has provided for equipment, staff training, research, outreach programmes, monitoring and guidance and counselling (Ministry of Education and Culture 1992a).

SIDA's main objectives in financially supporting education in the period 1990-1994 were

- to contribute towards educational opportunities at primary and lower secondary levels, primarily in the rural areas
- to promote access to education for "handicapped" children, and to support disadvantaged groups in remote and poor areas
- to support development efforts to improve the quality of education
- to support and strengthen Zimbabwe's educational administration system (Colclough et al. 1994).
In special education Swedish financial support had in the past assisted with projects for blind, deaf and "mentally handicapped" children, their parents and teachers. The assistance had been in terms of teacher training and the provision of equipment. In the 1990s funds were used for procurement of equipment and teaching material, staff development and study visits, the support of resource units, the development of Zimbabwean Sign Language, the establishment of the Educational Services Centre and support to NGOs. The total funding for special education up to June 1993 had been Swedish Kronor (SEK) 30.2 million. For the years 1991/1992, 1992/1993, 1993/1994 the annual allocation was SEK5.3 million for the first year, and then SEK5.1 million for the subsequent years.

Ministry of Education staff gave a very favourable view of SIDA as a donor in special education. "The SIDA/government relationship is seen as a financial one with little influence by SIDA on policy". "If SIDA do have an influence it is seen as being indirect. There is broad agreement between SIDA and MoE". "They can refuse funding for a particular project, but this is rare" (interview Chemedza 1994). From some praise for SIDA was fulsome "SIDA is the best donor I have come across" (interview Rinashe 1994) said one education officer. "They do not try to influence policy. They give the funds and ask for accounts and reports on how the money was spent". "No strings are attached to it (the funds)". This ministry official was "Happy" with the SIDA/government relationship regarding special education "it is a very good relationship". There was a feeling that although funding for the current allocation would run out in 1995 there was a possibility of a further 4-5 years of SIDA funding. The aim was to make special education self-sustaining.
There was however an acknowledgement among some staff that special education in Zimbabwe was being “driven” by SIDA funding. “Without SIDA Zimbabwe would be struggling at level 1 or 2 of provision” (interview Oderinde 1994). One former headteacher thought the government was “leaning on SIDA”. A former regional psychologist working for SPS acknowledged that the SIDA money was allowing services to be developed which would otherwise not be possible. He thought SIDA money was being used “to get a service in place”. He had seen first hand the value of the SIDA money in staff workshops and awareness training, its use in outreach programmes with health staff, and for the purchase of aids and materials (interview Mpofu 1994).

The significance of SIDA funding to the development of deaf education since the middle of the 1980s must be acknowledged. Funding was used for teacher training, staff development, the procurement of equipment and the funding of the sign language research. Although staff felt that SIDA exercised little control over the day to day use of funds in special education there was firm control by SIDA in setting the overall criteria for the bilateral funding. Special education benefited because it fell within one of SIDA’s key areas for educational funding i.e. access to education for disadvantaged groups.
The National Context

Political situation

The new decade in Zimbabwe began with an election and a period of questioning about the nature of political life in the country. At the 1990 elections the ruling majority party ZANU-PF proposed a transition to a one party state. Although the government had delivered many positive outcomes in education, health and rural development there had been less positive developments in the areas of transport, unemployment and economic development. There were sections within the ZANU-PF party leadership that strongly believed in a legislated one party state, but there was little support for this view in the general population. Church leaders, academics, university students and members of trade unions opposed the idea, even though the party won a clear victory in the March 1990 elections. The President, Robert Mugabe, was forced in 1991 to abandon the idea because of party divisions on the issue and opposition in the country. However, after three election victories some argued that a de facto one party state already existed, with little organised or well-supported opposition to ZANU-PF (Ranger 1993).

In 1989 there had been considerable opposition to the government because of increased unemployment, price rises and allegations of corruption. The world recession and drought conditions added to political unrest. A new opposition party the Zimbabwean Unity Movement (ZUM) was formed in 1989 and there were student riots. The country also had ongoing security
problems on its borders with Mozambique and South Africa that caused loss of trade and incurred increased defence costs.

In 1990, as the second decade since Independence began, there was widely seen to be a need for a dramatic shift in government economic policies, which had political ramifications for the entire country. The reasons for the economic reforms are dealt with in some detail below. However there were ideological shifts that needed to take place to accommodate the imposition of economic reform measures from the IMF and World Bank (*Madeley et al.* 1994).

The first ten years of Zimbabwean Independence had seen a socialist rhetoric existing hand-in-hand with a state regulated capitalist economy. The structure remained, during that period, as a privately based capitalist economy, with high concentrations of capital and land in the hands of the white minority as well as a number of multi national corporations many of South African origin, for example, Anglo American, Lonhro, RTZ, and Union Carbide. The basic structure of an unequal capitalist economy was still in place.

Internationally, during the 1980s there were considerable shifts in the direction of world economics. The ideologies of Reaganism and Thatcherism caused a shift towards a more liberal, less socially orientated, market-based world economy. There were also major changes in the policies of the IMF and the World Bank in their dealings with third world countries. Countries approaching the IMF and World Bank for loans were required to introduce "structural adjustment" programmes. The
prescription of structural adjustment was applied in similar fashion to all countries seeking loans. Even the countries of eastern Europe, following the collapse of communism, had to comply with the requirement of structural adjustment. The ideology of structural adjustment was capitalist, seeing a market economy as the only way to save ailing, indebted, third world economies (Balleis 1993).

In Zimbabwe it was time for capitalism to take "official and unhindered root in the country" as the Minister of Political Affairs, Didymus Mutasa noted in 1990 (Balleis 1993). Increased economic dependency on international financial institutions forced the government to confront the divergent paths in its economic and political policies.

Although the original plans for the Economic Structural Adjustment Programme (ESAP), for Zimbabwe, were claimed by members of government to be "home grown", imposed by government as part of their programme of economic reforms, there were considerable overlaps with the orthodox programmes imposed by IMF and the World Bank. The ESAP prescription called for considerable loosening of government controls in a number of key areas. ESAP called for cuts in government spending, the privatisation of government enterprises (parastatals), and strict control of the money supply, export promotion, the removal of trade and exchange controls, currency devaluation and increases in interest rates (Madeley et al. 1994).

Of particular interest to the development of special education and rehabilitation services, from the introduction of ESAP, was the call for a
reduction in the budget deficit. Reductions in the budget deficit were planned through the elimination or reduction of subsidies to parastatals (nationalised industries), reduction in the size of the civil service and increased cost recovery for services. The civil service was to be cut by 25% across the board, except for education. There was thought to be less demand for the civil services as a result of liberalisation, deregulation and lower government involvement in economic and public affairs. In high spending ministries such as education and health, increased cost recovery was aimed at lowering recurrent government spending. For example in education this was achieved through the introduction or increase in school fees, in government and aided schools. Initially plans in 1991 were for primary education to continue to be “free”, but cost recovery at higher levels were to be imposed. Also the overall cost of education was to be cut from 10% to 8.7% of GDP. In health increased and more comprehensive treatment fees at hospitals and clinics increased cost recovery (Balleis 1993, Stoneman 1995). As a result of increased cost recovery social services, health and education, become less accessible to the poor.

Economic developments

The entire period covered by this chapter was dominated in economic terms by ESAP. The 1980s had left Zimbabwe with a number of economic difficulties, and although the economy grew at an average rate of 3.9% per year and the GDP increased by 1.4% per year, there remained a number of structural deficiencies, some caused by internal factors and others by
external factors. Balleis (1993) noted the following as internal and external causes of structural weakness in the Zimbabwean economy:

**Internal factors**

- Continued high dependency on agriculture with problems of low production in years of drought and a fluctuating world market for agricultural products.
- Lack of land reform. Until 1990 the government’s hands were tied by the terms of the Lancaster House agreement. Most of the high quality commercial farm land remained in the hands of a small white minority.
- Rising unemployment, and increased population growth put great pressure on the economy and on social provision.
- Socialism and state regulation of the capitalist economy. In the first decade the economy remained as an unequal capitalist economy in the hands of a small minority of the population and a number of large multinationals.
- Lack of investment, particularly foreign investment, acted as a constraint on growth and job creation.
- Government budget deficit, due to rapid expansion of social services. By 1985 the government had begun borrowing to finance growing expenditure. The gross public debt rose from US$1.8 million million to US$10.4 million million by the early 1990s.
- Negative balance of payments. Many goods essential for the economy needed to be imported such as machinery, cars, electronics and oil, but these need foreign currency. External factors such as oil price rises caused by the Gulf crisis, increased the deficit. To make up the shortage the government relied on increased borrowing.

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Growing foreign debt. The worsening of the balance of payments lead to further borrowing (Stoneman 1995).

**External factors**

Most developing countries are caught up in the web of the international world economy and suffer as a result of recession, declining terms of trade as well as increased protectionism in the Northern markets.

- **Debt crisis**: external debt was the major economic problem of most sub-Saharan African countries. In the 1980s the external debt of sub-Saharan Africa grew from US$60 million million to US$150 million million in 1990. In 1993 it was approximately US$175 million million.

- **Declining terms of trade** had also severely affected developing countries. Over the last few decades the prices of agricultural products and raw materials exported by third world countries had steadily declined, whereas the price for imported goods manufactured products and oil had increased. Prices had declined because of a glut of raw materials and agricultural products on the world market as countries were forced by structural adjustment into increasing exports. In other markets synthetic products had replaced natural raw materials. Also the markets were dominated by a small number of multinational corporations. It was in the interest of these multinationals and the industrialised world to keep the prices of primary commodities low.

- **Protectionism** had limited the markets for export of third world goods. Despite the GATT agreement on free trade, the EU market was able, through quotas and tariffs, to limit its import of labour-intensive manufactured goods such as textiles from third world countries where because of lower labour costs they could be produced more cheaply.
Through declining commodity prices and limited access to world markets the economies of third world countries were disadvantaged and their economic difficulties were exacerbated.

• Finally the ideological shift as noted in the early section towards a more liberal, market orientated world economy had strongly influenced developing countries. Structural adjustment forced the ideology of the World Bank onto developing countries.

The international and national effects of the widespread imposition of structural adjustment measures on developing countries are well documented by others (George and Sabelli 1994). The consequences for Zimbabwe were beginning to unfolding in the early 1990s, of particular interest for this thesis were the effects on education and health provision.

The social implications of ESAP in Zimbabwe had been that for the majority of the population a period of "sacrifices" and "belt tightening" had been in place. Poverty had increased for many as a result of inflation, the loss of subsidies on basic commodities, the fall in real wages and increased unemployment as a result of retrenchment. The situation was compounded in 1992 by drought (Madeley et al. 1993).

Funding for health provision had declined since the introduction of ESAP. The budget allocation for health in 1991 was 7.4%; this reduced to 6.4% in 1992. Added to high inflation this had meant that real health expenditure had fallen by 20%. In 1990 government health expenditure was Z$18.17 per capita. By 1992 this had fallen to Z$13.71. The government also introduced fees for treatment in hospitals and clinics. Only people with an
income below Z$150 per month could claim free health care. At the end of 1992 the maximum income level for exemption was raised to Z$400.

Similar cuts in educational expenditure and the introduction of cost recovery had particularly adversely effected children of poor families and those in remote rural areas.

*Educational developments and dilemmas*

The link between structural adjustment and declining school attendance and falling standards is well documented for other countries of sub-Saharan Africa. The level of primary enrolment and percentages of children reaching grade 4 had decreased in sub-Saharan Africa during the 1980s and 1990s (Balleis 1993).

The 1980s in Zimbabwe saw a rate of growth and expansion in both primary and secondary education unprecedented in Africa. However, the need to reduce the budget deficit and the imposition of ESAP control in the economy had meant changes in education in the 1990s. The per capita expenditure on education fell from Z$28.70 in 1989-1990 to Z$23.71 over the period 1990-1992. As a consequence of decreased funding and also increased inflation a number of areas in education had declined. The pupil-teacher ratio had increased and attendance at primary schools had declined. Poor parents had found it increasingly difficult to cover the expenses for uniforms and building fees.
Legislation was introduced in 1991 as an amendment to the 1987 Education Act. The aim of the new legislation was in part to compensate for declining government expenditure in education as well as the need for cost recovery and redistribution. The legislation introduced changes in the classification of schools, allowed for changes in pupil-teacher ratios, it also gave the government greater power of financial control over all schools, in terms of accountability and the assignment of funds (Berridge 1992).

The reclassification of schools allowed for the introduction of school fees as a cost recovery measure in urban primary schools. It also allowed for greater fund raising in urban schools through the introduction of higher levies such as for building fees. The introduction of financial controls in government schools called for the accounting by each school of its total income and expenditure. It also allowed for fee increases and local fund raising by schools.

As a result of ESAP, questions were being asked about the quality of education in Zimbabwe as well as the universal nature of primary education. The number of children in education had declined, the numbers sitting O Level examinations have similarly declined and the number of girls and children from rural and disadvantaged homes had also gone down.

It is against this background of reduced expenditure and lower levels of pupil participation in education that questions about the nature of education in Zimbabwe were being voiced. The commitment to universal primary education and the relative importance of secondary education up
to O Levels for all were under scrutiny. People were also questioning the appropriateness of universal secondary education for future employment.

It was in this climate of reductions in educational expenditure, and questions about the quality and nature of the education provided that the government's policy of expansion in the education of deaf children had been taking place.

**Conclusions**

Internationally and nationally this period has been marked by a growing recognition of the Deaf dilemma (Miles 1995), and the need for different provision for different disability groups. This has manifest itself in UNESCO documents, WFD conferences and publications and also in the policies of the Association of the Deaf in Zimbabwe. With the increased confidence in the Deaf community both in Zimbabwe and internationally, Deaf people were beginning to make their particular language and cultural needs known to the wider society, policy makers and international organisations. This has brought them into conflict with professionals who have dominated deaf education for many years.

The complexity of issues in deaf education has become more apparent in the 1990s in Zimbabwe, particularly regarding communication methods and the use of technical aids. The need for clear policies and direction was important if limited resources both financial and in terms of skilled personnel were not to be wasted.
In 1994 education for all deaf children in Zimbabwe was not a reality. In the 1990s wider economic and political issues may significantly affect the government's ability to fund future developments. The NGO community was however responding to new ideas and pioneering new practices. The catalyst for change and development both in Zimbabwe and globally has often come from deaf and disabled people's organisations.
Section 3
CHAPTER 7

PROPOSITIONS REVISITED, ANALYSIS AND CONCLUSIONS

Introduction

This research has charted the development of educational provision for deaf children in Zimbabwe over nearly a fifty year period. It has explored the changing roles of non governmental organisations, international organisations and the government in policy making and provision. The research has identified a number of emerging trends in the education of deaf children such as, the relationship between bilateral aid funding and government expansion of provision and the lobbying of government and international organisations by deaf peoples' groups. The research has also explored the changing international influences over the period. I have highlighted the need to see developments in deaf education within Zimbabwe in the wider context of national and international changes in politics, economics, social and educational policy.

In this concluding chapter I return to the four key propositions which acted as a framework for my investigations. In chapters 3 to 6 I described the complexity and diversity of the NGO communities. I discussed the recent developments in national and international organisations of deaf and disabled people. I plotted government policy and provision over a
thirty year period, from the 1960s, and detailed the increase in the areas of government responsibilities. The research has also provided evidence of government involvement in policy making in areas previously the domain of individual schools such as in technical provision and in communication methods. Finally, this thesis has described and analysed the complex pattern of relationships and responsibilities between the key providers in the education of deaf children, the government, NGOs and IOs.

In this final chapter I shall summarise the key findings in relation to each proposition and then consider a final synthesis, looking to the future of deaf education in Zimbabwe. I consider new trends in special education and the education of deaf children and how these might influence provision and policy in Zimbabwe. In the concluding section I outline a number of possible areas for further research.

Revisiting the Propositions

PROPOSITION 1

That the internationalisation of the debate around the provision of education for deaf children is an important influence on the work of the government and NGOs in Zimbabwe.

This research has clearly highlighted the strong international influences on the education of deaf children in Zimbabwe. To seek to understand deaf
education in Zimbabwe without considering the role of foreign charities or international organisations would be to only see part of the story.

Deaf education in the early years of its development, during the colonial period, sought professional expertise, funding and models of educating from overseas. The early influence on national developments of both professional training from overseas and external funding has continued into the 1990s. The research also provides evidence of how national provision has followed international trends in deaf education:

- in expanding provision in integrated settings,
- in a consideration of total communication and
- in the use of sign language in education in the 1980s and 1990s.

The early relationships with overseas organisations were typically between one school and one or more overseas churches or charity, for example the relationship of the Morgenster Mission, Henry Murray School, with the Dutch Reformed Church in South Africa. This relationship between school and church is still in evidence to the present, but the influence is now limited. Since Independence it has been superseded by the relationships between the government and bilateral aid agencies and intergovernmental organisations. This is characterised by the relationship between Ministry of Education staff and SIDA officials, and also Ministry staff and academics and UNESCO.

Since Independence deaf education in Zimbabwe has been directly and indirectly influenced by international statements and declarations, funding from a bilateral aid agency and the use of foreign volunteers. Deaf
education in Zimbabwe has been influenced by professionals, funding and trends from overseas throughout its history. However the balance of influence and the key players in development have changed.

The other international influence in Zimbabwe evident since 1980 has been between national organisations of Deaf and disabled people linking with co-ordinating international NGOs. The organisations of Deaf people have highlighted their linguistic rights and they have also challenged the trends toward integrated and more recently inclusive education for children with disabilities. Organisations of Deaf people together with other disability organisations have challenged governments and intergovernmental organisations on the issues of equality of access and opportunity in education and employment.

Throughout the development of education for deaf children the nature of influence through international organisations has changed. In the earlier years churches seconded staff from overseas to start and develop services and to train nationals and they provided funds for capital projects and staff costs. The Dominican sisters and the Dutch Reformed Church had expertise in deaf education in the developed world and in other African situations to call upon. The first two church schools were the result of outside initiatives developed inside the country, the churches provided the moral and financial incentives for the new provision. The third school opened by a national disability welfare organisation was responding to need among the black community, but sought financial assistance and models of development from overseas.
Intergovernmental organisations such as UNESCO have exercised their influence in developing countries in a number of ways:

- Through the dissemination of information through publications, conferences, regional and sub regional meetings and seminars.
- Through organising exchanges of ideas between NGOs, governments and international organisations.
- Through the designation of international years or decades relating to disabled people and
- More recently through the use of international statements and declarations on educational issues.

UNESCO staff have used the organisation's moral authority to influence government officials and key academics in Zimbabwe. The lack of funding from UNESCO to developing countries has meant that it has had to rely on its advocacy and catalyst role to initiate change.

International NGOs, for example the World Federation of the Deaf, have similarly increased their international profile and influence on issues relating to the lives of Deaf people, including education. WFD has, in the 1990s, begun to lobby intergovernmental organisations such as UNESCO, WHO and ILO on issues of particular importance to them. This has resulted in senior members of WFD challenging the views of Deaf people held and disseminated by these organisations. This has also allowed for a representation of their ideas in declarations and statements, which often run counter to the major trend. Co-operation with intergovernmental organisation has also led to the joint organisation of conferences to promote WFD views on the education of deaf children, for example the bilingualism conference in Stockholm in 1993.
WFD has also sought to indirectly influence national developments, in Zimbabwe as well as other developing countries, through the encouragement of national organisations of deaf people and the promotion of regional co-operation and development. Finally, WFD has been active in researching the lives of deaf people in developing countries and in disseminating information on educational and other equal opportunity issues.

Since Independence the development of special education has been facilitated by additional funding from SIDA, the Swedish government's bilateral aid agency. SIDA has a number of educational priorities that constrain the development of the receiving governments. The funding priority to encourage access to education for disadvantaged groups has allowed the Zimbabwean government to use overseas funds for special education development. The moral parameters of the Swedish aid towards consideration of disability issues have influenced development within Zimbabwe. This external influence on national development, however, tells us as much about Swedish government aid priorities as it does about national development within Zimbabwe. The colonial imperialism of the church and charitable organisations has since Independence given way to a neo colonial imperialism of the bilateral aid agencies.

Finally, the research has highlighted the significance of international influences on key players in the education of deaf children in Zimbabwe. The education of deaf children is a small part of educational development in Zimbabwe. There was only a small group of teachers with additional
training as teachers of deaf children. Within the ministries and higher education there was only a very small number of people with influence on government policy and teacher training. Therefore, the international experience of this group overseas through conferences, post graduate training and study visits should be recognised, its appropriateness questioned and its influence on policy acknowledged.

The fact that teachers of the deaf and staff involved in training and policy making had been to such a large number of countries to receive additional training since Independence including England, Scotland, Sweden, Denmark, Norway, Finland, Australia, Canada and USA could possibly account for the comparatively slow progress in developing deaf education. With deaf education internationally being in a state of change this could have been reflected in developments in Zimbabwe.

International influence had, according to Karey (1984), made special education in Africa profoundly European in nature. I would argue that although the original influences were European, and also North American in some instances, they are becoming increasing global in nature. The financial and moral imperatives of the churches and early overseas charities have since Independence given way to the moral imperatives of the intergovernmental organisations and the organisations of deaf people, and the financial constraints of bilateral aid agencies. The research has highlighted the web like nature of the relationships between IGOs and INGOs and how their influence is brought to bear on the government. In seeking to develop educational provision for deaf children in Zimbabwe it
is doubtful if government officials, academics and other could resist the overseas pressures, both moral and financial, placed upon them.

PROPOSITION 2

That limitations to the provision by NGOs precipitated government involvement and lead to a significant increase in provision and an adaptation in the role of NGOs.

The level of NGO and government development of education for deaf children at Independence, in 1980, indicated that only a small percentage of deaf children was receiving an education. Government provision, prior to 1980, was limited, as in other areas of education, to providing for white, coloured and Asian children. There was limited support for the church and NGO schools provided for black children. The two schools for white and coloured children were taken over from a charity aiming to provide rehabilitation and educational opportunities to disabled children. All of the pre-Independence provision was in special schools and three of the five pre-Independence schools were for more than one disability group. Deaf children were being educated in a segregated racist environment with a strong ethos of religion and charitable giving.

The survey carried out in 1981 (see Chapter 4), by an international NGO in partnership with the government, was the first evidence of the much greater need for educational provision for deaf children. There were however limitations to expanding the current provision. The church and
Charity schools had expanded considerably since their inception, in the mid 1940s and 1960s, but the expansion of existing schools would have proved difficult.

Early pioneering NGO provision, prior to 1980, was in individual schools with little regard for national needs. Their early provision was responsive to a local need, it was small scale and expanded slowly. They were responding to an educational need not considered or catered for in the earlier national developments of education by churches, charities and the government. The early provision adhered to the racial segregation characteristic of the wider society and educational system.

There were a number of limitations to NGO special school expansion immediately after Independence. These included:

- lack of funding,
- lack of trained staff and the lack of a national teacher training course
- no strategic plan or overview of development
- lack of co-ordination between schools
- external and internal pressure to provide integrated provision and
- the lack of a national policy and administrative infrastructure.

NGO expansion would have required extra capital programmes and considerable funds. The charity running the school in Gweru was in financial difficulties in the early 1980s and would have been unable to consider expansion. Also expansion of existing special schools or an increase in the number of special schools would, from the NGO and government perspectives, have proved an expensive option.
Expanding or increasing the number of special schools would also have run counter to international trends in special education and deaf education. With the increased exposure of staff through overseas training and contact in the early 1980s, with the UNESCO eastern and southern Africa project, special school expansion would have run counter to regional thinking and developments. Finally the NGO special schools that existed at Independence were discrete, individual administered units, there was no mechanism through the NGO structure immediately after Independence to provide a national policy overview or administrative structure.

Expansion in other areas of special education in Zimbabwe had taken place in integrated settings, in "open education" for blind students since the 1960s and for those considered "mentally retarded" after Independence. The integrated or open education for blind children was started by a national NGO with assistance from a Commonwealth NGO. This expansion, although started by NGOs, had after Independence become part of government provision. After Independence the major Zimbabwean charity for people with learning difficulties with financial support from the bilateral aid agency funds pioneered integrated community provision for children with learning difficulties and their families.

Expansion in the education of deaf children eventually took the form of provision in resource units attached to primary schools, but was only initiated in the late 1980s, fully eight years after Independence (see chapter 5). The government was aware of international trends in special education.
resource unit expansion. The government also wanted a model of assimilating deaf children into hearing society, resisting at that time the formation of a Deaf community around special schools.

The early church and charity NGOs have continued the on-going administration and welfare in their special school provision and the two government residential schools have remained with government funding for staff and limited capitation fees. The NGO, church and government schools need, however, to raise extra money, to supplement government fees and salary payments, to cover non teaching staff, boarding provisions and any capital programmes. The government could not afford to expand the special schools with their additional funding needs. They also wanted greater control over developments without the need for partnership with NGOs.

As part of the 1980's expansion the government became involved in teacher education at a national level and in other issues previously left to the individual schools such as hearing aid provision, national communication policy and the sign language research project. Government involvement in these other aspects of deaf education became necessary if the service was to have national cohesion. The education of specialist teachers had until the mid 1980s taken place overseas initially in Europe and from the 1960s in Malawi at a church training college run by Dutch Catholics. There was a national shortage of qualified teachers of deaf children and training overseas for large numbers was expensive. There was possibly a concern regarding the appropriateness of overseas training. However staff continued to receive mostly further, post graduate, training.
overseas into the 1990s in Finland, the UK, Australia, Canada and USA. There was therefore a strong argument for national training for specialist teachers in special education. It also gave the government greater control over the type of education the teachers received and also over their deployment after training.

Much of the government’s expansion in deaf education, and other areas of special education, had been made possible with extra financial assistance from SIDA’s bilateral aid programme. The Swedish International Development Agency (SIDA) was one of Zimbabwe’s largest education donors and had prioritised access to education for disadvantaged groups. Funding has transferred from churches and charities to individual schools, to government to government bilateral aid. The overall control of this money was beyond the Zimbabwean government. The aid agency, with some collaboration, sets the broad priorities for educational development and then spending within the budget and the priorities were negotiated with Ministry staff.

Since the early 1980s the government had been involved in special education expansion through the provision of a legislative, policy and administrative framework both centrally and regionally. This framework was necessary to provide the recognition of special education within the overall educational provision. It had also set targets for future developments and provided support for the growing staff and resources. The government had gradually appointed Ministry staff with a knowledge of special education. Prior to Independence the Schools Psychological Services, was run almost entirely by psychologists. There was a need
therefore after Independence for policy making staff with specialist knowledge in areas of special education, these staff needed in many cases to go overseas for additional training before taking up their posts.

Government had also taken on the role of co-ordinator of disability provision, as the number of government ministries and NGOs involved in disability issues have increased. Since the mid 1980s the government has facilitated the exchange of information and policy development through interministerial committees. The government still needed to work in partnership with NGOs for special school provision and for some external funding for expansion.

The NGOs were represented on these interministerial committees by an umbrella NGO, NASCOH, which had the role of co-ordinating and representing the views of a wide variety of NGOs involved in disability issues. An important development among the NGO community concerned with disability issues, since Independence, has been their coming together under one umbrella organisation, NASCOH. This organisation represented their views in interministerial committees and also co-ordinated policy and assisted in funding. The united voice of the NGO community was successful in working with the government on the Disability Act, a major recognition of the rights of disabled people (see chapters 5 and 6).

The government was dependent on the churches and a number of NGOs to sustain its special education provision, but it was also lobbied and pressurised to change by another group of NGOs (see chapters 4, 5 and 6).
The new group of NGOs emphasised issues of educational rights and equal opportunities in employment. This new generation of NGOs grew out of the special school provision of charities and churches as these allowed a community of people to come together. Then through the education they received these groups began to question the provision itself. They have challenged the control of special education by professionals and have assisted Deaf people and disabled people in self advocacy development. The Association of the Deaf had in the 1990s challenged the government on the recognition and use of sign language and the type of educational provision for deaf children.

The NGO community had changed its role in the 1980s and 1990s and has become more diverse, with the continuation of the welfare and charity based NGOs and the development of the advocacy, rights based NGOs. The churches have continued their role of educational provider, but with varying levels of external support. They still have a need for fund-raising and donations to maintain their schools. The Jairos Jiri Association, a nationally recognised welfare charity, has begun to develop a new role in terms of welfare provision in special schools and also in vocational and employment training. The new breed of NGOs involved in self advocacy have brought a new agenda to education in terms of integration and equal rights.

The recently established Association of the Deaf, ASSOD, had brought a new voice to educational issues regarding deaf children. In 1994 the organisation was marginalised and rejected by government. Its views were in opposition to much of government policy on integrated provision. the
use of sign language and a total communication policy. ASSOD was challenging the dominance in policy making of hearing teachers of the deaf. Many in positions of power, such as headteachers and ministry staff were orally trained and pro integration, and in favour of an assimilation model for deaf children, and against the formation of a Deaf signing community. ASSOD was by 1994, the end of this research period, developing its membership and its joint roles in the political representation and welfare of Deaf people. A small number of teachers and academics sympathetic to the views of ASSOD was identified. They might in the future assist in bringing a new model of deaf education to Zimbabwe.

Within the NGO community there was by 1994 no NGO to represent the needs of parents of deaf children. There were parents' groups for a number of other childhood disabilities e.g. the Down’s Syndrome Association. The lack of a parents' organisation for parents of deaf children had meant that the parents' voice had not been heard in decisions on policy and provision for deaf children. This lack of a parent NGO organisation was significant as this type of NGO had been identified in other national situations as important in extending provision. The development of CBR work with pre-school deaf children and their parents could possibly lead to the formation of a parents’ organisation, particularly as the workshops for parents and children, in Harare and Bulawayo, allowed parents to meet each other on a regular basis.

This proposition was partially confirmed by the data. There were significant limitations in the early provision by NGOs and considerable problems would have arisen if expansion had been through the existing
NGO sector. Ironically the late involvement of the government in expanding provision may have been in part due to the lack of diversity in the NGO community in relation to deaf people with the relative late development of a deaf advocacy organisation. Government provision had doubled the number of school places for deaf children in a six year period, but there was still a need for large numbers of extra places for deaf children. The challenge to government policies by ASSOD, although resisted in the period under consideration, might in the future lead to a greater partnership and responsiveness to the wishes of Deaf people.

**PROPOSITION 3**

That the extension of educational provision for deaf children has been as a result of struggles between interest groups focused around the type of school provision and the communication methodology.

The research has illustrated a number of key areas of conflict and struggle in the education of deaf children, regarding segregated or integrated provision and the debate about oral or signed communication. The research confirmed the view of Fulcher (1988) that conflict happened in a number of arenas between the identified interest groups, in this research the government, NGOs and international organisations. The research has also identified conflict between different members of some of the interest groups, namely between ministry staff and head teachers and teachers, and between deaf peoples' organisations and other disability and special
education organisations. Strong evidence of a deaf dilemma was presented in chapter 6.

The data also provided some evidence of consensus and co-operation between interest groups in the two identified areas and on other issues to develop policy in deaf education. Internationally there was evidence of co-operation between organisations to develop the ideas on inclusive schools with a recognised exemption in some areas of deaf education. Within Zimbabwe there was evidence of co-operation over the development of the disability legislation. The data also highlighted progress in a number of areas where there was more consensus about developments for example in pre school CBR provision and teacher training.

Miles' (1995) view that deaf education is one of the neglected areas of special education has been confirmed by this study. Of the groups recognised for special education in Zimbabwe developments for deaf children have lagged behind those for blind and physically disabled children and those with learning difficulties. Miles' argument that many people say "no" to integration was also confirmed in this study, although the government was pro integration many teachers of the deaf from special schools and Deaf people were sceptical. Finally Miles' (1995) view that there has been a conflict between organisations of disabled people and organisations of Deaf people was also confirm by this study. In Zimbabwe the NCDPZ failed in its early days to fully include or represent Deaf people and their organisation came into being some time later. The hope for partnership between Deaf people and teachers expressed by Miles had not come to fruition in Zimbabwe. For deaf education to flourish and
expand a wider partnership between Deaf people, parents, teachers, the government and welfare NGOs would be required.

The early provision of education for deaf children in Zimbabwe was undertaken as a result of humanitarian and charitable motives. The churches had a motive of extending church membership as well as providing education for a previously neglected group of children. At that time many children were still not provided with a basic education so the issue of control and conformity in the mainstream was less significant. Government responsibility for the disabled children from the dominant social group, the Europeans, was only initiated after charitable provision had been established (see chapter 3). Segregation in terms of racial background was present in special education as in all other areas of education, up to Independence. Segregated provision for deaf children was the norm in a segregated and divided society. There was however a double segregation for deaf children within the racist education system and within special schools.

Government involvement in special education grew considerably after Independence. A growing need for provision was highlighted by the first national disability survey conducted during the IYDP in 1981. There was considerable pressure from NGOs and from the international community on governments to complete concrete projects and policies during the year. Zimbabwean ministry staff and teachers were also involved in the UNESCO regional project in the early eighties that exposed people to international trends.
Expansion of provision for blind, physically disabled and "mentally retarded" children was implemented early in the 1980s in integrated settings pioneered by NGOs. Eventually government expansion in deaf education became necessary as waiting lists grew. Integrated provision in resource units was adopted for financial reasons and also in response to international trends. I have found little evidence in the data of a strong rights based motive for government expansion in the education of deaf children. It would seem that developments in deaf education were reactive rather than driven by forward thinking policies. Pressures came from growing waiting lists, international trends and in response to expansion in provision for other disability groups, notably blind and physically disabled students.

There is evidence from the data that throughout the period the control of deaf education had been with the teaching profession. Former teachers and head teachers had gone on to work in the Ministry of Education Special Education Unit, in teacher training, and at the university. Teachers and former teachers had dominated the development of deaf education, the expansion of provision and new government policies. As the call for the recognition of the rights for disabled people had increased in Zimbabwe there had been a growing awareness of the rights of Deaf people, but control of deaf education still lay with hearing specialist teachers.

Since Independence the charitable organisations have continued to provide education for deaf and other disabled children. However, their control over their own schools has given way to increased government involvement. Government control has extended through the financial
provision, through the deployment of staff and more recently through the communications policy, sign language research, and the provision of hearing aids. By 1994 the churches and charities still had a welfare and fund-raising role in the special schools and some influence over government policy, however, their dominance of special education was over. Although the research indicated a period of conflict between the welfare NGOs and the churches and the government in the late 1980s when integrated provision was in its early stages, it seemed that by the mid 1990s there was acceptance on both sides of their positions in regard to types of educational provision. The main conflict, on this issue, in the 1990s was between the government and the Association of the Deaf and not the other NGOs.

External pressure to consider children with disabilities in basic, mainstream education has been placed on Zimbabwe as on other developing countries by intergovernmental organisations and bilateral aid agencies. The pressures from UNESCO to consider the rights of deaf and other disabled children were as moral imperatives and encouragements to sign and implement international declarations and statements. SIDA's approach had been very different with its large financial contributions to Zimbabwe's educational development it has prioritised the educational rights of disadvantaged groups in its aid programme with the government of Zimbabwe (see chapters 4-6).

The rights of Deaf people to use sign language as their primary means of communication and the rights of the Deaf community to be seen as a linguistic minority were the most recent demands from the national and
international Deaf community. The disabled persons' community in Zimbabwe has been challenging the charitable and medical models of disability throughout the 1980s and 1990s (see page 12-13). They have asserted their right to self determination and gradually forced professionals and the government to rethink policies and provision. The new Disability Act 1993 in Zimbabwe had gone some way towards acknowledging the rights of disabled people, and reflected a degree of consensus on these issues between most of the disability NGOs and the government. The Deaf community was however calling for the retention and expansion of special schools for deaf children as an educational option.

Coleridge (1993) noted that as a result of the early charitable and church educational provision for physically disabled and deaf children it was possible for a community of like minded disabled people to come together. With education they were eventually able to challenge the very institutions that had been the nurturing ground for their formation. The wider social and cultural climate had also changed. Ideas of charity and religious salvation were more acceptable in the 1950s and 1960s. The war of liberation and the international environment changed in the 1970s and 1980s when issues of civil rights, self advocacy and equal opportunities became common currency.

Integrated or Segregated Provision

Integrated provision for deaf children in resource units in mainstream, mostly primary, schools had been expanding since 1988. NGO and government provision prior to 1988 was in the special schools for deaf
children and in two mixed disability special schools. Through the expansion of resource units the government had been able to increase the number of deaf children offered an education. The government was committed to a policy of expansion in deaf education through the opening of more resource units as finance and staff became available. The special schools would stay open, but there was no intention to increase the number of special schools. The policy intention was for special schools to specialise in children with profound or complex difficulties while the units took children with moderate difficulties. In 1994 the schools and units were some way from achieving this aim.

There had been some concern over the expansion of unit provision from two very different quarters. First, the staff of special schools expressed some reservations about unit provision including the isolation of the specialist staff and the problem of acceptance of the deaf children by the mainstream school's staff, pupils and parents. Some staff were concerned about the level of communication that would be accessible to deaf children if they were fully integrated into mainstream classes. These staff were concerned the deaf children would become isolated because of poor communication.

Second the Association of the Deaf also opposed the expansion of deaf education through the provision of resource units, arguing instead for special schools, in line with WFD and recent UNESCO views, as in a special school a signing Deaf community was developed which allows easy and full communication using a bilingual approach.
The increased dominance of the government in making policy has meant that expansion has taken place through unit provision. In 1994 there were growing pressures on the government to consider alternative provision for deaf children, for example, in special schools. There had however been some consensus built up over a number of years between the original NGO providers and government about the future positions of special schools. The conflict over the type of provision for deaf children was linked to the debate about communication methods.

*The Oral/Signing Debate*

This is a significant area of debate and conflict in the education of deaf children and although the international arguments regarding the use of sign language are as applicable to Zimbabwe as any other developed or developing country, there has often been a failure to fully consider the implications for each method in relation to varying national situations.

The situation in Zimbabwe was still intimately bound up with the legacy of oral development in the first schools for the deaf. This legacy had meant that most if not all of the early teachers went overseas and were trained to teach deaf children using oral methods. This oral legacy brought with it an implicit need to use hearing aids, speech trainers, group aids, etc. to enhance the pupils’ spoken language. I found little evidence of any questioning of either the appropriateness of these early methods or of the use of technical aids. An overseas method was imported without a full consideration of its appropriateness or of the level of technical support needed.
The oral method implicitly required a high level of professional, technical and financial support. In Zimbabwe as in other developing countries there was a very low level of professional and technical support for teachers of the deaf. There were few if any early services to support parents of deaf children, there was also a low financial base to sustain any developments. All of the technical provision had to be imported at a high cost to schools. Charitable giving of old and used aids from overseas usually failed to take account of the need for batteries, new cords and on going repairs. Deaf children also require new ear moulds on an on-going basis, which requires laboratory conditions and technically trained staff.

This historical legacy of an oral approach made the use of signs in the education of deaf children impossible, although signing went on between the pupils outside their classrooms. The oral approach was aiming to make the deaf child speak in order to become part of the hearing community. Thus the formation of an adult Deaf community was to be discouraged. The overall aim was for deaf children to be assimilated as far as possible into the hearing society.

The development of a communications policy and the setting up of the sign language research in the late 1980's should be seen against this background of the dominance of the oral method and an acceptance of the need for technical support for deaf education.

The data showed that the communications policy was implemented without full commitment. Part of the aim was to bridge the gap between the mostly orally trained professionals and the small but growing interest in
a use of sign language in schools. The sign language research was set up at the same time but control was retained by the Ministry and hearing teachers of the deaf. There seems to have been little understanding of, or respect for the needs and rights of the Deaf community, who felt marginalised in the research process. The research had been delayed and difficulties had arisen over different regional signs and the sheer volume of data. The retention of control over the research by the teaching profession had resulted in a failure to call on the expertise of linguists and particularly the main users of the language, the Deaf community. The research had perpetuated the marginalisation of Deaf people and the Deaf community and had failed to recognise or respect their linguistic rights.

The indecision and lack of direction with the communications policy had been continued, at the same time as a major policy on hearing aids and technical support was being developed. The government has used overseas donor funds to purchase hearing aids for deaf children in Zimbabwe. SIDA money had also been used for the further technical training of a number of teachers of the deaf and, most recently, for the development of an Educational Services Centre in Harare to repair and maintain hearing aids for the entire country. Even with these developments there was still some way to go in providing suitable aids to every deaf child and the necessary support. The policy of only allowing aids for school aged children and only for use in schools needs to be reviewed.

In 1994 there was still no government hearing aid provision for pre school deaf children. Pre school deaf children seen by rehabilitation staff had to be provided with aids given by overseas charities. What provision there
was came from the efforts of staff in gaining financial support for the provision of ear moulds and replacement batteries. From the data collected there seemed to be some questioning about the future developments of technical services for deaf children.

There was a considerable dependence on overseas funding, and all hearing aids, audiometers and other technical equipment were imported. This area of special education is expensive and needs ongoing support in terms of equipment and trained staff. It also needs to be involved in the wider education of parents and the general public if children are to gain maximum advantage from their hearing aids.

In the past there seems to have been little questioning of the appropriateness of methods adopted from developed countries. The recent movement towards total communication methods and bilingual approaches in developed countries has a number of implicit assumptions, including a recognition of the value and rights of the Deaf community and their sign language, it also recognises the value of Deaf adults in pre school and school settings. Total communication and bilingual approaches in education also require the retraining of existing orally trained staff in the competent use of sign language.

Policies on communication in the education of deaf children were introduced in the 1980s and new developments had been made in the 1990s in terms of technical support. However, it would seem that the full implications of these policies had not been considered and although deaf
education was evolving the full intentions of these new policies were neither explicit nor straightforward.

The data has in part upheld the proposition that the extension of educational provision has been as a result of conflict and struggle between the identified interest groups. However in some areas such as in the role of international organisations in promoting inclusive schooling there has been some consensus regarding the recognition of the specific needs of deaf children regarding special school provision. The data did not show a similar consensus on this issue in Zimbabwe. The data also showed that over time some conflicts changed and a new acceptance was reached between the parties, as over the introduction of resource units. Sometimes to be replaced by a new conflict as between the government and ASSOD over the role of special schools.

Regarding the conflicts over policies in relation to communication methodology this seems to reflect the endemic nature of this issue in deaf education not only in Zimbabwe, but in many developing and developed countries. The research did identify the dominance of the teaching profession, lack of consistent ministry leadership, the relatively late development of the deaf NGO and the lack of an organised parents lobby as factors which may have allowed the government to retain control over this issue. However, the research seemed to indicate that conflict and struggle between the various interested parties on this issue looked set to continue long after 1994.
That deaf people are increasingly establishing themselves as a key interest group in the education of deaf children.

My research has provided evidence of the changing influence of deaf peoples' organisations at national and international level. It has also highlighted the significant role of sign language and linguistic rights as central to the argument of deaf peoples' organisations regarding education. In Zimbabwe deaf people have been slower to organise than other disability groups and this section looks at issues related to this.

In the last fifteen to twenty years the dominance of professionals in deaf and disability issues has been challenged. The views of disabled people both in Zimbabwe and internationally have been heard increasingly as they challenge the medical model of disability (see page 12-13). Disabled people have increasingly articulated an agenda of equal opportunities, equal rights and self advocacy. Deaf people have been a part of this campaign to challenge the status quo, in relation to education, access and equal rights. There has however, in the last five years, been a different and distinctive Deaf voice, calling for

- linguistic rights for Deaf people.
- for the recognition by governments and international organisations of sign language as the first language of the Deaf community, and
- for the use of sign language in the education of deaf children.
This has come to be known as a bilingual approach to the education of deaf children that has been pioneered by Sweden and the other Scandinavian countries, but is also being used in a number of situations in North America and Europe.

The consequence of advocating the use of sign language in the education of deaf children has been a rethinking of the type of educational provision that would be most suitable. As a result integrated provision has been challenged and WFD and others have questioned the value of integration for signing deaf children within mainstream provision, arguing that in a predominantly spoken environment signing deaf children do not have equal access to information and conversation. This has lead to a questioning of integrated provision as well as the newer concept of inclusive education.

In Zimbabwe the distinctive voice of the Deaf community has only been heard in the last few years. The organisation of Deaf people only has a few professionals, teachers and academics, sympathetic to their views. Although ASSOD is an organisation with a legitimate interest in government policy on deaf education, until 1994 it had been successfully discounted. The government labelled ASSOD as a pressure group and unrepresentative of the whole deaf community and by these tactics have managed to disregard their views. The views of ASSOD on sign language and special school provision challenged the professional control of teachers and Ministry staff over deaf education in Zimbabwe.
The organisations of deaf people at national and international levels have been slower to organise than the organisations of other disability groups for example, the blind and physically disabled. There are a number of possible explanations for this. Deaf people have only received a low level of education in Zimbabwe, secondary education was only introduced in the 1990s. As a result there was not a pool of well-educated deaf people, with the necessary language skills, to start such an organisation. Deaf people also found it difficult to participate fully in organisations of disabled people because there was a lack of sign language interpreters, to facilitate easy communication. Deaf people were for many years therefore excluded both from hearing society and from the disability movement.

The Deaf organisations are not in total agreement with other organisations on policies relating to education, particularly regarding integrated or inclusive education. As a result there has been a recognition, nationally and internationally, of the need for single issue, disability groups to represent the particular and specific need of one group, while still recognising the need for umbrella organisations to represent, as far as possible, areas of common interest.

My research has highlighted the role of the new organisation of Deaf people in the education of deaf children. Up until 1994 this group was providing a challenge to government policy on deaf education in relation to communication policy and the provision of special schools. The government had so far resisted their calls and the control over deaf education remained firmly with the teachers and Ministry staff. However, as with the organisation of physically disabled people it might only be a
matter of time before their concerns will be heeded. The regional and international organisation of Deaf people could possibly accelerate the acceptance by government and others of deaf people’s case regarding education.

The Future of Deaf Education in Zimbabwe

A number of the people I interviewed for my research provided optimistic predictions regarding the future of deaf education in Zimbabwe. The optimists predicted expansion in teacher training, increased provision in integrated placements and developments in nursery and secondary provision. A number of realists noted that there was still a need for institutions and special schools for children with disabilities, but they hoped for a future with better local services in rehabilitation and education. Another person saw a future for the existing special schools in research and training and also to provide for children with complex and profound disabilities.

A number of people pointed out key areas of concern regarding the communication policies and a lack of adequate support for profoundly deaf children. These people highlighted the different needs of partially hearing children and those with a profound loss, and observed that there was no differentiation in policy or provision for these two groups. The groups have different needs in terms of communication and technical support that were not being addressed at the time the research was carried out. These observers highlighted the need for a more clearly articulated and
implemented communications policy in order to meet the needs of students and make use of limited resources in a period of economic stringency.

Discussing the role of NGOs, my interviewees saw a more clearly defined role for them in the light of the new government control over expanding integrated provision. The NGOs were able to see a future in providing financial and welfare support for the special schools, increasing vocational training, and the possibility within government structures of pioneering new developments such as reverse integration initially at nursery level. The organisations of disabled people would continue to develop their role in the areas of advocacy and empowerment.

There were in 1994 more deaf children in school than at any time in the history of the country. Nevertheless a large number remain outside education. Although in many respects the expansion of education for deaf children lies in the control of the teachers, heads, ministry staff, therapists, lecturers and the Deaf people who assisted in my research, there was also a sense in which control over educational expansion lay beyond the immediate participants, in the hands of the staff of the World Bank and IMF, bilateral aid agencies and those working for intergovernmental organisations (see chapter 6).

**National Developments**

My research has sought to describe and analyse developments in the education of deaf children in Zimbabwe in relation to the national
economic, social and educational context. Section 2 provided details of the changes in society from the colonial to the post-Independence eras. It has also plotted the changing economic fortunes of the country and the growing problems of the economic structural adjustment programme (ESAP).

The effects of ESAP on education in the 1990s had been detrimental to many groups in society. Educational expenditure had decreased and school fees had increased. Large numbers of children were as a result unable to attend school, and some families were not able to send all of their children to school. The effects of ESAP were felt throughout education and health and although at the time of my fieldwork there was little evidence of cut backs in special education and rehabilitation services, it would seem that it was only a matter of time before cuts in services became a reality.

**International Influences**

Many commentators in Zimbabwe and in other developing countries consider ESAP to be the new colonialisation of Africa, this time with control in the hands of the World Bank and the IMF. Economic and social development in Zimbabwe are linked to global problems and issues. The sovereignty of the national government over educational and other issues was thus being brought into question. ESAP had had far-reaching effects on government policies not only in the economic sphere but also in the areas of health, education and social policy.
The economic and social policies implemented in the 1990s as a result of ESAP need to be considered in addition to the international influences discussed in Proposition 1. Information is needed as the country seeks to implement details from the Framework for Action from the 1990 Jomtein Declaration on Education for All and the Salamanca Declaration on special needs education in a deteriorating economic situation.

**Areas for Further Research**

This research has highlighted a number of key areas for further research into the education of deaf children, special needs policies in developing countries, and the internationalisation of deaf education issues.

In the area of deaf education future comparative and international research on the development of policies, the types of provision and in the areas of communication policy, technical support and teacher training could provide developing countries with important information on deaf education in similar economic and social situations. A number of studies of the transition from oral methods to the use of a total communication or bilingual policy again in the context of developing countries would also be a valuable contribution to research. Research also needs to be undertaken into the varying influences of the Deaf community and culture on the education of deaf children in a number of different national settings.

The international comparative study of special education is beginning to flourish with increased publications in this area. Although much of the current work is descriptive in nature the development of a more analytical
approach would be beneficial to policy makers, practitioners and researchers. Further work on the effects of economic policies and structural adjustment programmes on special education and disability policies would prove useful in the debate surrounding the social and developmental costs of ESAP.

Finally there is a need for further analytical and critical research into the work of intergovernmental organisations, bilateral aid agencies and international NGOs in order to increase our understanding of the power and influence of these organisations on each other and on national governments in both developed and developing countries.
APPENDICES
APPENDIX 1

DATA COLLECTION

STOCKHOLM, SWEDEN CONFERENCE AUGUST 1993

Interviews conducted

Cynthia Weekes - St Lucia School for the Deaf, St Lucia.
Maria Chiswanda - University of Zimbabwe, Zimbabwe.
Agnes Masoko - Teacher trainer, Botswana.
Qwamar Um Isa Khan - Deputy Director International Institute of Education, Islamabad Pakistan.
Tirmussew Teferra - University of Addis Ababa, Ethiopia.
Innocent Djonthe - Special Education and Rehabilitation Centre, Bafoussam, Cameroon.
Lena Salah - Special Education Unit, UNESCO, Paris.
Osaman Swar-Aldahab - Sudanese National Association of the Deaf Sudan.

REPORT OF TRIP TO ZIMBABWE OCTOBER 1993

PURPOSE OF THE VISIT This preliminary visit to Zimbabwe was planned for a number of reasons:
• to deliver my papers and research proposal for the Research Council of Zimbabwe to my Zimbabwean sponsor Dr Peresuh
• to discuss with Dr Peresuh and other academics my research proposals and ideas
• to visit schools for deaf children in Zimbabwe
• to visit a community based rehabilitation unit working with pre school deaf children
• to talk to staff from non governmental organisations involved in the education of deaf children
• to talk to staff from international agencies funding special education work in Zimbabwe
• to collect any other background information on education, special education and disability issues in Zimbabwe.

**SUMMARY OF VISIT** The visit to Zimbabwe was successful in a number of ways. I managed to fulfil most of the original objectives and have contacted additional organisations and individuals who will be useful during my second visit. I also managed to collect a significant number of documents, papers and government acts for analysis.

During my trip I visited the following
- Emerald Hill School for Deaf Children, Harare
- St Giles School, Harare
- Henry Murray School for the Deaf, Morgenster Mission, Masvingo
- Children's Rehabilitation Unit, Harare Central Hospital, Southerton, Harare
- Association of the Deaf Zimbabwe (ASSOD) Mbare Hostels, Harare
- UNESCO Regional Office, Highands, Harare
- Special Education Advisor, SIDA, Swedish Embassy, Harare
- NANGO, National Association of Non Governmental Organizations, Harare

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- Government Printers
- University of Zimbabwe, where I spoke to the following people:
  
  Prof. Betty Jo Dorsey
  
  Dr Peresuh
  
  Ms N. Khan
  
  Ms M. Chiswanda

- African Rehabilitation Institute

ZIMBABWE TRIP APRIL-MAY 1994

Including:

List of visits and interviews

Document list

List of Visits and Interviews

Wilson Ruvere - Jairos Jiri Association

Mr Karikoga - Headteacher Emerald Hill School for Deaf

John Charema - Former Headteacher Naran Centre Jairos Jiri Association school for deaf children

Monique Bekker - UNESCO Associate Expert Special Education Regional Office Harare

Mr Musagedi - Ministry of Higher Education

Mrs Gotera - Director NASCOH

Mrs Chidyausiku - Chief Therapist, Ministry of Health

Mr Mpofu - University of Zimbabwe, formerly chief regional psychologist Masvingo
Robert Chimwedza - University of Zimbabwe Teacher Education Dept.
formerly Education Officer Ministry of Education and Culture
responsibility for hearing impaired children

Mr Karikoga - headteacher of Emerald Hill School

Mr Charema - University of Zimbabwe, formerly from the Naran Centre

Mr Peterson - Headteacher St Giles School, Harare

Mr Troedsson - SIDA, Harare office

Mrs Oderinde - Ministry of Education and Culture Education Officer
responsibility for mental retardation

Dr Moyo - Lecturer in hearing impairment United College of Education
Bulawayo

Joanne Jefferson - Speech and communication therapist Mpilo Hospital
Bulawayo

Ruth Afarko - Speech and communication therapist Ministry of Education
and Culture Bulawayo

Mary Barrett - Chief psychologist Bulawayo, Matabeleland region

Day visit to King George VI Memorial School

Mr Zharare - Jairos Jiri Association Head office, Bulawayo

Mr Rinashe - Ministry of Education and Culture Education officer
responsibility for visually impaired children

Linda Portsmouth - Speech therapist Harare Central hospital

Mr Hadabe - Ministry of Education and Culture.

INTERVIEWS NOT COMPLETED

Mr Sithole NCDPZ
Jabulani Manombe Naube Disability consultant
Laina Magama ILO
Jonathan Thebe ASSOD
Documents collected

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Vol. 1 no 1 March 1989
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Vol. 2 no 2 July 1990
Vol. 5 no 1 March 1993

**Human Resources Research Centre**

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" " Issue No 29.


UNICEF


UNIVERSITY OF ZIMBABWE

University of Zimbabwe Faculty of Education Course Programme BEd Special Education.
APPENDIX 2

ZIMBABWE BACKGROUND INFORMATION

Geography  The Republic of Zimbabwe is a landlocked country in Southern Africa. It has borders to the east with Mozambique, to the south with South Africa, to the south west with Botswana and to the north east with Zambia. The country has a central ridge of high veld rising to between 1200 and 1500 metres. To the south west and north east lies the Middle Veld and the Lowveld plateaux. The main rivers are the Zambesi, Limpopo and Sabi.

The climate is tropical although modified by the altitude in the high veld region. Average temperatures are 13-22C in the lower river valleys; the temperatures are higher: 20-30C on average. The rainy season is November to March. There is a marked dry season from June to September. Drought has been a problem in Zimbabwe in recent years affecting farming and wild life.

The main towns are Harare, Gweru, Mutare and Chitungwiza.

Population  8,640,000 (1987 est). There are two main tribal groupings in Zimbabwe: the Shona and the Ndebele. The ratio of
Shona to Ndebele is 5.2:1. Languages include English (official) Sindebele and Chishona. Approximately half of the population are Christians the rest follow tribal beliefs. 97% of the population are indigenous people 3% are European or Asian. The population growth is approximately 3.5%. 20% of the population live in urban areas.

Area 150,084 sq. miles (390,580 sq. km), approximately one and a half times the size of the UK.

Economy Zimbabwe has a mixed economy based around agriculture, industry, mining and manufacturing. Agriculture employed 68% of the workforce in 1990 and contributed 12.9% to GNP. The main cash crops are tobacco, maize, cotton, coffee and sugar. Wheat, soyabean and groundnuts are also produced. Beef production is important. Industry contributed 40% to GNP in 1990 and included mining manufacturing construction and power. Mining is for gold, asbestos and nickel these are major exports. Copper, silver, emeralds, lithium, tin, iron ore, cobalt, chromium and coal are also mined. In manufacturing the major sectors are food processing, metals, chemicals and textiles. Tourism is expanding and is a good source of overseas currency. Chapters 5 and 6 give an account of the debt crisis in Zimbabwe and the structural adjustment programme in place since 1990.
Employment

The largest area of employment is in agriculture. This is followed by the service sector, manufacturing, public administration and trade.


CHAREMA, J. (1994) Lecturer, University of Zimbabwe, formerly Naran School Gweru.

CHIDYAUSIKA, Mrs (1994) Senior Therapist Ministry of Health.


CHIMEDZA, R. (1994) Lecturer, University of Zimbabwe.


EVANS, Mr (1993) private hearing aid dealer, Harare.


GOTERA, Mrs (1994) Director NASCOH.


KARIKOGA, Mr (1994) Headteacher, Emerald Hill School.


MAZHANDE, Mr (1993) ASSOD.

MOYO, Dr (1994) Lecturer UCE, Bulawayo.

MPOFU, Mr (1994) Lecturer, University of Zimbabwe.

MUSEGEDI, Mr (1994) Ministry of Higher Education.

ODERINDE, Mrs (1994) Special Education Section, Ministry of Education.
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