

**FACTORS AFFECTING THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY  
CHILDHOOD DEVELOPMENT CENTRES IN MASVINGO PRIMARY SCHOOLS, ZIMBABWE**

**by**

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## **SUMMARY**

The study investigated factors affecting the inclusion of children with disabilities in early childhood development centres in primary schools in Masvingo Province, Zimbabwe. This was utilized as a basis for strategizing on improving their inclusion requirements and proposing a model of inclusive education in early childhood. The study was conducted in the framework of the post-positivist paradigm which used a mixed methods research approach and a [convergent parallel mixed methods](#) design. Self-administered questionnaires and interviews were used to collect data. Thirty-six teachers, 12 school-heads and 24 parents of children with disabilities were purposefully sampled and participated in the study. The Statistical Package for the Social Sciences, version 16.0 was used to compute Chi-square tests in analyzing quantitative data. Qualitative content analysis was used to identify themes emerging from open-ended questionnaire items and interviews. Theme identification methods involved identifying recurrent instances across data sets and grouping them. The study revealed that disability-friendly resources were unavailable and this negatively influenced the inclusion of children with disabilities in ECD centres to a large extent. The lack of disability-friendly resources was caused by low budgetary allocations and was worsened by some educators not knowing about and therefore not requesting, additional funds available from government for schools enrolling children with disabilities. The lack of resources because of unavailability of funding to procure play materials, assistive devices and other disability-friendly resources negatively influenced the inclusion of children with disabilities. Without appropriate support structures, children with disabilities were unable to freely participate in play activities and so were isolated. It was further revealed that negative attitudes by stakeholders such as government, school-heads, some teachers and parents of children with disabilities negatively affected the inclusion of children in ECD. Teachers were negative about including children with physical disability, epilepsy and hearing impairment in ECD classes and the more severe the disability was, the more unlikely it was to be included in class. It was also revealed that there was a lack of mandatory policies on inclusion. This meant that there was no legally binding framework for effective and efficient planning and implementation of inclusive education for children with disabilities in the ECD Centres in primary schools. Existing general education policies were not detailed enough to give proper guidance for implementation of inclusive education. Furthermore, the lack of proper policy guidance was compounded by a lack of specialist training in special needs education, which negatively affected the inclusive education of children with disabilities in early childhood education. Various strategies were suggested in order to improve the inclusion requirements of children with disabilities in ECD classes in primary schools. Key among these strategies included a proposed model featuring policy development that reciprocally interacts with teacher training, disability mainstreaming, sensitization and resource mobilisation at various levels. A government policy that mainstreams disability so that disability studies become part of the curriculum throughout the education system was recommended. It was also recommended that schools and other stakeholders intensify disability-awareness campaigns in order to develop positive attitudes towards disability. It was further recommended that government budgets for, and provides disability-friendly resources, to all ECD Centres in primary schools and pre-service and in-service training for all teachers in special needs and inclusive education, so as to facilitate the accommodation of learners with disabilities, as they have more needs than their peers without disabilities. Recommendations for further research were also made.

## **KEY TERMS**

Children with disabilities, Early Childhood Development centres, Disability, Inclusion, Inclusive education, Primary schools, Special Needs Education, Zimbabwe.

## DECLARATION

Student number: 58561242

I declare that **Factors affecting the inclusion of children with disabilities in early childhood development centres in primary schools in Masvingo Province, Zimbabwe** is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.



18 November 2021

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Signature

Date

MRS. E. MUSENGI

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**DEDICATION**

The current thesis is dedicated to my late father, Ndati Rwaringesu Dzora, for his inspiring belief in the education of all children.

## LIST OF FIGURES

Fig 1.1: Bio-ecological Model of including children with disability in early childhood development.....	12
Fig 3.1 Convergent parallel mixed methods design .....	55
Figure 5.1: A proposed E. Musengi (2020) model for improving the inclusion requirements of children with disabilities at ECD Centres in primary schools .....	139

## LIST OF TABLES

Table 4.1: Extent to which the availability of resources influences the inclusion of children with disabilities in early childhood education in Zimbabwean primary schools.....	70
Table 4.2: The extent to which stakeholders' attitudes affect the inclusion of children with disabilities in early childhood education.....	76
Table 4.3: Extent to which policies influence the inclusion of children with disabilities in early childhood education .....	83
Table 4.4: Extent to which teachers' training influences the inclusion of children with disabilities in early childhood education.....	88
Table 4.5: The extent to which the type and severity of disability affect the inclusion of children with disabilities in ECD.....	93
Table 4.6: Strategies which can be employed to improve the inclusion requirements of children with disabilities in ECD.....	98

## Table of Contents

SUMMARY .....	ii
KEY TERMS .....	ii
DECLARATION .....	iii
ACKNOWLEDGEMENTS .....	iv
DEDICATION .....	v
LIST OF FIGURES.....	vi
LIST OF TABLES.....	vii
TABLE OF CONTENTS.....	viii
<b>CHAPTER 1: THE PROBLEM AND ITS CONTEXT.....</b>	<b>1</b>
1.1 INTRODUCTION .....	1
1.2 BACKGROUND TO THE STUDY.....	1
1.3 STATEMENT OF THE PROBLEM .....	8
1.4 SUB- RESEARCH QUESTIONS .....	8
1.5 OBJECTIVES OF THE STUDY .....	9
1.6 RATIONALE FOR THE STUDY .....	9
1.7 ASSUMPTIONS OF THE STUDY .....	16
1.8 LIMITATIONS .....	16
1.10.1 Overcoming the limitations .....	17
1.11 DELIMITATIONS.....	17
1.12 DEFINITION OF TERMS.....	17
1.12.1 Disability .....	18
1.12.2 Children with disabilities .....	19
1.12.3 Early childhood education .....	19
1.12.4 Inclusion.....	19
1.12.5 Inclusive Education .....	19
1.12.6 Special Needs Education .....	19
1.12.7 Early childhood interventions .....	19
1.12.8 Early Childhood Inclusion .....	19
1.13 SUMMARY .....	19
<b>CHAPTER 2: REVIEW OF RELATED LITERATURE .....</b>	<b>20</b>



2.1 INTRODUCTION .....	20
2.2 RESOURCES AND INCLUSIVE EARLY CHILDHOOD DEVELOPMENT .....	20
2.3 STAKEHOLDERS' ATTITUDES AND INCLUSIVE EARLY CHILDHOOD EDUCATION .....	24
2.4 POLICIES AND INCLUSIVE EARLY CHILDHOOD EDUCATION .....	29
2.5 TEACHERS' TRAINING AND INCLUSIVE EARLY CHILDHOOD EDUCATION .....	34
2.6 TYPE AND SEVERITY OF DISABILITY AND INCLUSIVE EARLY CHILDHOOD EDUCATION .....	39
2.7 STRATEGIES FOR IMPROVING THE INCLUSION OF EARLY CHILDHOOD EDUCATION	
LEARNERS.....	43
2.8 SUMMARY .....	48
<b>CHAPTER 3: RESEARCH METHODOLOGY</b> .....	<b>49</b>
3.1 INTRODUCTION .....	49
3.2 RESEARCH PARADIGM .....	49
3.3 RESEARCH APPROACH .....	50
3.3.1 Quantitative Approach.....	52
3.3.2 Qualitative Approach.....	52
3.4 RESEARCH DESIGN .....	53
3.5 POPULATION .....	55
3.5.1 TARGET POPULATION .....	55
3.5 SAMPLE .....	56
3.6 INSTRUMENTATION .....	56
3.6.1 Questionnaires.....	57
3.6.2 Interviews.....	58
3.7 PILOT STUDY.....	59
3.7.1 The Sample for the Pilot Study .....	59
3.7.2 Data Collection Procedures for the Pilot Study .....	61
3.8 VALIDITY, RELIABILITY AND TRUSTWORTHINESS.....	61
3.8.1 Reliability.....	61
3.8.2 Validity .....	61
3.8.3 Trustworthiness for Qualitative Data .....	62
3.9 DATA COLLECTION PROCEDURES .....	64
3.10 DATA ANALYSIS .....	64
3.10.1 Coding .....	64
3.10.2 Statistical Analysis.....	64
3.10.3 Content Analysis .....	65

3.11 ETHICAL ISSUES .....	66
3.11.1 Permission.....	66
3.11.2 Informed consent.....	66
3.11.3 Anonymity.....	66
3.11.4 Confidentiality.....	66
3.11.5 Protecting respondents from any form of harm .....	66
3.12 SUMMARY .....	67
<b>CHAPTER 4: DATA PRESENTATION, ANALYSIS AND DISCUSSION .....</b>	<b>68</b>
4.1 INTRODUCTION.....	68
4.2 AVAILABILITY OF RESOURCES AND THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION IN ZIMBABWEAN PRIMARY SCHOOLS .....	69
4.2.1 Quantitative results .....	69
<b>4.2.2 Qualitative results.....</b>	<b>75</b>
4.3 EFFECT OF STAKEHOLDERS' ATTITUDES ON THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION IN ZIMBABWEAN PRIMARY SCHOOLS .....	75
4.3.1 Quantitative results .....	75
4.3.2 Qualitative results.....	77
4.4 THE INFLUENCE OF POLICIES ON THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION .....	82
4.4.1 Quantitative results .....	82
4.4.2 Qualitative results.....	84
4.5 THE INFLUENCE OF TEACHERS' TRAINING ON THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION .....	87
4.5.1 Quantitative results .....	87
4.5.2 Qualitative results.....	89
4.6 EFFECTS OF TYPE AND SEVERITY OF DISABILITY ON THE INCLUSION OF CHILDREN WITH DISABILITIES IN ECD .....	92
4.6.1 Quantitative results .....	92
4.6.2 Qualitative results.....	94
4.7 STRATEGIES FOR IMPROVING THE INCLUSION REQUIREMENTS OF CHILDREN WITH DISABILITIES IN ECD.....	97
4.7.1 Quantitative results .....	97
4.7.2 Qualitative results.....	99
4.8 DISCUSSION OF RESULTS .....	101
4.8.1 Resources and early childhood development.....	101
4.8.2 Stakeholders' attitudes and early childhood education .....	106
4.8.3 Policies and inclusive early childhood education .....	111

4.8.4 Teachers’ training and inclusive early childhood education.....	115
4.8.5 Type and severity of disability and inclusive early childhood education.....	118
4.8.6 Strategies for improving the inclusion of early childhood education learners.....	122
4.9 SUMMARY.....	127
<b>CHAPTER 5: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS</b> .....	<b>128</b>
5.1 INTRODUCTION.....	128
5.2 REVIEW OF THE RESEARCH PROBLEM.....	128
5.3 SUMMARY OF RELATED LITERATURE.....	129
5.3.1 Resources and inclusion of children with disabilities in early childhood education .....	129
5.3.2 Stakeholders’ attitudes and inclusion of children with disabilities .....	129
5.3.3 Policies and the inclusion of children with disabilities .....	129
5.3.4 Teacher training and the inclusion of children with disabilities.....	130
5.3.5 Type and severity of disability and the inclusion of children with disabilities .....	130
5.3.6 Strategies for improving inclusion of children with disabilities.....	131
5.4 SUMMARY OF RESEARCH METHODOLOGY .....	131
5.5 SUMMARY OF THE FINDINGS.....	132
5.5.1 Sub-research question 1: How do resources influence the inclusion of children with disabilities in early childhood education in Zimbabwean primary schools? .....	132
5.5.2 Sub-research question 2: To what extent do attitudes of stakeholders affect the inclusion of children with disabilities in early childhood education in Zimbabwe? .....	133
5.5.3 Sub-research question 3: To what extent do policies influence the inclusion of children with disabilities in early childhood education in Zimbabwe? .....	133
5.5.4 Sub-research question 4: How does teacher training influence the inclusion of children with disabilities in early childhood education in Zimbabwean primary schools? .....	134
5.5.5 Sub-research question 5: How does the type and severity of disability affect the inclusion of children with disabilities in early childhood education in Zimbabwe? .....	134
5.5.6 Sub-research question 6: What strategies can be employed to improve inclusion requirements of children with disabilities at ECD level in Zimbabwean Primary Schools? .....	135
5.6 CONCLUSIONS.....	135
5.7 RECOMMENDATIONS.....	136

5.7.1 Policy .....	136
5.7.2 Practice .....	136
5.7.3 A proposed model for improving the inclusion requirements of children with disabilities .....	138
Component 1: Development of national policy on inclusive education of children with disabilities	140
Component 2: Development of school policies on inclusive education of children with disabilities	140
Component 3: Disability mainstreaming .....	141
Component 4: Disability sensitization and early intervention.....	141
Component 5: Teacher training .....	142
Component 6: Resource mobilization.....	142
5.8 CONTRIBUTION OF THE STUDY .....	143
5.9 RECOMMENDATIONS FOR FUTURE RESEARCH .....	143
5.10 FINAL COMMENTS .....	144
REFERENCES .....	145
<b>APPENDIX A: ETHICS CLEARANCE CERTIFICATE.....</b>	<b>170</b>
<b>APPENDIX B: QUESTIONNAIRE FOR PRIMARY SCHOOL-TEACHERS TEACHING ECD A &amp; B LEARNERS WITH DISABILITIES.....</b>	<b>172</b>
<b>APPENDIX C: QUESTIONNAIRE FOR PRIMARY SCHOOL-HEADS (PRINCIPALS) .....</b>	<b>180</b>
<b>APPENDIX D: INTERVIEW GUIDE FOR PARENTS OF ECD A &amp; B LEARNERS WITH DISABILITIES .....</b>	<b>187</b>
<b>APPENDIX E: MINISTRY OF EDUCATION, ARTS, SPORTS AND CULTURE PERMISSION LETTER.....</b>	<b>190</b>
<b>APPENDIX F: MASVINGO DISTRICT AUTHORIZATION LETTER .....</b>	<b>191</b>
<b>APPENDIX G: ZAKA DISTRICT AUTHORIZATION LETTER.....</b>	<b>192</b>
<b>APPENDIX H: BIKITA DISTRICT AUTHORIZATION LETTER.....</b>	<b>193</b>
<b>APPENDIX I: REQUESTING PERMISSION FROM MINISTRY OF PRIMARY AND SECONDARY EDUCATION TO CONDUCT RESEARCH IN MASVINGO PRIMARY SCHOOLS.....</b>	<b>194</b>
<b>APPENDIX J: PARTICIPANT INFORMATION SHEET / PRINCIPALS’ LETTER FOR CONSENT .....</b>	<b>196</b>
<b>APPENDIX K: PARTICIPANT INFORMATION SHEET / TEACHERS’ LETTER FOR CONSENT .....</b>	<b>200</b>
<b>APPENDIX L: PARTICIPANT INFORMATION SHEET / PARENTS’ LETTER FOR CONSENT .....</b>	<b>204</b>
<b>APPENDIX M: CONFIRMATION OF EDITING .....</b>	<b>208</b>



## **CHAPTER 1: THE PROBLEM AND ITS CONTEXT**

### **1.1 INTRODUCTION**

The study sought to establish factors affecting the inclusion of children with disabilities in early childhood centres in primary schools in the Masvingo Province of Zimbabwe. To this end, this chapter outlines the problem and its context. The chapter discusses the background to the study, statement of the problem, research questions, objectives and significance of the study. The chapter also presents the theoretical framework, assumptions of the study, limitations, delimitations and definition of key terms.

### **1.2 BACKGROUND TO THE STUDY**

Disability is a human constant, meaning that human societies have, and have always had, members with disabilities (Groce, 1988:23). Disability can occur at three levels. Level one is impairment in body function or structure, such as cataract which prevents the passage of light and sensing of visual stimuli. Level two is a limitation in activity, such as the inability to read or move around, and level three is the restriction in participation, such as exclusion from school (WHO, 2012). Disability refers to the consequences of impairment, that is, any restriction or lack of ability to perform an activity in the manner or within the range considered appropriate for non-impaired persons (Mangal, 2007:11; Groce, 1988:23; UNESCO, 2015:15; ILO, 2012:33). Flollari (2011:208) takes disability as the reduction of function or the absence of a particular body part or organ. What it means is that the term 'disability' summarises a great number of different functional limitations occurring in any population in any country of the world. The range of disabilities includes albinism, hearing impairment, visual impairment, intellectual disability, physical disability, learning disability, speech and language problems, chronic health conditions such as epilepsy, diabetes and others (WHO, 2012:9; Director's Circular Number 3 of 2005:2). The number of children with such a wide range of functional limitations is reported to be increasing globally (UNICEF, 2013:36; Berns, 2010:7; World Bank, 2011:10).

At the same time that global disability prevalence is on the increase, UNESCO (2011:18) observed that the demand for ECD in national education systems is clearly rising. Worldwide, the number of children enrolled in pre-primary education (3-6 years) exceeded 157 million in 2009 and 700 million were enrolled in primary education and the global gross enrolment was 46% (UNESCO, 2011:18). Despite this progress, great variations exist in regional, sub-regional and national levels. General enrolment rates ranged from 80% on average in North

America and Western Europe to 17% and 19%, respectively, in Sub-Saharan Africa and in the Arab states (UNESCO, 2011:18). Research revealed that 15% of the world population lives with some form of disability and within this population, the estimated number of children with disabilities between zero and eighteen years ranges from 93 million and 150 million (World Bank, 2011:8; UNICEF, 2013:3; Berns, 2010:14).

Of the 53, 9 million school aged children (5-17 years) in the US, about 2, 8 million (5, 2%) were reported to have a disability in 2010 (Brault, 2010:1). In Hong Kong, 95% of children attend ECD (UNESCO, 2015:18). In China 36, 8% of children between 0 and 5 years old were in school in 2010 (Song, Zhu, Xia & Wu., and 2014:35). In Sweden, about 95% of children between 3 and 6 years are at school (Lundqvist, Westling & Siljehag., and 2015:126). In Europe alone, 12 million children aged from 0 to 5 years were in early childhood education in 2011 and children with disabilities are included within mainstream education (European Commission, 2013:4). In Sweden, about 95% of children between ages three and six years attend formal education (European Union, 2014:126). The overall prevalence rate for preschool and primary aged children (ages 3 to 10 years) with disabilities is approximately 2, 6% of childhood population in Bangladesh (UNICEF, 2007:9). It is estimated that 1 735 121 children in Bangladesh, out of 18 million children in the range 6 to 11 years, have a disability (UNICEF, 2007:40). About 20% of young children with disabilities are being catered for in early childhood education in Korea (Kim, 1994:2).

In Africa, Rwanda has one of the highest primary school enrolment rates and had a total number of primary school learners of 2 399 439 in 2012. In the same year, the total number of children with disabilities aged between 3 and 6 was 15 831 (UNICEF, 2013:23). In Uganda, the prevalence of disability among children in ECD is estimated as 80% (Ejuu, 2016:3). Data available shows that the prevalence of disability among children is very high. For instance, a UNICEF survey showed that the prevalence of disability among children aged 2-9 years is as high as 31% in Sierra Leone, 23% in Cameroon and 16% in Ghana (ACPF, 2014:35).

A comparison of developed and developing nations shows a big difference in disability prevalence and availability of data on disability. Hu, Roberts, Wang and Zhao (2011:124) showed that the world's 450 million people with disabilities are found in developing countries and by year 2000, these countries accounted for more than 80% of the world's people with disabilities. This high percentage of people with disabilities in developing countries is

documented in research, showing that the proportion of disability caused by communicable, maternal and peri-natal diseases is quite high in developing countries (National Disability Survey, 2013:24; Moore, 2003:17; Elwan, 1999:11). The implication is that the number of children with disabilities is much higher in developing countries than in the developed countries that have been discussed so far. This observation is important because, according to the Zimbabwe National Disability Survey (2013:24), information on disability in low-income countries is limited. Elwan (1999:12) attributes the under-researching of disability issues in developing countries to the fact that disability is a relative term, which makes measurement problematic. Developing countries, therefore, usually rely on estimates based on international data. For example, Shumba and Taukobong (2009:125) estimate that about 10% of children in Botswana have a disability.

It is estimated that 600 000 children with disabilities are of school going age in Zimbabwe (Deluca, Tramontano & Kent, 2014:4; Chakuchichi, 2013:36). Ages 2-9 years constitute ECD level in Zimbabwe. Education in Zimbabwe has shown consistent improvements in access and learning as ECD net enrolment increased to 31% for 4-5 year olds and primary net enrolment exceeds 93% with gender parity (UNICEF, 2014:1). According to the UNICEF Annual Report of 2014, primary net attendance is highest in Masvingo Region (90%) (UNICEF, 2014:2) The Ministry of Primary and Secondary Education has put more emphasis on early identification of learners with disabilities so that they attend school at an appropriate age, like their counterparts without disabilities (UNESCO, 2008:7). Consequently, the number of children with various disabilities who were able to access education in early childhood education increased from 248 to 22 118 in 2007, an increase of 8 819%. This means that quite a significant number of children at the stage of early childhood development in Zimbabwe have a disability.

Prior to Independence, pre-school education was a preserve of a few, mostly urban families (Berns, 2010:7). In Zimbabwe, the ECD Programme was introduced to correct the colonial imbalances in education and empower all students regardless of colour, race or creed to acquire skills (Chiparange & Saruchera, 2016:130). Zimbabwe's Ministry of Primary and Secondary Education annual statistical report of 2012 reveals that a total of 5 625 (98%) primary schools in the country have attached ECD classes (Education for All, 2015:4; Majoko, 2016:14). This has made ECD education accessible and affordable to the majority of children in the country (UNICEF, 2014:2; UNESCO, 2008:8) and suggests that the number of children with disabilities who attend school may also have increased.



According to Zimbabwe's Ministry of Primary and Secondary Education secretary's circular number 14 of 2004, education for children in early childhood development in Zimbabwe is in two phases. In Phase One each primary school is expected to attach one ECD class of four to five-year olds, known as the ECD (B) class. In the second phase, another group of three to four year olds, known as ECD (A) class would again be attached to primary schools. In 2011, some 5 689 schools had attached ECD (B) classes and 3 610 schools had attached ECD (A) classes of the 5 730 schools in the country (Principal Director's circular number 26 of 2011:18). The UNICEF (2013) figure of 78.8 % of children with disabilities who access education in Zimbabwe is consistent with the foregoing arrangements for ECD, which are also captured by Zimbabwe's Ministry of Primary and Secondary Education's annual statistical report of 2012. The Ministry's 2012 report, which does not deal specifically with disability, reveals that 98% of primary schools in the country offer ECD classes (Education for All, 2015:25).

According to the Ministry of Primary and Secondary Education's national report on the status of education (UNESCO, 2008:25), educational provision in Zimbabwe is currently based on a two-tier system of regular and special education. Not all school-age children with disabilities are catered for in the few available special schools or resource units, so some are in the regular education system in mainstream schools (UNESCO, 2008:7). This implies that many children with disabilities attend regular ECD and infant classes in mainstream schools. Attendance of children with disabilities in mainstream schools is part of a global strategy referred to as inclusion.

Inclusion is a UNESCO global strategy to try and address learning needs of all disadvantaged, marginalized and excluded learner groups (UNESCO, 2002:5). Zimbabwe is a signatory to the Salamanca statement and framework for action on special needs education and several other inclusive education related charters and conventions (Chireshe, 2013:224; Chireshe, 2011:157; Musengi, Mudyahoto, & Chireshe, 2010:3). The adoption of UNESCO's Salamanca statement and framework for action on special needs education has resulted in the inclusion of children with special educational needs in education settings becoming a primary service option (Chireshe, 2013:223). [In the context of decolonization debates, the origin of inclusive education in the Salamanca Report has been critiqued as a project located in coloniality, shaped by the hegemony of Western philosophies, forms of knowledge and discourses, emergent from a predominantly resource-rich model of support provision in high-income countries and](#)

imposed upon countries of the global south, for example Walton (2018:73) and Muthukrishna and Engelbrecht (2018:4). This criticism however, unnecessarily sidelines the fact that colonization introduced a strong special education system that marginalized learners with disabilities from mainstream education. Therefore, it can be argued that this colonial system necessitated inclusion as an important antidote on the global educational development agenda as has been documented extensively elsewhere (Engelbrecht & Artiles, 2016; Terzi, 2008; Waitoller & Artiles, 2013). Moreover, in the African context, it can be further argued that the construct of inclusion has its roots in precolonial ways of being such as those related to *ubuntu*. Fundamental to *ubuntu* is the primacy of community in which there is non-discrimination and equity (Mbiti, 1969:73) both of which therefore, imply inclusion of all. In this light inclusion is not necessarily a colonial project (Muthukrishna & Engelbrecht, 2018:4) but has precolonial roots advocating for attendance and welcoming of both children with and without disabilities in the mainstream neighbourhood school with support to learn, contribute and participate in all aspects of educational and social life (Majoko, 2016:9; Moores, Symes & Bull, 2013:40). The upshot of this is that regardless of whether inclusive education is viewed as having colonial or precolonial roots, it still entails what Nutbrown, Clough and Atherton (2013:8) call meaningful participation of children with disabilities in the same range of home, early childhood and community environment experiences and activities as other children.

Inclusion entails both the principles and practices in which all students within a school, regardless of their strengths, weaknesses or disability in any area, become part of the school community (Obiakor, Bakken & Rotatory, and 2010:141). The essence of inclusive education is what Nutbrown, Clough and Atherton (2013:8) call the unified drive towards maximal participation of all learners in school settings regardless of whether the context is viewed as resource rich or not.

This means that inclusion is about how everyone in the school system can ensure that all the diverse pupils who are in school benefit from being in school by participating as fully as they can, regardless of whether or not they are in 'resource-rich' contexts. Inclusive educational practices include everyone, irrespective of talent, disability, socio-economic background or cultural origin in supportive mainstream classrooms where all students' needs are met.

Inclusive education is, therefore, holistic and catering for the abilities of all children (Deluca, Tramontano & Kent, 2012:47; Chihenga, 2014:1; Majoko, 2014:1).

Since the identification of disabilities usually happens in the early years (Mugweni & Dakwa, 2013:4), the experiences and opportunities children are provided in the early years are important as they set the foundation for future learning and development (Chimedza & Mutasa, 2003:94; Wiart, Kehler, Rempel & Tough, 2013:2). The early stimulation that takes place in early childhood development is critical to later development of language, intelligence, personality and a sense of self-worth (Guralnick & Bennet, 2005:19). The early years are also critical for promoting meaningful participation and fostering more inclusive and supportive family environments (KPMG, 2014:3; Moyo, Wadesango & Kurebwa, 2012:145).

The principles and practices that enable inclusive education are particularly important in the first few years of school, as they set the foundation for continued and increased benefit throughout not only the school years, but life in society generally. This is supported by Wiart et al. (2013:1) who argue that inclusive educational settings provide natural opportunities for children with disabilities to experience social interactions in preparation for the real world. The real world has many injustices perpetrated by powerful groups and schools can help to minimize the injustices by preparing young children to become just citizens (Nutbrown et al., 2013:16; Chireshe, 2011:223). Inclusive education, therefore, appears to be one of the most powerful tools for building inclusive societies, which is why it is embraced in many different countries of the world, especially in early childhood (Ainscow, Booth & Dyson, 2004:21; Florian, 2012:276; Nutbrown et al., 2013:18).

Attendance of children with and without disabilities in early childhood development centres varies from one geographical region of the world to another (European Commission, 2013:4; Lundqvist, Westling & Siljehag, 2015:125). On the Asian and American continents, the increasing importance of early childhood development of children with disabilities is visible. China, with its population in excess of 1.2 billion individuals, has the world's largest population of children with disabilities, as 37% of these children with disabilities aged zero to five years have disabilities (Hu, Roberts, Wang & Zhao, and 2011:3570). South Korea experienced accelerated growth of early intervention programmes following enactment of a law for the promotion of special education for persons with disabilities (Paik & Healey, 1999:253). Paik and Healey (1999:253) further state that 72 of 115 special schools, nationally, had 124

specialised kindergarten classes enrolling 941 children. It was estimated that 5 801 children were attending special programmes, including 941 in kindergarten and 4 860 in other early educational programmes. In the United States, the Department of Education (2008:1) recorded that in 2007, over 240 000 children were served in early childhood settings with their typical peers and 154 957 children aged 3 to 5 years were provided special education services in self-contained classes.

Several international studies have long recognized the value of providing inclusive early childhood education to children with special educational needs (Gysbers, 2008:134; Meyer & Vadasy, 2008:18; Obiakor, Bekken & Rotatori, 2010:3). Many of these studies have investigated factors affecting inclusion of children with disabilities in early childhood, but have tended to focus on single factors, for example policies in Botswana (Mangope, 2017:102), stakeholder attitudes in Kenya (Odongo & Davidson, 2016:32), types of disabilities in Australia (Vaz, 2015:19) and teacher training in the UK (Burns, Koster & Fuster, 2016:12). Some studies on the implementation of inclusive early childhood education of children with disabilities have also been conducted in Zimbabwe (Chikutuma & Mawere, 2013:9; Majoko, 2016:10; Moyo, Wadesango & Kurebwa, 2012:145; Mpfu & Shumba, 2012:1). These Zimbabwean studies have, however, focused on single factors affecting the implementation of inclusive early childhood education of children with disabilities. For example, Majoko's (2016:12) study focused on teacher-preparation without looking at various other factors that affect inclusion. Other studies such as Moyo et al. (2012:15) focused on factors affecting implementation of ECD programmes in Zimbabwe in general, not inclusion, and they exclude policy and stakeholders' issues as factors. Mpfu and Shumba (2012:72) focused on challenges in implementation of ECD programmes in Zimbabwe in inclusive settings but exclude policy and stakeholder issues as factors. These studies (Majoko, 2016:12; Moyo et al., 2012:15; Mpfu & Shumba, 2012:72) also focused on other parts of Zimbabwe without focusing on Masvingo Province, which is a region which is reported to have the highest primary net attendance in Zimbabwe. The current study focused on factors affecting the inclusion of children with disabilities in early childhood development in Masvingo primary schools in Zimbabwe. Factors focused on include: resources, teacher training, attitudes of stakeholders, the type and severity of disabilities. The study extended the analysis to children with various types of disabilities with different degrees of severity in grades one and two as well as in ECD A and B, in Masvingo Province.

### **1.3 STATEMENT OF THE PROBLEM**

The background to the study revealed that globally, disability prevalence is on the increase (UNICEF, 2013:36; Berns, 2010:7; World Bank, 2011:10). The background to the study also revealed that primary ECD net attendance of children with disabilities is 90% in Masvingo Province and is the highest in the country (UNICEF, 2014:2). It was also revealed that the number of children with various disabilities who were able to access education in early childhood education increased from 248 to 22118 in 2007, an increase of 8819% (UNESCO, 2008:7). A further revelation was that the existing studies on the inclusive education of children with disabilities in mainstream schools focused on single factors, without looking at various other factors that affect inclusion. Some exclude policy and stakeholders' issues as factors (Majoko, 2016:12; Mpfu & Shumba, 2012:72; Burns et al., 2016:12; Vaz, 2015:19). Other studies such as Moyo et al. (2012:15) and Mpfu and Shumba (2012:72) also focused on other parts of Zimbabwe without focusing on Masvingo Province, which is a region that is reported to have the highest primary net attendance of children with disabilities in Zimbabwe (UNICEF, 2014:2). It has, however, been highlighted that children with disabilities have lower school attendance rates than children without disabilities (UNESCO, 2015:65; UNESCO, 2017:89) and there is a shortage of places in special schools for children with disabilities (Chitiyo & Wheeler, 2004:14; UNESCO, 2008:25; Charema, 2010:45). Children with disabilities have, therefore, begun to attend mainstream primary school early childhood development centres in increasing numbers (Charema, 2010:46). In light of these observations, the current research focussed on the increasing numbers of children with disabilities who are attending mainstream primary school early childhood development centres. With this focus, the current research study sought to establish factors affecting the inclusion of children with disabilities in ECD in Masvingo primary schools.

### **1.4 MAIN RESEARCH QUESTION**

What are the factors affecting the inclusion of children with disabilities in ECD in Masvingo primary schools?

#### **1.4.1 Sub- research questions**

The study was guided by the following sub research questions:

1.4.1.1 How do resources influence the inclusion of children with disabilities in early childhood education centres in Zimbabwean Primary Schools?

1.4.1.2 To what extent do attitudes of stakeholders affect the inclusion of children with disabilities in early childhood education in Zimbabwe?

1.4.1.3 To what extent do policies influence the inclusion of children with disabilities in early childhood education in Zimbabwe?

1.4.1.4 How does teacher training influence the inclusion of children with disabilities in early childhood education in Zimbabwean Primary Schools?

1.4.1.5 How does the type and severity of disability affect the inclusion of children with disabilities in early childhood education in Zimbabwe?

1.4.1.6 What strategies can be employed to improve inclusion requirements of children with disabilities at ECD level in Zimbabwean Primary Schools?

## **1.5 OBJECTIVES OF THE STUDY**

The study sought to:

1.5.1 Find out how resources influence the inclusion of children with disabilities in early childhood education in Zimbabwean Primary Schools.

1.5.2 Establish the extent to which attitudes of stakeholders affect the inclusion of children with disabilities in early childhood education in Zimbabwe.

1.5.3 Find out the extent to which policies influence the inclusion of children with disabilities in early childhood education in Zimbabwean Primary Schools.

1.5.4 Establish how teacher training influences the inclusion of children with disabilities in early childhood education in Zimbabwean Primary Schools.

1.5 Find out how the type and severity of disability affect the inclusion of children with disabilities in ECD.

1.5.6 Establish strategies that can be used to improve inclusion requirements of children with disabilities in ECD classes in Zimbabwe.

## **1.6 RATIONALE FOR THE STUDY**

A number of factors prompted the researcher to undertake the current study. The researcher observed that [an increasing number of children with disabilities are attending school but how well they are being included in the school system at ECD level in Masvingo Province is an under-researched area. In addition the thinking was also that, investigating the factors that may affect the inclusion of children with disability who are already in the ECD centres may point towards school-related factors that deter the other children who are not yet in the school system.](#) The researcher also observed that there are very few studies on factors affecting inclusion of

children with disabilities in early childhood development in Zimbabwe. None of these few researches comprehensively studied the factors affecting inclusion in early childhood and none focused specifically on Masvingo Province. Hence, the current study sought to establish the factors that affect the inclusion of children with disabilities in early childhood centres in primary schools.

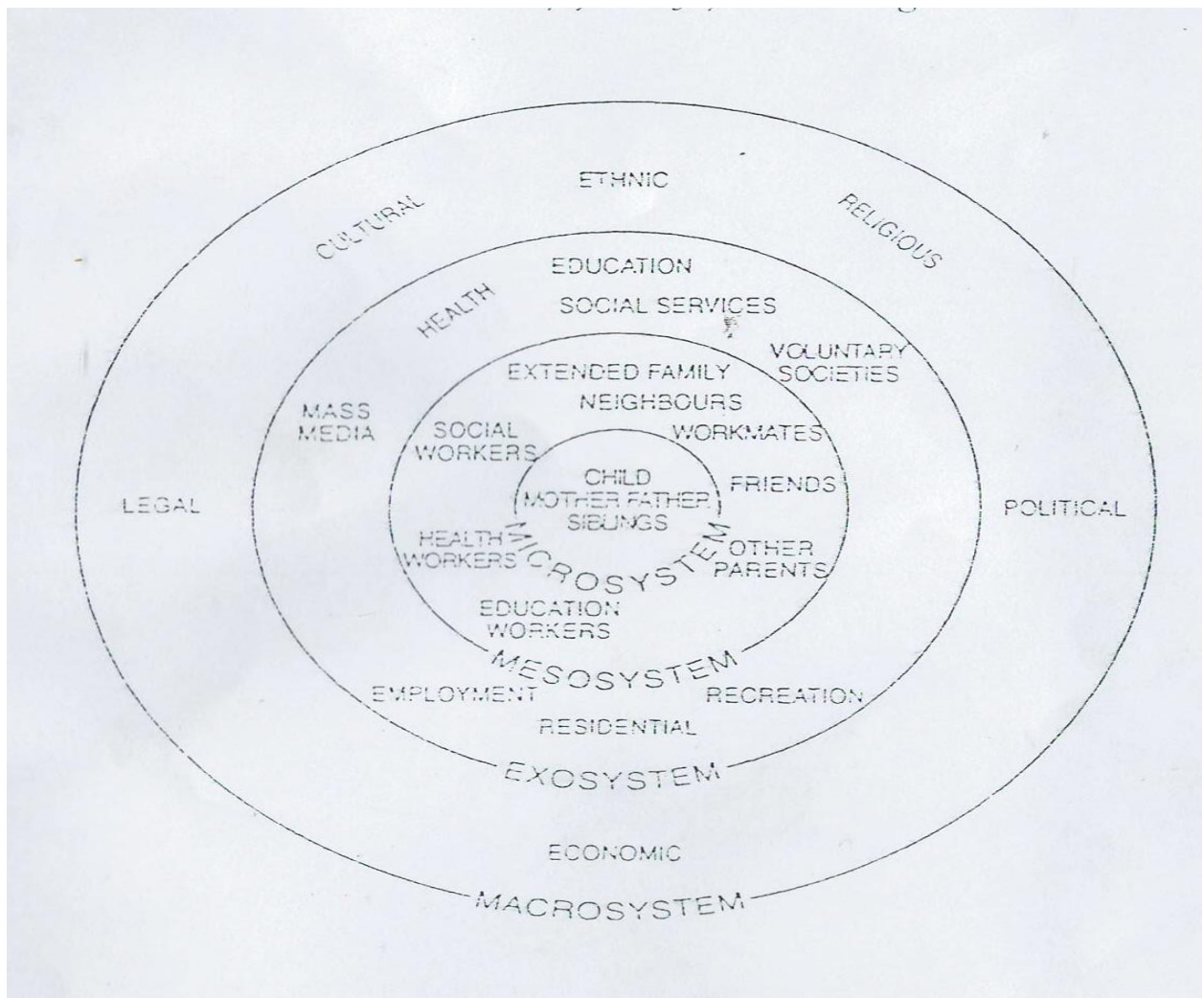
### **1.7 SIGNIFICANCE OF THE STUDY**

This study aimed at adding to what is known about factors affecting the inclusion of children with disabilities in early childhood development. The study may benefit teachers, administrators, and ECD learners with disabilities, policy-makers, parents of children with disabilities, and other researchers. Teachers and administrators may be better informed on factors affecting early childhood inclusion and so may develop accepting attitudes towards including children with disabilities in early childhood settings. As a result of this study, the teachers and administrators may also have insights into effective strategies to employ in early childhood interventions for children with disabilities. ECD learners with disabilities may benefit from improved early experiences as the resources, attitudes, policies and teacher training requirements for inclusive education may become known through this study. Policy makers may have the opportunity to use this research to inform their future policies on inclusive education for children with disabilities. Future policies on how to include children with disabilities in early childhood development may be informed through awareness of how specific types and severities of disabilities affect inclusion. Parents of children with disabilities may become better informed about the resources and attitudes that enable the inclusion of their children in early childhood. This may help improve the relationship between parents and teachers of children with disabilities in ECD settings. The current study may also provide researchers with information that could be useful in future studies on inclusive education for children with disabilities at ECD level. The study may further contribute to the knowledge base of available literature on factors affecting the inclusion of children with disabilities in early childhood education and make suggestions and recommendations on possible ways of implementing inclusive education for these ECD learners.

### **1.8 THEORETICAL FRAMEWORK**

Current educational thinking on inclusive education reflects a move away from the medical or deficit model, to thinking that reflects an understanding of barriers within the learner, the social system and the community so that they can be cleared out of the way (Chimhenga, 2014:1;

Singal, 2006:239). The emphasis on barriers within the learner and in society at different levels is consistent with Bronfenbrenner's (2005) Bio-ecological Model as the 'bio' stands for the individual learner and '-ecological' stands for different levels of society. This study will, therefore, be informed by Bronfenbrenner's (2005) Bio-ecological Model that looks at the child's development within the context of the system of relationships that form his or her environment. As Hornby (2011:27) points out, the model suggests that individual human development and behaviour cannot be understood independently of the social context in which they occur. The social environment influences behaviour at several levels or layers, as illustrated in Figure 1 below.



**Fig 1.1: Bio-ecological Model of including children with disability in early childhood development** (Source: Hornby, 2011: 27)

As shown in Figure 1.1 above, the Bio-ecological Model has four layers of the social environment which influence behaviour. The inner-most layer, which is closest to the child, is



the microsystem which includes the child's mother, father and siblings in the immediate family. The immediate or nuclear family of a child is considered to constitute a microsystem as the child, parents and siblings reciprocally influence each other. The functioning of the family depends on factors associated with each of its members. Parents may affect the child's behaviour and beliefs (Ryan, 2009:2). Although Bronfenbrenner's (2005) model does not directly mention children with disabilities, it is useful for illuminating factors in the learning environments of such children. At the microsystem level, the type and severity of disability of the child can be analysed in order to understand how they influence and are influenced by the immediate family environment. In the immediate family environment in traditional African society, children were treasured and considered a gift from God (Bullock, 1927:44) and so childlessness or disability in childhood were often considered misfortunes, and at worst, acceptable reasons for divorce or polygamy (Chiswanda, 1997:79). Gelfand (1978:44) said that the infant spent the first two years almost always on a female family member's back and that other family members took great interest in the newborn whom they collectively taught the importance of the extended family.

The child was raised among many siblings and adults from the maternal and paternal families. Members of the extended family were expected to eat communally from the same plate, support each other in every way and learn the *ubuntu* values of cooperation, sharing and respect. Chiswanda (1997:78) observed that the nuclear and extended family systems were strong and so were utilized to support children with disabilities. Therefore, the primacy of community in Africa which starts at family level acknowledges the important role of siblings, parents and other caregivers and how they may be variously influenced by the type and severity of the child's disability. According to Hornby (2011:29), features of the disability such as the type, severity and when it was diagnosed are an influential factor on family relationships. This

implies that the child's inclusion firstly within the family and later in early childhood development settings may also be affected especially regarding resource allocation.

The family microsystem is influenced by the mesosystem in which it is embedded. The mesosystem comprises the range of settings in which the family actively participates, such as the extended family, neighbours, workmates, friends and other parents. It provides connections between the structures of the child's microsystem (Berk, 2000:2). There is a connection between the child's teacher and his or her parents, between his church and his neighbourhood. Hornby (2011:29) observes that the extended family has a key role in determining how well parents and siblings cope with having a child with a disability. If the grandparents of a child with disability are understanding and supportive, they can have a positive influence on family functioning, whereas if they are in conflict with the child's parents, the family misses out on an important potential source of support. Similarly, neighbours, workmates, friends and other parents can have a positive or negative influence on family functioning. If neighbours allow their children to shout abuse at a child with disability or are generally unfriendly or suspicious, this can add strain onto the family and possibly result in exclusion of their child from many mainstream activities. The contacts that parents have with professionals such as teachers can either promote inclusion or exclusion of the child with disability. The mesosystem is itself influenced by the exosystem, which is the next layer in Bronfenbrenner's (2005) Bio-ecological Model.

The exosystem consists of social settings which indirectly affect the family, such as the mass media, education system and voluntary agencies. The structures in this layer impact the child's development by interacting with some structures in the microsystem (Berk, 2000:2). For example, the way in which children with disabilities are portrayed in newspapers and on television affects families. The quality and types of health, education and social welfare available will have a critical influence on how parents and their young children with disabilities cope with disability and are included or excluded from mainstream activities. Availability of resources, teacher training as well as education policies are all factors in the exosystem that may have effects on the inclusion or exclusion of children with disabilities in early childhood settings.

The last layer in Bronfenbrenner's (2005) Bio-ecological Model is the macro system, which is the outermost layer in the child's environment. This layer comprises the cultural values, customs and laws (Berk, 2000:2). According to Hornby (2011: 30), the macro system refers to the attitudes, beliefs, values and ideologies inherent in the social institutions of a particular society. It is important for all these to be taken into account in trying to understand the inclusion of a child with a disability in early childhood. In traditional African society, a newborn with visible disabilities was killed by the midwife (Bullock, 1927:44) in the same way that infanticide was practiced globally (Scheer & Groce, 1988:23). Although these negative African socio-cultural perceptions of disability have undergone drastic changes due to modernization which exposed families to non-traditional ways of life, not all sub-systems of a culture are affected by change (Super & Harkness, 1986:7). For example, although in the modern African environment, infanticide is outlawed (African Charter on the Rights of Persons with Disabilities, 2018; Child Protection and Adoption Act, 1992) children with disabilities may still continue to be treated as burdens to be tolerated in families. Mpofo et al. (2007:68) observed that many Zimbabwean people experience shame and blame if there is a person with a disability in their family. Related to this, a person with disability is referred to as '*chirema*' in the Shona language of Zimbabwe. *Chirema* has the prefix '*chi*' which is an object or animal referent while the suffix '*rema*' implies being heavy or a burden (Devlieger, 1998:14). Vocabulary of this nature may indicate underlying remnants of traditionally negative perceptions which are quite contrary to Zimbabwe's modern day prominent regional standing as one of the most disability accessible countries in Africa (Mpofo & Harley, 2002:33; Devlieger, 1998:61).

Contrary to some negative perceptions of disabilities in families, the traditional African view of personhood expressed in *ubuntu* denies that persons can be defined by focusing on a particular physical characteristic of the lone individual (Menkiti, 2007:16) such as hearing, seeing or lack of these abilities. Instead a person is defined by reference to the enviroing community as captured in the African dictum popularized by Mbiti (1969:53) "I am because we are, and since we are, therefore I am." Therefore, not all perceptions of disability in Africa have been negative since some considered children with disabilities as special or even sacred (Abosi & Ozoji, 1985:10; Nyagweso, 2018:4). In light of these diverse interpretations of disability in Africa, factors related to the attitudes of policy makers, administrators, teachers, parents and peers towards inclusion of children with various types and severities of disabilities in early childhood settings can be analysed at the macro system level.

In addition, the effects of the current Zimbabwean socio-political and economic climate and their impact on service delivery to children with disabilities can also be analyzed at the macro system level. Land redistribution which was meant to address the injustices of racial discrimination resulted in hyperinflation which nearly caused collapse of the economy from 2000 to 2009 (Moyo, 2000:17; Richardson, 2005:33). However, government's replacement of the Zimbabwe dollar with a multi-currency arrangement dominated by the United States dollar and the South African rand (Pilososof, 2009:12) stabilized the economy. Despite the movement of some skilled human resources to stronger economies even at the height of the hyperinflationary period, the country has maintained one of the highest literacy rates in the world, at 92% (UNDP, 2010) and 90% of the total school-age population of about 7 million children continue to attend school (Mutepfa, Mpofu, & Chataika, 2007:17). The early childhood development sector has probably been least affected by human resource movements as the skills required at this level are easily replaceable. At the macro system level the socio-political and economic climate may therefore, have had a marginally negative impact on service delivery to children with disabilities in early childhood education but even this may have self-corrected with the stabilization of the economy.

Overall, the Bio-ecological Model aptly informs an understanding of factors affecting the inclusion of children with disabilities and how these can be overcome. This is because the model can be used to understand factors in the various levels of systems that surround children with disabilities in early childhood. These factors affecting the inclusion of children with disabilities are understood through the reciprocal interaction between the various systems in Bronfenbrenner's model.

## **1.9 ASSUMPTIONS**

The study assumed that:

- 1.9.1 There are children with disabilities in early childhood settings in Zimbabwe.
- 1.9.2 ECD (A) and (B) classes have been established in Zimbabwean Primary Schools
- 1.9.3 Participants in the study will provide reliable responses.
- 1.9.4 The need for ECD for children with disabilities will always exist.
- 1.9.5 Early childhood interventions can be made more effective.

## **1.10 LIMITATIONS**

The researcher could have carried out the study in all Zimbabwean primary schools but due to financial, human and material resource constraints the study will not cover each school in Zimbabwe, but will be restricted to 10 primary schools in Masvingo Province in Zimbabwe. This will necessarily limit the generalizability of the study's findings to this one province in Zimbabwe. The data will be collected from stakeholders such as school administrators, teachers and parents.

### **1.10.1 Overcoming the limitations**

To overcome the problem of finance the researcher applied for and got a loan to cover all the financial resources required. The researcher applied for and was granted leave from work to overcome the problem of time.

## **1.11 DELIMITATIONS**

The study sought to investigate factors affecting the inclusion of children with disabilities in ECD centres in primary schools in Masvingo Province. The study focused on three districts in Masvingo Province: Masvingo, Zaka and Bikita. The target group were administrators, teachers and parents of children at ECD (A), ECD (B) level and grades one to two in the selected province. Children at ECD (A) level were three to four years of age, those at ECD (B) level were four to five years old while those in grades one and two were in the age range seven to eight years. Children from zero to three years of age are in the caregiver-toddler-infant program (CTIP) and are considered part of ECD. The parents, caregivers, teachers and administrators of institutions with such children were, however, not included in the study. This is because at the time of the study, the CTIP was still an emerging development which was not yet widespread in primary schools, so that data about it may not have been reliable. The study also did not focus on parents and teachers of children above grade two, that is, those who are above eight years of age as these are not part of ECD.

## **1.12 DEFINITION OF TERMS**

The following terms were defined in order to have a shared understanding of the key concepts of this study:

### **1.12.1 Disability**

Disability refers to the effects of not catering for impairment which are evident in societal barriers in performing an activity in the manner considered appropriate (Obiakor, 2010:32; Mangal, 2007:11). In this study, [disability referred to the consequences of impairment in which ECD children aged 3 to 8 face societal barriers in their performance of activities considered appropriate for children of the same age range.](#)

### **1.12.2 Children with disabilities**

Children with disabilities are those children who experience restrictions as a result of impairment (Mangal, 2007:11; Obiakor, 2010:32). In this study, children with disabilities were those children of three to eight years of age [whose impairments face societal barriers resulting in restrictions in performing specific activities in the manner considered appropriate for their age.](#)

### **1.12.3 Early childhood education**

Early childhood education is the period from birth to the age of eight years (World Bank, 2010:1; Guralnick, 2001:18; Christie, 2008:165; KPMG, 2014:6; Follari, 2011:18; Thomas & Thomas, 2009:10). It is made up of children aged zero to three years and involves parent care, children aged three to six years which are pre- learning years and children aged six to eight years, which involves formal learning (Dickens, 2014:10; Morrison, 1995:7; Kamerman, 2006:25). In this study, early childhood education refers to services delivered to children aged three to eight years who experience a disability.

### **1.12.4 Inclusion**

Inclusion is attendance and welcoming of both children with and without disabilities in mainstream neighbourhood schools with the support to learn and participate in all aspects of educational and social life (Ainscow et al., 2004:12; Nutbrown et al., 2013:8; Allen & Cowdery, 2012:5; Obiakor et al., 2010:12; Moores et al., 2013:4; Majoko, 2016:9). In this study, inclusion referred to the presence, participation and achievement of children with disabilities in early childhood education.

### **1.12.5 Inclusive Education**

Inclusive education is the practice of including everyone, irrespective of talent, disability, socio- economic background or cultural origin in supportive mainstream schools and classrooms where all students' needs are met (Moores et al., 2013:4; Deluca et al., 2012:47; Swart, Englebrecht, Elloff, & Pettipher, 2002:176; King, 2003:152; Mpofu et al., 2007:77; Chimhenga, 2014:21; Advani, & Chadha, 2003:8; Manivannan, 2001:46). According to Chireshe (2013:223), inclusive education is about social justice and equity and takes into

account learners' abilities, potential and diverse needs. This study took inclusive education as a process offering quality education for all, respecting diversity and eliminating all forms of discrimination.

#### **1.12.6 Special Needs Education**

Special Needs Education is the educational programme designed to meet the unique learning and developmental needs of exceptional children (Moores, Symes & Bull, 2013:4; Obiakor et al., 2010:14). In this study, it meant educational programmes designed to meet the unique learning and developmental needs of children with disabilities.

#### **1.12.7 Early childhood interventions**

Early childhood interventions are experiences and opportunities afforded infants and toddlers with disabilities intended to promote children's acquisition and use of behavioural competence to shape their pro-social interactions with people and objects (KPMG, 2014:6; Guralnick, 2001:18). These are programs run during the first five years of life for children who show some deviance of development from the established norm (Chimedza & Mutasa, 2003:94). In this study, early childhood interventions were experiences and opportunities provided to children with disabilities in the early years, three to eight years, which set the foundation for future learning. These experiences influence factors such as academic success, relationship building, health and wellbeing.

#### **1.12.8 Early Childhood Inclusion**

Early childhood inclusion embodies the values, policies and practices that support the right of every infant and young child and his or her family, regardless of ability to participate in a broad range of activities and contexts as full members of families, communities and society (Allen & Cowdery, 2012:7; Guralnick, 2001:1; DEC/ NAEYC, 2009:2). In this study, early childhood inclusion referred to practices that encourage full participation of infants with disabilities at ECD level three to eight years and their families in everyday activities with their peers without disabilities.

### **1.13 SUMMARY**

This chapter focused on the problem and its context. The chapter discussed the background to the study, statement of the problem, research questions, objectives, and significance of the

study, theoretical framework, and assumptions of the study, limitations, delimitations and definition of key terms. The next chapter discusses the related literature.

## **CHAPTER 2: REVIEW OF RELATED LITERATURE**

### **2.1 INTRODUCTION**

The study sought to establish factors affecting the inclusion of children with disabilities in early childhood education centres in primary schools in Masvingo Province, Zimbabwe. This chapter focuses on a review of related literature. The literature was presented under sub-headings derived from the study's research questions. The sub-headings are: resources and inclusive early childhood development; stakeholders' attitudes and inclusive early childhood education; policies and inclusive early childhood education; teachers' training and inclusive early childhood education; type and severity of disability and inclusive early childhood education and strategies to improve inclusion requirements for children with disabilities in ECD classes in Zimbabwe. Gaps to be filled in by the present study were highlighted in this review. In the subsequent section, a review of literature on resources and inclusive early childhood development is presented.

### **2.2 RESOURCES AND INCLUSIVE EARLY CHILDHOOD DEVELOPMENT**

Globally, literature showed a trend in which resources play a key role in inclusive early childhood development. Literature revealed that lack of resources negatively influences inclusion, for example, in the US (Okoro, Hollis, Cyrus & Griffin-Blake, 2018:38; Tatter, 2019:55; Anderson, 2019:17), United Kingdom (Griffiths, 2020:57; Stewart, 2020:41), India (Limaye, 2016:76; Singh, 2016:3229; Tripathi, 2018: 1315; Chakraborti-Ghosh, 2017:62), Nigeria (Adeniyi, Owolabi & Olojede, 2015:16), Kenya (Owuor, 2014:17; Omondi, 2016:13; Okongo, Ngao, Rop & Nyongesa, 2015:16), Malawi (Chavuta, Itimu-Phiri, Chiwaya, Sikero & Alindiamao, 2008:12), Namibia (Mokaleng, 2019:57) and South Africa (Walton, 2018:30; Adewumi, 2019:33). The literature revealed that low budgetary allocation results in inadequate resources for inclusion, for example, in the US (Okoro et al., 2018:40; Tatter, 2019:58; Anderson, 2019:21), Namibia (Zimba et al., 2007:43; Sukhraj, 2008:42), Zambia (Hayes & Bulat, 2017:27), Cameroon (Mbibeh, 2013:57), Botswana (Dart, 2007:63), Kenya (Peter & Nderitu (2014:24), South Africa (Ntsnswisi, 2008:61; Tshifura, 2012:101).



Studies in Hong Kong revealed that lack of resources is the reason for failure to include learners with disabilities and that resources for inclusive education have not been infused into general education so as to ensure effective teaching in inclusive classes (Zhang, 2011:14; Cheuk & Hatch, 2007:695). In Australia, Forlin (2006:695) reported that inclusive education had not been sustained by appropriate support structures at school level. Similarly, studies in New Zealand revealed that lack of human and material resources can provide the basis of both covert and overt discrimination against children with disabilities and their families, in education (Purdue, 2009:140; William, Henninger & Sarika, 2014:73). From the above studies, one can conclude that without appropriate resources, schools cannot include all children with disabilities. Literature indicates that availing resources positively influences the inclusion of children with disabilities (Adeniyi, Owolabi & Olojede, 2015:17; Okongo, Ngao, Rop & Nyongesa, 2015:63). However, some studies found that schools often have more resources than they actually use for inclusive education and that without appropriate coordination, simply availing more resources did not necessarily improve inclusivity (Grönlund, Lim & Larsson 2010:22; Oliva, 2016:17). Other studies also found that educational personnel may be unaware of resources that already exist for inclusive education in the system, for example, in the US (Daane, Beirne-Smith & Latham, 2000:18), Egypt (Moberg, 2000:74) and Finland (Sadek & Sadek, 2000:12). The present study, therefore, focused on establishing how the availability or unavailability of resources influences the inclusion of children with disabilities in early childhood development in Zimbabwean Primary Schools.

In the studies above in Hong Kong, the qualitative approach was used. Although the qualitative approach tends to yield rich, detailed information, the case study would limit the generalization of the findings of the studies. In the present study, generalisability of the research findings will be enhanced in the quantitative method since the current study will employ the mixed methods approach, whereby both quantitative and qualitative methods are used. The quantitative method would help to obtain descriptive statistics on availability of resources for inclusion, while the qualitative method would yield complementary, rich, detailed information on the influence of resource availability on inclusion.

Findings from studies in other African countries have concurred with global studies which have shown that without appropriate resources schools, cannot include all children with disabilities. For example, in Cameroon (Mbibe, 2013:57), Namibia (Zimba, Mowes & Naonda, 2007:43), Botswana (Dart, 2007:63), Kenya (Peter & Nderitu, 2014:24) and South Africa (Ntsnswisi,

2008:61, Eloff & Kgwete, 2007:354, Tshifura, 2012:101), it was found that parents, teachers and administrators were of the opinion that low budgetary allocations were an impediment to the implementation of inclusive education for children with disabilities. Low budgetary allocations may result in schools not having enough funds to implement inclusive education. Furthermore, most of these national budgets cannot sustain provision of assistive devices and teaching aids for children with disabilities. This implied that national budgetary decisions taken at that exosystem level had profound effects in schools at the microsystem level and these effects were an impediment to the implementation of inclusive education for children with disabilities. The present study sought to establish if the above African countries' scenario applied at early childhood level in primary schools in Zimbabwe.

Most of the above studies such as Mbibeh (2013:57), Zimba, Mowes and Naonda (2007:43), Peter and Nderitu (2014:24) used quantitative methods involving descriptive statistics. Questionnaires were the instruments used to gather information. Use of questionnaires would limit the researcher from going deeper in finding the respondents' feelings and opinions. The present study used mixed methods to solicit qualitative, in-depth information through face-to-face interviews and open-ended items in questionnaires to establish how resources were a factor influencing the inclusion of children with disabilities in ECD centres in primary schools.

In developing countries, lack of relevant materials and adequate facilities are some of the major obstacles to the implementation of inclusive education. For example, studies in Uganda (Kristensen & Kristensen, 1997:32), Tanzania (Kisanji, 1995:32), Kenya (Mangi & Orodho, 2014:24), Namibia (Eloff & Kgwete, 2007:353), Botswana (Mukhopadhyay, 2013:6; Malatsi, Mpuang, & Mukhopadhyay, 2015:74), Zambia (Aro & Ahonen, 2011:31), South Africa (Ntsanwisi, 2008:61; Gwala, 2006:63) and Zimbabwe (Charema & Peresuh, 1996:32) found that lack of relevant materials and facilities impedes inclusive education in both urban and rural schools. This concurred with the argument by NGECE (2016:24) that the quality of inclusive education significantly depends on the availability of resources. This argument was more strongly put by Tshifura (2012:93) who went to the extent of positing that education of children with disabilities might be impossible in many regions of the world because of lack of resources needed to meet the needs of children with disabilities. The above literature concurred with a principle of ecological systems theory which informed this study. A key ecological systems principle states that if one part of a system is disturbed, other related parts are also affected. The part affected in this case is unavailability of resources at school or microsystem level,

which, in turn, affects the whole system of inclusive education. The present study sought to establish if the above African countries' scenario applied in Zimbabwe. Also, most of the above studies done at primary school level used a few research participants. Therefore, their findings had limited validity and applicability to inclusive education at ECD level in primary schools in Zimbabwe, hence the need for this current study.

Previous Zimbabwean studies found that shortage of resources was an impediment to the implementation of inclusive education for children with disabilities (Mpofu, 2000:137; Peresuh, 2000:132; Mpofu, Kasayira, Mhaka, Chireshe & Maunganidze, 2007:236; Chimedza, 2008:129; Chireshe, 2011:157; Mavundukure & Nyamande, 2012:12; Musengi & Chireshe, 2012:112; Chireshe, 2013:226; Nyanga & Nyanga, 2013:3; Chimhenga, 2016:37). A range of resources for example, teaching materials, special equipment, personnel and new teaching approaches were reported to be supportive and essential in the task of learning (Chimhenga, 2016:33). Mafa and Chaminuka (2012:37) confirmed the personnel issue when they established that there is a high teacher to pupil ratio in many Zimbabwean primary schools, which worsens the lack of resources.

The above studies focused on shortage of resources but some, for example Chimhenga (2016:33) above carried out a survey using only questionnaires to solicit information from participants. These questionnaires mainly had structured questions which unduly influenced the collection of quantitative rather than qualitative data. The current study corrected this by using both questionnaires and interviews in a balanced way. The questionnaires included some open-ended items where different opinions from respondents were meant to provide rich sources of varied data. Unstructured interviews were also used to get in-depth data from the participants. Welman, Kruger and Mitchell (2005:166) posit that this type of interview is used to explore, in depth, a general area of interest. Hence, the current study explored in depth how resources influence the inclusion of children with disabilities at ECD level, but with the support of quantitative data from the questionnaires. In support of the mixed methods approach, Mouton (2009:39) posits that the use of multiple methods and techniques is usually one of the best ways to improve quality of research. The present study focused on using multiple methods and techniques to establish how availability or unavailability of resources influences the inclusion of children with disabilities in ECD centres in Zimbabwean primary schools.

Other studies in Zimbabwe found that expenditure on special needs education is given low priority (Mushoriwa, 2001:143; Mpofu, 2000:44). In most of these Zimbabwean studies the focus was not on ECD level but on the school system in general. In addition, the samples for these studies were composed of teachers only, which limited the generalization of the studies by precluding other stakeholders' views on factors towards the inclusion of children with disabilities in mainstream schools. The point of departure for the present study was that it included heads of schools, teachers and parents of children with disabilities at ECD level, to gather in-depth data on the views of these different stakeholders on how resources influence the inclusion of children with disabilities. This focus on various stakeholders was elaborated on in the following section on stakeholders' attitudes and inclusive early childhood education.

### **2.3 STAKEHOLDERS' ATTITUDES AND INCLUSIVE EARLY CHILDHOOD EDUCATION**

Attitudes and beliefs of stakeholders in early childhood education are, reportedly, the most significant factor in determining the inclusion of children with disabilities worldwide. The reason could be that, people's perceptions determine their action (Williams & Finnegan, 2003:40; Chambers & Forlin, 2010:74). Chimhenga (2014:38) explained that according to Bronfenbrenner's Ecological Systems Theory which informed this study, a person's perceptions and attitudes are often related to experiences provided in the environment and have a direct influence on the way in which the person responds to the ecology. The environment in which the child is living influences how the child learns. According to the Ecological Systems Theory, when stereotyping and patronizing attitudes towards children with disabilities are perpetuated by society at home and school levels, they negatively influence the inclusion of those children with disabilities.

Research outcomes in America in the area of inclusive education suggested that attitudes play a key role in achieving successful inclusion of children with disabilities in primary schools (Avramidis, Bayliss & Burden, and 2000:11). Other American literature revealed that the most frequently reported barriers to early childhood inclusion that have remained largely unchanged over the past several decades are attitudes and beliefs (US Department of Education, 2015:6; Ryan, 2009:278; Allan, 2008:41; Avramidis et al., 2000:278., Shatri, 2017:62). A growing body of research in the United States of America also revealed that children in inclusive classroom settings hold more positive attitudes about children with diverse abilities, especially

when teachers take an active role in helping to facilitate acceptance in inclusion (Slentz, 2010:11; Follari, 2011:13). However, other studies revealed that other children in class have negative attitudes towards the inclusive education of children with disabilities (Cook et al., 2001:574; Nowicki & Sandieson, 2002:246; Szumski, Smogorweska & Grygel, 2020:22). The current study, therefore, sought to find out how the attitudes of peers as stakeholders influenced inclusive education of children with disabilities.

Literature further revealed that inclusion depends on teachers' attitudes towards pupils with disabilities (Skipper, 2006:9; Mulinge, 2016:30; Hay, Smit & Paulsen, 2001:216; Pottas, 2005:66; Subban & Sharma, 2005:4; Beyene & Tizazu, 2010:92; Van Reusen, Shoho, & Barker, 2001:8; Taylor, Richards, Goldstein & Schilit, 1997; Fakolade, Adeniyi & Tella, 2009:156; Cook 2001:316; Ladbrook, 2009:67; Engelbrecht et al., 2001:257; Greene, 2017:60; Sharma & Michael, 2017:49; Zwane & Malale, 2018:77; Majoko, 2018:343). These studies found that negative teacher attitudes negatively influenced inclusive education, as teachers adjusted expectations for learners with disabilities and developed relatively low accountability and concern about their academic and behavioural performance (Taylor, Richards, Goldstein & Schilit, 1997:37; Hay, Smit & Paulsen, 2001:59; Fakolade, Adeniyi & Tella, 2009:14). In one of the American studies, it emerged that both elementary and secondary mainstream teachers were concerned about their lack of confidence when teaching in an inclusive setting and feelings of low self – efficacy in working with children with disabilities (Ross- Hill, 2009:2).

Some studies found that possessing previous experience of disability appeared to positively predispose teachers towards facilitating more learning opportunities in inclusive education and allowed mainstream teachers to feel more comfortable within the inclusive classroom (Avramidis, Bayliss & Burden, 2000:195; Subban & Sharma, 2005:4; Hodge & Jansma, 2000:215; Berghs, Chataika, El-Lahib & Dube, 2020:16). Other studies found that community stakeholders positively influenced inclusive education for children with disabilities, for example, Cole, Waldron and Majd (2004:18), Cosier, Causton-Theoharis, and Theoharis (2013:47), Kalambouka, Farrell, & Dyson (2007:29), Hayes and Bulat (2017:5), Sansome (2020:73) and Chataika, Sibanda, Mateta and Sunar (2020:22). American literature cited above concentrated only on attitudes of teachers and peers as a barrier to the inclusion of children with disabilities. The other international literature cited above did not specify parents of children with disabilities and school-heads as community stakeholders in their studies.

Literature revealed that attitudes of school-heads were important for determining the success or failure of inclusive education programmes (Avramidis et al., 2000:198; Cook, 2001:316; Ladbrook, 2009:67 and Engelbrecht, Swart, & Eloff, 2001:257). Other studies revealed that parents, as stakeholders, were negative about the inclusion of children with disabilities (Chireshe, 2011:158; Norwich, 2002:55; Engelbrecht et al., 2001:258). This current study focused not just on teachers and peers but also specifically on school-heads and parents of children with disabilities in order to find out how their attitudes influenced inclusive education of children with disabilities at ECD centres in primary schools in Zimbabwe.

Literature revealed that negative stakeholder attitudes affect inclusion negatively. For example, Skipper (2006:9), Cassady (2011:7), Chambers and Forlin (2010:41), US Department of Education (2015:74) Henry-Buckmire (2020:233), Avramidis et al., (2002:144) Silverman (2007:28), Mwangi & Orodho (2014:28), Majoko, (2016:2) Mafa, (2012:19) and Chimhenga (2014:17) all found that negative attitudes by stakeholders negatively affect the inclusion of children with disabilities in ECD. Literature revealed that government was also an important stakeholder whose attitude could be positive or negative towards the inclusive education of children with disabilities (Antonak & Livneh, 2000:217; Duquette, 2006:29; Hammond & Ingalls, 2003:25; Leyser & Tappendorf, 2001:760).

One of the above studies by Shatri (2017:62) used observation as a data collection tool and this may have imposed limitations on the data in that a person being observed may alter his or her behaviour during the observation period. The current study employed the mixed methods approach whereby techniques from both quantitative and qualitative research were used to overcome each other's weaknesses.

Findings in other countries established that many teachers are concerned about having to work with children with disabilities unassisted, for example, in New York (Skipper, 2006:9), Britain (Watson & Maccathern, 2009:284, Odom, 2000:19), Hong Kong (Yuen & Westwood, 2002:80). Teachers' attitudes towards the inclusion of children with disabilities tend to vary with their perceptions of specific disabilities as well as their beliefs about the demands of the student's instructional and management needs that it will cause on them (Cassady, 2011:486; Allen & Cowdery, 2012:42). In Asia, a study in Hong Kong revealed that many secondary school teachers found children with disabilities as an additional burden and felt that they should not be included in their already stressful working environment (Yuen & Westwood, 2002:80).

Literature above revealed that in countries cited, teachers had negative attitudes towards the inclusion of children with disabilities in mainstream schools. The current study focused on whether the same scenario applied to Zimbabwe. Also the above studies used samples of only teachers, which may have limited the validity of the findings, while the present study sought to investigate several stakeholders' attitudes towards the inclusion of children with disabilities in Zimbabwean primary schools in order to enhance the generalizability of the findings.

Although most of the studies reviewed focused only on teachers, the attitudes of parents of learners with disabilities have also been widely investigated and reported in the global literature. In India, it has been documented that parents of children without disabilities reported that their children are learning important social and academic lessons from their experiences in inclusive classrooms (Narumachi & Bhangava, 2011:121). The study above focused on attitudes of parents of children with disabilities only, which may limit generalization and applicability to Zimbabwean mainstream primary schools, thereby necessitating the current investigation in Zimbabwe. The present study focused on the extent to which the attitudes of teachers, administrators and parents affect the inclusion of children with disabilities in early childhood education centres in Zimbabwe Primary Schools.

The above study in India used the descriptive design on the attitudes of parents only, which would limit the generalization of results to other stakeholders; hence the present research used the descriptive design on a larger group of participants, including parents, teachers and administrators in order to enhance the generalization of results to other ECD contexts in Zimbabwean Primary Schools.

Literature on Africa confirms the decisive role of the attitudes of society generally in influencing the inclusion of learners with disabilities. For example, the prevailing negative attitudes towards disability contribute to general bewilderment about inclusion in schools in South Africa (Engelbrecht & Green, 2001:10), in Nigeria (Okuoyibo, 2006:67; Mba, 1995:68) and in Kenya (Mwangi & Orodho, 2014:26). As explained by Okeke (2010:67), these negative attitudes may be caused by taboos, for example, having an individual with hearing impairment ascending the throne as Igwe (king) over his kinsmen may be considered a taboo. Mwangi and Orodho (2014:28) corroborated that the greatest obstacles to inclusive education are caused by society in the form of prejudices and negative attitudes towards those with disabilities.

The above study by Mwangi and Orodho (2014) used questionnaires, which may limit the understanding of the depth and reasons for the bewilderment with inclusion in Kenya. The present study used both questionnaires and in-depth interviews to complement each other in order to better understand stakeholders' attitudes towards inclusion. The present study ensured validity by asking the right open-ended questions to complement the closed-ended questions from the questionnaire.

African society's generally negative attitudes and prejudices are also reflected in various stakeholders' attitudes. In South Africa, a study by Engelbrecht and Green (2001:10) revealed that attitudes of South African teachers towards educating learners with disabilities have been put forward as a decisive factor for making schools more or less inclusive. Teachers' negative attitudes towards including learners with disabilities may result from lack of knowledge and competences in early childhood pedagogy and managing challenging behaviour (Mulinge, 2016:30), both of which Mukhopadhyay (2013:80) explained as lack of confidence. The literature above reveals that inadequate knowledge and skills by providers of inclusive education was a contributing factor to negative attitudes by the providers of inclusive education. In light of the various levels of knowledge and skills' training by ECD teachers in Zimbabwe, this study investigated the extent to which these key stakeholders' attitudes affect the inclusion of children with disabilities. In contrast, this current study focused not just on teachers, but on various other stakeholders, including parents of children with disabilities and school-heads in Zimbabwe. This broad focus on various stakeholders is congruent with Bronfenbrenner's Ecological Systems Theory which gives prominence to contributions of the whole rather than only focusing on parts of a system. The variety of stakeholders covered by the present study was an attempt to have a holistic understanding of the extent to which stakeholder attitudes affect inclusive education of children with disabilities at ECD level in Zimbabwean Primary Schools.

Two of the above studies by Mulinge (2016) and Mukhopadhyay (2013) used qualitative descriptive designs in which active intervention on the part of researchers may have produced biased research results. These findings may also not be generalized to the Zimbabwean inclusive primary schools since generalizability of qualitative research findings is usually not an expected attribute. Therefore, the present study employed both a qualitative design and a quantitative design to complement each other in finding the extent to which attitudes of



stakeholders affected the inclusion of children with disabilities in early childhood education in Zimbabwe.

Zimbabwean studies revealed that most teachers had negative attitudes and, therefore, would not accept learners with disabilities in their classrooms. For example, more than 64 percent of teachers would not accept students with intellectual disabilities in their classrooms due to negative attitudes by the teachers (Barnatt & Kabzems 1992:132; Mpofu, 2000:137; Charema, 2005:24; Mafa, 2012:19; Nyanga, 2013:167; Deluca et al., 2014:5; Majoko, 2016:2). What is unknown is the extent to which attitudes of teachers affect the inclusion of children with disabilities within early childhood education settings in primary schools in Zimbabwe. While the literature above focused on the attitudes of teachers as a barrier to inclusion of children with disabilities in primary and secondary schools, the current study found it worthwhile to find out the extent to which teachers' and other stakeholders' attitudes influence the inclusion of children with disabilities in early childhood education. This focus was premised on Bronfenbrenner's Ecological Systems Theory which informed this study. The theory states that perceptions, attitudes and whatever happens in one layer of a system will have a ripple and reciprocal effect throughout other layers. This implies that attitudes of teachers may influence and also be influenced by the attitudes of other stakeholders and, in turn, these stakeholders' attitudes may affect and be affected by the inclusion of learners with disabilities at ECD level in primary schools in Zimbabwe. The following section discusses policies and inclusion of children with disabilities at ECD level.

## **2.4 POLICIES AND INCLUSIVE EARLY CHILDHOOD EDUCATION**

Clear national policies on the education of children with disabilities are essential for the development of more equitable education systems (World Report on Disability, 2009:15). According to Ball et al. (2011:88) and Viennet and Pont (2017:18), policies are subject to complex processes of interpretation and translation rather than mechanical implementation and so they need to be clear in the first place. Studies by Slee (1997:418), Kearney and Kane (2006:216), Winter and O'Raw (2010:28), Ireri, King'endo, Wangila & Thuramira (2020:27) and Schuelka (2018:14) all found that clear policies were important. The studies found that policies became clear and important when teachers who had to implement the policies were sufficiently involved in the decision-making process. [Winter and O'Raw \(2010:28\)](#) and [Smith and Benavot \(2019:47\)](#) argued that clarity of top-down policy implementation results from

bottom-up support and a partnership approach, in order to ensure the successful implementation of inclusive education. Similarly, Kearney and Kane (2006:216) and Burns, Koster and Fuster (2016:12) found that teachers needed to be allowed to input their own perspectives on the development of inclusive education policies. A study in the United States established that inclusive education is enshrined in the legislation, Education for all Handicapped Children Act of 1975 and Individuals with Disability Education Act or IDEA (IDEA, 2004). Slentz (2010:1) stated that these laws established the rights of children with disabilities to be included in regular schools. These laws also enabled children with disabilities to be included in regular schools, regardless of their abilities. An overriding principle of the act of IDEA is zero reject. This means that no child may be excluded from public education on the basis of their disability, no matter how severe (Mitchell, 1999:9). Under these legislations, parents were found to have rights regarding their children's education (Slentz, 2010:16; Avramidis et al., 2000:36; Avramidis & Norwich, 2002:82). The present study sought to establish if the above American scenario applied in Zimbabwe.

In Europe, Swedish children had a legal entitlement to pre- school attendance and a right to inclusive education with the support they need for participation and learning (Lundvist et al., 2015:126). In Britain, the Special Educational Need and Disability Act of (2001) stipulated that a student with disability must be educated in a mainstream class without any discrimination (Foreman, 2015:9). The literature from Britain and Sweden cited above revealed that laws and policies in place influence the inclusion of children with disabilities in mainstream schools. The current study sought to establish the extent to which the legislative and policy scenarios prevailing in countries such as Britain and Sweden applied to inclusive education at early childhood level in Zimbabwe. Understanding the legislative and policy scenario prevailing in a country is critical as, according to Bronfenbrenner's Ecological Systems Theory, the legal and policy environment is part of the macro system. The legislation in a country is responsible for the extent of rights accorded to children with disabilities. The legal system has a role to play in interpreting the law in terms of individual cases of children with disabilities.

The widespread proliferation of laws and policies on disabilities, globally, has seen increased attention being paid to the education of children with disabilities. Paik and Hearley (1999:253) reported that South Korea experienced accelerated growth of early intervention programmes in inclusive education following the enactment of a law, the Act on the Promotion of Education for the Handicapped in 1977. The Act enabled the provision of free education for children with

disabilities aged 3 to 5 years in mainstream schools. This law was amended in order to extend the inclusion of children with disabilities at ECD level to free and compulsory inclusive education at primary school level in 2004 and it states that education was a human right (Kim, 2014:985). In Italy, the law 104\1992 was the main framework for inclusive education for all children with disabilities, resulting in high inclusion rates and positive education outcomes (Paik and Healey 1999:53; Lamport, Graves & Ward, 2012:60).

The above literature showed that the global movement towards inclusive education is on the increase as shown by the legislation and specific, lower level policies. Burns et al. (2016:12), Nyanga and Nyanga (2013:166), and Wevers and Geldenhuys (2013:3) revealed that policy-making within schools indicated commitment to inclusive education. The current study focused on the interaction between the different levels of Zimbabwean constitutional law, national legislation and lower level policies for inclusive education for children with disabilities. This is in relation to Bronfenbrenner's Ecological System Theory which informed this study. Bronfenbrenner's theory states that in countries which are better off economically, political policies will be instrumental in determining inclusive education in that country. This implies that developed countries such as the UK, had well developed policies for inclusive education. This motivated the researcher to investigate the extent to which policies influenced the inclusion of children with disabilities at ECD level in a developing country, Zimbabwe.

A study in Australia showed that the Disability Discrimination Act of 1992 and the Disability Standards for Education of 2005 support the inclusion of students with disabilities in mainstream schools (Konza, 2008). Purdue (2009:140) stated that philosophies regarding the education of children with disabilities have changed over the past decades and New Zealand was one of the leading countries making an effort to implement policies which foster the inclusion of students with disabilities into mainstream schools. The above literature showed that the global movement towards inclusive education was on the increase, as shown by the legislation and specific, lower level policies. The current study investigated the extent to which these various levels of policy influence the inclusion of children with disabilities at ECD level in primary schools in Zimbabwe. The focus on various levels of policies was in keeping with Bronfenbrenner's Ecological System Theory which informed this study. The theory states that the political system in each country is responsible for the legislation regarding the rights of children with disabilities and their families. This implies that the rights of children with

disabilities to inclusive education are catered for in the macro system of the ecological theory which constitutes the legal aspects of the system.

According to KLR (2013:21) and ACPF (2011:22), many countries in Africa have put in place specific legislation regarding the inclusion of persons with disabilities. For example, Lesotho's Human Rights Act (1983) stated that the state should ensure the inclusion of students with disabilities in mainstream classes to guard against discrimination of students with disabilities. In Malawi, the Handicapped Persons' Act (1972) contained provisions to improve inclusive education for persons with disabilities in the country. In Kenya, the Basic Education Act of 2013 (KLR, 2013) opened the gates for inclusive education for students with disabilities in the country. Similarly, the Malawian national policy on equalization of opportunities for people with disabilities enables the integration of students with disabilities into mainstream schools, while Nigeria, had the first comprehensive special education policy in sub-Saharan Africa (KLR, 2013). The Nigerian National Policy in Education (NPE) of 2004 states that inclusive education of children with disabilities shall be free at all levels (Tesemma, 2011:34; Lampart, Graves & Ward, 2012; Ewa, 2013:87). In the literature discussed above, these countries have specific legislation in place regarding discrimination of persons with disabilities. The present study sought to investigate whether the same scenario applied to Zimbabwe.

Most of the policies in African countries were embedded in the Individual Deficit Model of Disability (Tesemma, 2011:41). This model focuses on the deficiencies of the individual child with a disability and, therefore, may result in policies that segregate by locating the problem in the individual. This is in contrast with Bronfenbrenner's Ecological Systems Theory which informed this study. The theory states that human development is due to reciprocal interaction within the sub-environments in the system. This means that the child impacts and is impacted by the policy environment in the education system. The current study sought to establish the extent to which policies influenced the inclusion of children with disabilities at ECD level in Zimbabwean Primary Schools.

Although Zimbabwe did not currently have any specific policy or legislation in place to inclusive education, it did have a range of policies that were meant to support and promote the inclusion of children with disabilities (Deluca et al., 2014:5). These legal instruments are in line with several international human rights declarations. Inclusion in ECD in Zimbabwe gained momentum with the support of these legal instruments, the Disabled Persons' Act

(1996), the Secretary's Circular Number 4 of 2004 and the Director's Circular Number 7 of 2005. These policies and legislations mandated the rights of children with special needs to inclusion (Mandina, 2012:13; Mushoriwa, 2002:48). Chikutuma and Mawere (2013:54) stated that the Director's Circular Number 12 of 2005 brought changes to ECD programmes which were to be fully incorporated into formal primary school systems with effect from the year 2006. The Principal Director's circular 20 (2011:18) gave guidelines on the establishment of ECD classes in regular primary schools. The policy received an overwhelming response from schools and to date, most schools had attached ECD (A) and (B) classes (Chikutuma & Mawere, 2013: 19). This overwhelming response motivated the present research to find out the extent to which such policies influenced the inclusion of children with disabilities in early childhood education. The above literature focused on the legal and other policy instruments that support the inclusion of children with disabilities in mainstream schools in Zimbabwe.

The absence of a specific policy on inclusive education is reported to be detrimental to inclusion in the prevailing literature, for example, Ainscow et al. (2013), Hayes and Bulat (2017), Gongera et al. (2013:113), Zimba et al. (2007: 41), UNICEF (2014:2), WHO (2011:217), UNICEF (2012:6), UNCRPD (2006:17), SDG 4 (2015:22), UNESCO (2009:17), Burns et al. (2016) and Wermke et al. (2020:71). Earlier Zimbabwean studies, for example, Mutepfa et al. (2007:342), Mafa (2012:20), Deluca et al. (2014:5), Mpofu (2004:955) and Chireshe (2011:157; 2013:224) established that Zimbabwe did not have an inclusive education-specific policy, but had inclusive education-related policies such as the Education Act (1996) (Revised 2006) and the Disabled Persons Act (1996) (Revised 2006) which advocated for non-discrimination in the provision of education and the non-discrimination of people with disabilities.

Some international literature found that general education policies had a positive impact on all learners, including children with disabilities in mainstream schools, for example, in the United States (Sletzt, 2010:1), Britain (Follari, 2011:12, Morrison, 1995:433), New Zealand (Purdue, 2009:138) and South Korea (Paik & Hearly, 1999:253). Earlier Zimbabwean studies, for example Mandina (2012:3), Chikutuma and Mawere (2013:54), Mafa (2012:20) and Mushoriwa (2002:48) also revealed that general education policies positively influenced the inclusion of children with disabilities just as they influenced the education of diverse other learners who may not have disabilities. A disability-specific policy on inclusion has been criticized in the literature, for example, Allan (2003), York-Barr (2005: 29), Hodkinson

(2005:78), Green and Engelbrecht (2007: 4). These studies all criticised the focus on disability as too narrow and therefore exclusionary since disability is only one form of diversity. They argued that inclusive education was multi-layered (Winzer & Mazurek, 2017:59) and was, therefore, amenable to a broad rather than narrow focus. Therefore, because of this uncertainty, the present study focused on the extent to which policies on inclusion at ECD level affected the inclusion of children with disabilities in early childhood education in Zimbabwe's primary schools.

The following section focuses on how teachers' training influences the inclusion of children with disabilities in early childhood education in Zimbabwean primary schools.

## **2.5 TEACHERS' TRAINING AND INCLUSIVE EARLY CHILDHOOD EDUCATION**

Teachers are the key to successful inclusive education programmes (Cant, 1994:40; Haskell, 2000:3; Chimhenga, 2014:24). This is because globally, the practice of teaching is underpinned by theoretical perspectives which come out of teachers' training and which range from positivist to constructivist theories of how children learn (Brown & Paatsch, 2010:130; Snider & Roehl, 2007:87). Some teachers may have gone through training programmes based on positivist approaches that are characterized by direct, skills-based, teacher-centred instruction, while other teachers may have undergone programmes based on constructivist approaches characterized by learner-centred teaching (Brown & Paatsch, 2010: 135). As these authors espoused, the type of approach a teacher will adopt in an inclusive classroom is dependent on the training programme he or she underwent. The literature above showed that teachers' understanding of how and why children learn anything came mainly from cognitive, socio-cultural and information processing perspectives of learning. Each perspective gives teachers a different understanding of how children learn and, therefore, how they should be taught. Teachers of children with disabilities who were influenced more strongly by one or other of these perspectives approached teaching differently and this influenced the inclusion of these learners in different ways. This is in line with Bronfenbrenner's theory which informed this study. The theory states that education workers, such as teachers, are in the mesosystem. This implies that a teacher's training background will influence the teacher's interaction with, and therefore, inclusion of a child with disability. Therefore, it is important to understand the manner in which different training backgrounds influence the inclusion of children with

disabilities. The current study set out to find out how teacher training influences the inclusion of children with disabilities in early childhood education in Zimbabwean primary schools.

On the international scene, many studies stressed the importance of continued professional development for all who work with young children in inclusive education, for example, in Britain (Hutchin, 2007: 128; Nutbrown, 2012:49; Odom, 2000:5; Hunt & Marshall 2012:7), America (Avramidis, Bayliss & Burden 2000:3; US Department of Education 2015:62; Allan, 2008:111; Cook, 2002; Compbell, Gilmore & Cuskelly, 2003:31; Forlin, 2006: 103), China (Sucuoglu, Bakkaloglu, Karasu, Demir & Akalm, 2014:108), India, (Narumach & Bhargava,2011:122), New Zealand (Moffat, 2011:38), Nigeria (Ewa, 2016; Okeke, 2010: 91) and Kenya (Peter & Nderitu, 2014:28). Related literature from countries above focused on professional development as key to inclusive education. The current study sought to establish if the above countries' scenario applied to Zimbabwe, as the focus was on how teachers' training influences the inclusion of children with disabilities at ECD centres in Zimbabwean primary schools.

The prevailing literature indicated that specialist training positively influenced inclusion, for example, Odom (2000:7), Oriedo (2003:29), Wangari (2015:23), Majoko (2013:42), NGECE (2016:23), Huang and Damond (2009:5), Okeke (2010:69), Ewa (2016:91), Cagran and Schmidt (2011:82), Hayes and Bulat (2017:22) Crispel and Kaspersky (2019:12), Lindqvist et al. (2020:42) and Ackers (2018:21). These studies all found that adequate training of teachers in special needs education equips teachers with knowledge and skills for effective inclusion. Despite this key finding, studies were also consistent that most teachers were not specially trained in special needs education. International research revealed that many teachers were not specially trained to enable the implementation of inclusive education, for example in Botswana (Dart, 2007:63; Khan, 2012:109; Mukhopadhyay, 2013:77), South Africa (Engelbrecht & Green, 2001:19; Fakudze, 2012:69; Ntsanwisi, 2008:89; Tshifura, 2012:116; Leser et al., 1997:208; Adewumi, 2019:29; Eloff and Kgwete (2007:353), Crispel & Kaspersky (2019:8) and Ackers, 2018:17), Zambia (Aro & Ahonen, 2011:32), United States (Avramidis et al., 2000:3; Ingen, 2018:16), New Zealand (Purdue, 2009:138) and Hong Kong (Zhang, 2011:14; Wong & Chik, 2016:135). All these studies found that most teachers were not specially trained to enable inclusive education. Similarly, previous Zimbabwean studies, for example Chimhenga (2014:52), Majoko (2016:2), Nyanga and Nyanga (2013:3), Mpfu (2004:336), Mandina (2012:229), Moyo et al. (2012:146), Musengi and Chireshe (2012: 231) and Mpfu

and Shumba (2012:327), established that most teachers were not specially trained in special needs education and had weak facilitation techniques to adequately assist children with disabilities.

Most of the studies above used quantitative survey designs which use techniques which are not good at explaining why people think and act as they do. The present study employed the mixed method design, whereby qualitative techniques allow the researcher to probe for more information. Both quantitative and qualitative techniques were used in order to strengthen data collection and analysis and produce more trustworthy results.

Teachers' training, experience and knowledge are key indicators of the quality of inclusion. There is need for teachers to be knowledgeable about inclusion (Akalin et al., 2014:41). NGECE (2016:23) argued that teachers' training would prepare teachers to deliver quality services to children with disabilities in inclusive settings. In the UK, Huang and Diamond (2009:5) found that teachers who have more training and experience feel more confident about working in inclusive settings because of their knowledge. In view of the related literature from the UK study above that teachers' training and experience was key to the inclusion of students with disabilities in mainstream settings, the present study sought to establish if the above country's scenario applied to Zimbabwe. [Furthermore, the study above by Huang and Diamond \(2009:5\) used mail survey to solicit information from participants.](#) Questionnaires were posted, which might not be effective because some participants may not have time to post the questionnaires back, which may affect the validity of the research. The present study used self-administered questionnaires and interviews. Questionnaires and interviews will complement each other so as to result in in-depth data.

Furthermore, another study in the UK established that the most basic need for teachers in inclusive classrooms is sufficient training in working with children with disabilities (Odom, 2000:7). This implies that inadequate teachers' training affects effectiveness of teachers in working with children with disabilities. Teachers' insufficient training may lead to reluctance by teachers to include children with disabilities in their classrooms (Reynolds, 2001:36; Huang & Diamond 2009:17; Dapudong, 2014:12). Huang and Diamond (2009:17) used the experimental design which does not permit in-depth study of the individuals which is the essence of qualitative approach. Hence, the present study opted for both qualitative and quantitative methods for their richness of data that permits a fuller understanding of how



teachers' training influences the inclusion of children with disabilities in early childhood education.

In relation to Bronfenbrenner's Ecological Systems Theory which informs this study, teachers in schools are a part of the system which has to fully function in relation to other parts of the system, such as administrators, parents and the children with disabilities in the home. In order for the system to survive, teachers need adequate training in order to be fully skilled and competent. In Kenya, Oriedo (2003:29) and Wangari (2015:23) found that adequate training of teachers in special needs education equipped them with knowledge, skills and attitudes that help with inclusive education. Teachers who are equipped with knowledge and skills may be able to address the needs of children with disabilities at various levels of the education system. The above reviewed literature from Kenya focused on the effects of inadequate training of teachers in special needs education. The current study sought to establish how the different types and levels of teachers' training influence the inclusive education of children with disabilities in early childhood education in Zimbabwe primary schools.

Teachers in Botswana and South Africa had not been trained in inclusive education while undergoing their initial teacher training and were not adequately trained to implement inclusive education (Mukhopadhyay, 2013:77; Dart, 2007:64; Tshifura, 2012:116; Engelbrecht et al., 2001:19; Fakudze, 2012:69; Landbrook, 2009: 26; Eloff & Kgwete, 2000:3; Mahlo, 2017:6; Luningo, 2015: 32). Similarly, in Ghana, Agbenyega (2007:51) and Ntuli et al. (2013:56), revealed that Ghanaian teachers perceived that their professional knowledge and skills were too inadequate to effectively teach students with disabilities in regular schools. Marriga, Mcconkey and Myezwa (2014:21) observed that successful implementation and sustenance of inclusive education depends on effective and informed administrative systems within the education system. The above related literature focused on lack of initial teacher's training as affecting inclusive education in different countries. The present study, thus, sought to find out whether the Botswana, South African and Ghanaian scenarios with regards to initial training and the inclusion of children with disabilities in ECD was also applicable in Zimbabwe.

Most of the above studies utilized the qualitative approach in which the study results may not claim wider generalizability to other contexts due to small sample size of the studies. Hence, this current study sought to overcome this problem by using both quantitative and qualitative

designs so that quantitative results could be generalized to the whole population because it involved a larger sample.

Many studies in Zimbabwe showed that teachers' lack of knowledge and pre-service training in inclusive education was a key barrier to its implementation (Majoko, 2016:2; Nyanga & Nyanga, 2013:3; Mpofu, 2004: 336; Chireshe, 2013:227; Mandina, 2012:229; Chimhenga, 2014:44; Chikutuma & Mawere, 2013:9; Moyo & Wadesango, 2012:148; Mpofu & Shumba, 2012: 327; Deluca et al., 2014:15). The above literature focused on effects of teachers' level of training in the inclusion of children with disabilities in mainstream schools as a challenge, while this present study focused on how ECD teachers' training influenced the inclusion of children with disabilities in early childhood education centres in Zimbabwean primary schools.

Most of the studies above such as by Majoko (2016), Chireshe (2013), Mpofu and Shumba (2012), Moyo and Wadesango (2012), used descriptive statistics in their studies to ensure precision in measurement. In contrast, the present study used both numbers and words, since voices of participants are not directly heard in quantitative designs and qualitative designs make up for these weaknesses. A qualitative design was used to obtain participants' perceptions, opinions and beliefs on how teachers' training influences the inclusion of children with disabilities in early childhood development. The quantitative side of this present study summarised numerical data obtained on how teachers' training influenced the inclusion of children with disabilities in early childhood development. The following section focuses on type and severity of disability and inclusive early childhood education.

## **2.6 TYPE AND SEVERITY OF DISABILITY AND INCLUSIVE EARLY CHILDHOOD EDUCATION**

Type and severity of disability, are, reportedly some of the most significant factors in determining the inclusion of children with disabilities worldwide (Ryan, 2009:185). The type of disability is the category of that impairment, for example, hearing impairment, visual impairment while severity of disability is the degree of that impairment (Chimedza & Petersen, 2003:8).

Globally, research, for example in Britain (Ryan, 2009:185; Nutbrown et al., 2013:40; Florian & Linklater, 2010:276; Dukmark, 2013: 28), in the USA (Avramidis et al., 2000:36; Huang &

Diamond, 2009:44; US Department of education, 2015:7; Slentz, 2010:28), in Asia (Lai & Gill, 2014:2; Bantu, 2010:4; Narumanch & Bhargava, 2011:122; Yan & Sin, 2014:82) and in Africa (Eloff, Engelbrecht & Swart 2002; Hastings & Orkford, 2003:33; Compbell, Gilmore & Cuskelly, 2003:366; Mukhapadhyay, Nenty & Abosi 2012:38; Donohue & Bornman, 2014:39; Alhassan, 2014:140; Odongo & Davidson, 2016:10) found that the nature and type of disability can influence teachers' attitudes towards inclusion. The current study sought to establish if the above countries' scenario applied in Zimbabwe.

International literature revealed that the milder the disability, the more willing teachers would be to include children with disabilities, for example in Britain (Ryan, 2009:190; Nutbrown et al., 2013:45; Lopes et al., 2004:415; Griffiths, 2020:60; Stewart, 2020:47), Sweden (Ludqvist et al., 2015:67; Lindqvist, 2020: 62), Hong Kong (Bantu, 2010: 7; Yun & Sin, 2014: 87; Lai & Gill, 2014: 5), India (Narumanch & Bhangava, 2011:128; Singh, 2016:3225), Botswana (Mukhopadhyay et al., 2012:39) and Ghana (Alhassan, 2014:143). All these studies established that the milder the disability, the more likely the child was going to be accepted for inclusion.

Conversely, studies have found that the more severe the disability, the more negatively it affected inclusion of children with disabilities. Prevailing literature, for example Hilbert (2014:19), Ryan (2009:185) and Nutbrown et al. (2013:40) all found that parents of children with disabilities were less likely to favour an inclusive programme that served children with severe disabilities. International literature, for example in Britain (Ryan, 2009:185; Nutbrown et al., 2013:40; Lopes et al., 2004:413; Griffiths, 2020:57; Stewart, 2020:41), Sweden (Ludqvist et al., 2015:63; Lindqvist et al., 2020:78), Hong Kong (Bantu, 2010:4; Yun & Sin, 2014:82; Lai & Gill, 2014:2), India (Narumanch & Bhangava 2011:122), Botswana (Mukhopadhyay et al., 2012:38) and Ghana (Alhassan, 2014:140) also established that the more severe the disability, the less likely the child was going to be accepted for inclusion.

Literature also revealed that children were accepted or rejected by teachers on the basis of the particular types of disabilities that the children have. Some studies revealed that teachers are negative about including children with physical disabilities (Heller et al., 1996:36; Eloff et al., 2002:15; Cahill & Eggleston, 1995:57; Green, 2007: 33; Louvet, 2007:47; Greguol et al., 2018:23). All these studies established that teachers had concerns about learners with physical disabilities whom they viewed as being in constant need of special care for their particular

disability, and that they cannot, therefore, be included in mainstream classes, as it placed too much stress on teachers.

Physical disabilities include neuromotor impairments such as cerebral palsy and spinal cord disorders, degenerative diseases such as muscular dystrophy, and orthopaedic and musculoskeletal disorders (Heller et al., 1996:36) which are easily identifiable even in early childhood. Prevailing literature, for example Cahill and Eggleston (1995:57), Green (2007:22), Louvet (2007:47) and Lindqvist et al. (2020:73) indicated that individuals with physical disabilities were often stigmatized. Prevailing literature for example, Green (2007:27), Harper (1999:54), Lightfoot et al. (1999:73), Weiserbs and Gottlieb (2000:20) also revealed that individuals without a disability may experience discomfort or express sadness towards a person with a physical disability. [On the other hand, other literature indicated that learners with physical disabilities were generally thought to be easier to include than learners with disabilities that are more challenging in terms of learning, such as intellectual disabilities \(Asola & Obiakor, 2016:220; Sands et al., 2000:256\).](#) The ease of including learners with physical disability was due to the fact that they may not necessarily need alterations to the curriculum, but require some modifications to the physical learning environment (Sands et al., 2000:256; Asola & Obiakor, 2016:220).

In the literature, other types of disabilities about which there was uncertainty as to how they influence inclusion include epilepsy (Galletti & Sturniolo, 2004:24; Wilde & Haslam, 1996:64; Eklund & Sivberg, 2003:49; McEwan et al., 2004:2; Barnett & Gay, 2016:7) and hearing impairment (Ademokoya, 2019:22; Bruwer & February, 2019:38; Adoyo & Maina, 2019:77; Namirembe, 2019:116; Dingqian et al., 2019:290; Mandke & Chandekar, 2019:267; Hoa & Woodward, 2019:199; Musengi, 2019:138; 2016:42; Musengi & Chireshe, 2012:142). In light of this uncertainty, the current study sought to find out how type and severity of disability influenced inclusion in ECD centres in primary schools in Zimbabwe.

In the current study, the influence of type of disability on inclusion was investigated in relation to Bronfenbrenner's Ecological Systems Theory which informed this study. The theory states that at home, the relationships have bi-directional influences and these have the greatest impact on the child. In one direction, the type and severity of disability that the child has influences the reactions of those around him or her, such as parents, siblings, teachers and peers. In the opposite direction, the reactions of those around the child with disability similarly influence

the child to behave in particular ways. These influences in either direction could be positive or negative but all emanated from the nature and degree of disability and affected the inclusion of children with disabilities in school. Hence, the reciprocal effects of the type and severity of the child's disability on the inclusion of children with disabilities in early childhood development were the focus of this study.

In most of the studies above, for example Narumanchi and Bhargava (2011:54), Lai and Gill (2014:37), Odongo and Davidson (2016:73), Eloff, Engelbrecht and Swart (2002:15), and Mukhapadhyay et al. (2012:28), interviews were used, which are prone to bias, hence poor reliability due to their openness to many types of bias. The present study had a pilot study to enhance flexibility so that the researcher had the opportunity to restructure the questions whenever needed. The current study did not use interviews in general, but in-depth interviews which yielded the richest data on how the type and severity of disability affected the inclusion of children with disabilities in early childhood education.

Investigations on the effects of severity of disability on inclusion in Europe, for example in Britain (Nowokah & Stterby, 2014:2; Avramidis et al., 2002:134; Clough, 1999:16; Ryan, 2009:186; Huang, & Diamond, 2009:38), in America (Avramidis, Bayliss & Burden 2000:279; Cassady, 2011:18) and in Sweden (Ludqvist, Westling & Siljehag, 2015:73) have shown that teachers appear more willing to include children with mild disabilities. The more severe the child's disability, the more challenges it posed to inclusion. A study by Smith (2005:19) established that children with profound hearing impairment presented more challenges for teachers than children with mild hearing loss. Hence, teachers were willing to include children with mild disabilities and were unwilling to include those with severe disabilities (Scruggs & Mastropieri, 1996:6). While the literature above focused on severity of disability as influencing the inclusion of children with disabilities in different countries, this current study sought to establish whether the above scenario also applied in Zimbabwe to the ECD level of primary schools.

In the current study, the influence of severity of disability on inclusive education was investigated in relation to Bronfenbrenner's Ecological Systems Theory which informed this study. The theory states that if the relationships in the immediate family breakdown, the child will not have tools to explore other parts of his environment. As a result of the reciprocal nature of the theory, it also implies that relationships that break down in the other parts of the system

may also be expected to have an effect on the child in the home. Therefore, since the literature above revealed that teachers were not willing to include children with severe disabilities in their classes, there is breakdown of relationships in school where there is the child in the classroom. The child with disabilities may also be expected to have difficulty in developing social skills to interact with peers outside the classroom and in the wider society.

One of the studies above, by Huang and Diamond (2009:59), used experimental designs which do not permit the type of in-depth study of individuals. The present study benefitted from using a mixed methods approach where in-depth, detailed descriptions of events from qualitative methods permitted a fuller understanding of what was being studied than could have been derived from experimental methods alone. Questionnaires and interviews captured the natural setting and yielded thick descriptions on how the severity of disability affected the inclusion of children with disabilities in early childhood development.

Several studies, for example in Hong Kong (Yuen & Westwood, 2002:84; Zhang 2011:400), Australia (Vaz, 2015:19), Kenya (Glaubman & Lifshitz, 2001:206; Ondongo & Davidson, 2016:32; Mutisya, 2010:52), Ghana (Agbenyega, 2007:46; Ntuli & Traore, 2013:69 and Botswana (Chhabra, Bose and Chadha 2016:46; Mangope, 2017:102) have found that the type of disability influences the inclusion of children with disabilities into mainstream settings. The same studies also established that regular school teachers were positive about including only those children with disabling conditions which were not likely to require extra instructional skills from the teacher. Most of the above studies used descriptive statistics which use measurable variables, leaving out common meanings of social phenomena. This is why this study needed to employ both descriptive statistics and qualitative designs which use data which is sensitive to the social, historical temporal contexts in which the data were collected.

Like in many African countries mentioned above, Zimbabwe is not an exception in that studies also revealed that the type and severity of disability posed great challenges to the inclusion of children with disabilities in mainstream schools (Chimedza, 2000:5; Mpfu & Shumba 2012:332; Maunganidze & Kasaira, 2002:73). A study by Barnett and Kabzems (1992:36) revealed that more than half of Zimbabwean teachers who were surveyed did not support the placement of children with intellectual disabilities in mainstream classrooms and these teachers tended to be positive about teaching children with physical disabilities (Barnett & Kabzems, 1992:136). Similarly, Tafirei, Makaye and Mapetere (2013:47) found that it was easier to

include children with physical disabilities than those with severe intellectual and emotional or behavioural disorders. The above related literature focused on the type and severity of disability as posing problems to the inclusion of children with disabilities in mainstream primary schools, while the present study sought to find out whether even in the early years, the type and severity of disability influenced the inclusion of children with disabilities in early childhood education. This is related to Brenfenbrenner's theory which informed this study. The theory states that features of the disability itself, such as the type, severity and when it was diagnosed will have an influence on both the child and parents. This implies that the type and severity of disability will have influence on the inclusion of a child with disability in early childhood development, starting from home, and this may have effects in the schools.

The following section focuses on strategies for improving the inclusion of early childhood education learners.

## **2.7 STRATEGIES FOR IMPROVING THE INCLUSION OF EARLY CHILDHOOD EDUCATION LEARNERS**

Educating learners with disabilities in mainstream settings requires instructional approaches that promote learner achievement and positive social psychological outcomes (Dash, 2006:12; Florian, 2009:39; Putnam, 2009:81). Such positive social psychological outcomes are usually associated with early intervention. UNICEF (2013:8) and KPMG (2014:6) observed that the experiences and opportunities provided in the early years set the foundation for future learning and development. According to WHO (2012:12), UNESCO (2009:17) and Mikami (2020:250), the first three years of a child's life are a critical period characterized by rapid development, particularly of the brain and, thus, provide the essential building blocks for future growth, development and progress.

The notion of specialist pedagogy that mainstream teachers need to have in order to include learners with special educational needs is widely debated in the psychological literature (Meggitt, 2015:277; Florian, 2009:52). The prevailing literature points out that in order to enable inclusive education to adequately cater for the needs of children with disabilities, there is need for adequate pre-service and in-service training for teachers, designed to enhance their knowledge and skills on inclusive education (Global Campaign for Education, 2012:78; WHO,

2011:57; Crispel & Kaspersky, 2019:12; Lindqvist et al., 2020:42; Ackers, 2018:21; Ingen, 2018:16; Forlin, 2010:32; Zhang, 2011:10; Wong & Chik, 2016:135; Eleweke & Rhodha, 2000:35, Kenyata, 2014:52; Adewumi, 2019:29).

There is, however, literature positing that regular schools with an inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities and achieving education for all (William, Henning & Sarika, 2014:59). William et al.'s (2014:59) position that specialist pedagogy would exclude some non-disabled learners is strengthened by literature that criticized a disability-specific focus as too narrow for inclusive education (Allan, 2003:23; York-Barr, 2005:29; Hodkinson, 2005:78; Green & Engelbrecht, 2007:4) and argued, instead, for Universal Design for Learning (Kurtts, 2006:17; Rose & Meyer, 2002:9; Obiakor et al., 2010:79; Marriga et al., 2014:26; Bruce et al., 2010:123; Capp, 2017:792; King-Sears, 2020:191). The argument was that disability is only one form of diversity, and so training teachers for children with disabilities cannot cater for the multiple diversities expected in multi-layered inclusive education (Winzer & Mazurek, 2017:59). In light of this, it became uncertain whether training to cater for the special educational needs of children with disabilities was an appropriate strategy for inclusive education. Multidisciplinary strategies might appear to be more appropriate (Mieghem et al., 2020:675; Miles & Ainscow, 2011:77; Booth & Ainscow, 2011:14; Dyson & Millward, 2000:17). Multidisciplinary collaboration of professionals, however, has its own constraints around lack of a budget for inclusive education (Chireshe, 2013:230; Sukhraj, 2008:12).

In line with Bronfenbrenner's Ecological Systems Theory that informed this study, areas of concern for inclusive education involve paying attention not only to the school but also to the home and community environments. Studies in Britain and Sweden (Obiakor et al., 2010:79; Lundqvist et al., 2015:3), found that the school, home and community environments should be accessible. This implies that the physical structure of the environment should be barrier-free to student participation. All early childhood settings should have the necessary supports and resources to enhance the learning, development and participation of children with disabilities (Obiakor et al., 2010:79; Lundqvist et al., 2015:3). Odom et al. (2011:54), Nutbrown et al. (2013:23) and Zhang (2011:10) established that environmental modifications could take many forms, such as physical modification of buildings and the use of technological aids. These modifications provide access and opportunity to promote independence and empowerment to learners, especially through play. Pyle and Danniels (2017:274), Fesseha and Danniels



(2016:361), Lindon (2012:38), Linington (2011:10), Agbenyega and Degu (2011:65), Chikutuma (2013:89), Ailwood (2003:289) and Kwela et al. (2000:164) all found that play had positive effects in children's cognitive development, learning, peer relationships and emotional well-being. Ailwood (2003:286) explained that play in ECD formed a significant nodal point at which understanding of childhood, motherhood, family, psychology and citizenship collided.

Play is divided into physical, social and fantasy types. It is about games with rules that enhance learning and is, therefore, a positive teaching strategy (Ailwood, 2003:289; Rotumoi & Too, 2012:10). From a developmental perspective play as a teaching method was a primary vehicle and indicator for children's mental growth (Ailwood, 2003:290; Mulford, 2003:12). Play was also quite useful for teaching functional skills at this age (Bertills et al., 2018:387; Storey & Miner, 2017:3; Baine, 1991:40; Brennan, 1995:67; Moores et al., 2013:4).

The above literature which stated that home, school and community should be accessible through modifications of these environments, is in line with Bronfenbrenner's Ecological Systems Theory that informed this study. The theory states that human development and behaviour cannot be understood independently of the social context in which they occur at different levels. The home, school and community should be in interaction in support of the education of the child with disability in inclusive schools. The present study sought to find out what strategies can be employed to improve home, school and community interaction in support of children with disabilities at early childhood level in Zimbabwean Primary Schools.

Studies above by Ludqvist et al. (2016) and Zhang (2009) used case studies, whereby it is often difficult to generalize from a single case but the present study utilized mixed methods techniques of collecting data. Using both quantitative and qualitative approaches in a study enables the researcher to obtain a more complete picture of human behaviour and experience (Mieghem et al., 2020:650). Different techniques were used, such as open-ended questionnaires, in-depth interviews and theme identification to establish how the home, school and community can be made accessible as a strategy to improve the inclusion of children with disabilities in ECD settings.

Australian studies by Moores et al. (2013:46) and Forlin (2010:32) revealed that a functional approach to early childhood intervention was required to enable the children to accomplish particular tasks rather than to promote change in the impairment. The use of natural

environments enabled children to practice and expand their functional skills and learning. On a similar note, an American study by Morrison (1995:16) revealed that an ecological approach should be employed, where services for ECD are provided within the children's family and community settings. Educators should provide for children's physical, social, emotional and cognitive needs. The ecological approach recommended in the above literature is related to Bronfenbrenner's Ecological Systems Theory which informed this study. The theory states that a system should operate at different but interrelated levels in constant interaction with other parts of the system. The child should be supported by the family and community to develop functional skills.

The study by Forlin (2010:32) above used the quantitative method of collecting data and the data were analysed using the Statistical Package for Social Sciences (SPSS version 20). The present study used both the quantitative and qualitative methods to establish how the functional approach can be used to improve the inclusion requirements of children with disabilities in ECD classes in Zimbabwean primary schools.

Nutbrown et al. (2013:23) and Follari (2011:36), in British studies, established that engaging children in play activities at ECD level was critical in that children experience social interaction and acceptance by their peers. Play in early childhood education is a central component of children's experiences and fundamental way of learning. Early stimulation is critical to later development of language, intelligence, personality and a sense of self-worth and that in play children's mental skills such as attention, memory, recall and imagination are at a higher level than during any other activity. Play has been valued throughout history and across international practice as the primary vehicle for children's learning and socialization (Lindon, 2012:38). This is consistent with a Canadian study by Wiart et al. (2013: 345), which revealed that use of a range of instructional approaches to promote engagement in play is beneficial to the children. The experiences and opportunities children are provided with in the early years set the foundation for future learning and development (Wiart et al., 2013:345). While the above related literature values play as crucial in learning as revealed in the above studies, the present study sought to find out whether the same scenario applied to children with disabilities in early childhood in Zimbabwean primary schools.

African studies on play are no exception, as a study by Kamerman (2006:12) in Zambia showed that children learn through play. Similarly, other studies in South Africa (Excell & Linington,

2011:10), Tanzania (Kwela, Bunagi & Kainamula, 2000:164), Ghana (Agbenyega & Degu 2011:65) and Zimbabwe (Chikutuma, 2013:89) found that play leads to holistic development in a child. Kenyatta (2014:52) revealed that the use of play in the learning of ECD children enhances intellectual, social and emotional development of children. This is consistent with Ailwood (2003:289), who found that play had positive effects on children's cognitive development, learning, peer relationships and emotional well-being. Children interact with content and media as they play, thereby enhancing their learning. This is in line with the Ecological Systems Theory which informs this study. The theory states that the child interacts with the environments within different layers. The current study sought to establish how children interacted with the ecology and how play as a strategy promoted cognition and maturation of these ECD learners for inclusion primary schools.

Research has shown that in Kenya (Korir & Mukuria, 2007:52), Ghana (Antony, 2011:83) and Uganda (Kristensen & Kristensen, 1997:32) special education is a multifaceted discipline that calls for professionals from all disciplines to work together in the inclusion of children with disabilities. Professionals must be constituted into a collaboration and instructional team that identifies appropriate educational strategies for children with disabilities (Voltz et al., 2001:332). In this approach, the combined expertise of a variety of professionals provides insight into each child's needs and strengths. Eleweke and Rodda (2000:35), in their findings, established that a multidisciplinary approach is appropriate for children with disabilities because it provides enriching experiences that each child can act upon individually. It also facilitates engagement in exploration for students with disabilities. Literature reviewed above focused on the usefulness of a multidisciplinary approach in early childhood education. The current study sought to establish how a multidisciplinary team can work in collaboration as a strategy to address the needs of children with disabilities in early childhood inclusive education in Zimbabwean Primary Schools.

## **2.8 SUMMARY**

This chapter reviewed related literature focusing on resources and inclusive early childhood development, stakeholders' attitudes and inclusive early childhood education, policies and inclusive early childhood education, teachers' training and inclusive early childhood education, type and severity of disability and inclusive early childhood education and strategies for

improving the inclusion of early childhood education learners. The next chapter discusses the research methodology that was followed in this study.

## **CHAPTER 3: RESEARCH METHODOLOGY**

### **3.1 INTRODUCTION**

This chapter focuses on discussing the research methodology used in this study on establishing factors affecting the inclusion of children with disabilities in early childhood development centres in Masvingo primary schools. Research methodology is the science of the various steps that are generally adopted in studying a research problem, alongside the logic behind such steps (Baker, 2016:7). Nachmias and Nachmias (1996:13) explain that it is a system of explicit rules and procedures upon which research is based and against which knowledge claims can be evaluated. This chapter discusses the logic behind the steps that were taken in studying factors affecting the inclusion of children with disabilities in early childhood development in primary schools in Masvingo educational province of Zimbabwe. The chapter makes explicit the rules and procedures utilized to study the inclusion of children in early childhood in this two-part

study. The first part was a pilot study and the second part was the main study. This chapter begins by discussing the research paradigm and follows this up with an analysis of appropriate research approaches and the research design utilized in this study. The chapter also discusses the sample and sampling procedure, instrumentation, data collection procedures, validity and reliability, trustworthiness, data analysis plan and ethical issues that were considered in this study.

### **3.2 RESEARCH PARADIGM**

Research is carried out within a specific paradigm (Brierley, 2017: 70). A paradigm is a social construction that is a historically and culturally embedded discourse or practice (Byrne & Humble, 2007:1; Schwandt, 2001:183). It reflects the basic belief system or world-views of researchers, involving ideas around how knowledge is created and how change can be accomplished (Denzin & Lincoln, 2011:7; Mertens, 2005:2; Bogdan & Biklen, 2003:6). A paradigm dictates the research agenda of the study (Mouton, 2009:15).

This study utilized the post-positivist paradigm. Post-positivism is based on the ontological and epistemological assumptions that reality can only be known imperfectly thus it is measurable with difficulty (Wildemuth, 1993:450; Morris, MacNaughton & Osmond, 2009:56; Phillips & Burbules, 2000:253). Post-positivism, therefore, facilitates the methodological pluralism utilized in this study to analyze diverse factors affecting the inclusion of children with disabilities at ECD level. Post-positivism was chosen for this study in order to utilize its pluralistic axiological characteristic which will allow not only for plural values on disability, being and learning but also the development of alternative data collection strategies on factors affecting the inclusion of children with disabilities in early childhood education. The paradigm emphasizes investigating the phenomena objectively, with the help of quantitative and qualitative data (Phillips & Burbules, 2000:256). Hence, this paradigm was considered the most appropriate for the present study due to its capacity to quantitatively and qualitatively capture people's perceptions and experiences of factors affecting the inclusion of children with disabilities in early childhood development.

For many mixed methods researchers, post-positivism has become the answer to the question of what the best paradigm for mixed methods research is (Creswell & Plano Clark, 2013:16; Tekin & Kotaman, 2013:226; Johnson & Onwegbuzie, 2004:16; Tashakkori & Teddlie,

2003:7; Patton, 2002:36; Maxcy, 2003:213; Morgan, 2007:33; Denscombe, 2008:211; Hoberg, 2001:18; Johnson & Gray, 2010:4). It is against this view that the study was informed by the post-positivistic paradigm which used a mixed methods approach as discussed in the following section.

### **3.3 RESEARCH APPROACH**

The present study utilized a mixed methods research approach. The mixed methods approach uses both quantitative and qualitative forms of research (Creswell, 2007:4; Mcmillan & Schumacher, 2010:25). The mixed methods approach was appropriate in this study as it utilized techniques from both quantitative and qualitative research, which gave the research more strength. Data from open ended interviews yielded thick descriptions of factors affecting the inclusion of children with disabilities in early childhood development. Quantitative data from closed-ended items in questionnaires was also utilized to yield statistical data on factors affecting the inclusion of children with disabilities in early childhood development.

Zohrabi (2013:3) argued that the reason why more researchers opt for the mixed methods approach is that both quantitative and qualitative data are simultaneously collected, analysed and interpreted. This promotes an understanding of the chosen phenomena in a manner that would not be possible using a single approach. This is why the present study found mixed methods approach appropriate. The inferences made with mixed methods approach were stronger.

The mixed methods approach gives a voice to study participants and ensures that study findings are grounded in participants' experiences (Byrne & Humble, 2007:5; Michelle & Porch, 2017:13; Creswell, 2007:2). The researcher chose this mixed methods approach to establish factors affecting the inclusion of children with disabilities in early childhood education to enable participants to elaborate on what they mean by reporting in their own voices. The other reason why the mixed methods approach was appropriate in the present study is that the research became contextualized in the settings in which participants provided their experiences. The use of direct quotations from people, about their experiences, opinions, feelings and knowledge enhanced the capturing of participants' experiences.

The quantitative side of this study quantified and, therefore, enabled statistical representation of participants' opinions on factors affecting the inclusion of children with disabilities in early childhood development. However, the quantitative research approach is weak in understanding the context or setting in which people talk. Also, the voices of participants are not directly heard, hence the need for the qualitative research approach to make up for these weaknesses (Creswell, 2006:9). The present study therefore, opted for the mixed methods approach to enable the qualitative approach to make up for weaknesses in the quantitative approach, while the quantitative approach also made up for weaknesses in the qualitative approach. Kumar (2015:37) argued that using more than one method within a research study enables the researcher to obtain a more complete picture of human behaviour and experience, thereby broadening the scope of the study. Hence, the present study chose the mixed methods approach to obtain a complete picture of stakeholders' behaviour and experiences on factors affecting the inclusion of children with disabilities in early childhood education.

The mixed methods research approach is practical in the sense that the researcher is free to use all methods possible to address a research problem and individuals tend to solve problems using both numbers and words (Tashkori & Teddlie, 2003:20). Mouton (2009:36) argues that the use of multiple methods and techniques is usually one of the best ways to improve quality of research. The mixed methods approach was appropriate for the present study because there is a wide range of human phenomena that may be very difficult to measure. For example, in the present study it would have been difficult to measure stakeholders' attitudes in the inclusion of children with disabilities in ECD. Therefore, there was need for utilizing the mixed methods approach. Statistical methods were used to analyse quantitative data, thereby using numbers. Qualitative methods were used to analyse qualitative data, thereby using words. Both quantitative and qualitative approaches are discussed in detail in the following sections.

### **3.3.1 Quantitative Approach**

The quantitative approach is the natural scientific method in human behavioural research. The quantitative approach is primarily concerned with measurable phenomena involving people, events or things. It is a research approach dealing with numbers and anything that is measurable in a systematic way of investigation of phenomena and their relationship concerned (Creswell 2009:18; Bryman, 2001:20; Leedy & Ormrod, 2014:8; Chimhenga, 2014:61). Use of scientific methods for data collection and analysis made the quantitative approach appropriate for the present study in that the results can be generalized to other settings. In this study, the

quantitative approach was used to quantify participants' opinions on factors affecting the inclusion of children with disabilities in early childhood development.

The use of numbers made the quantitative approach relevant to the present study as it ensured precision in measurement. The number of respondents who have similar opinions on factors affecting the inclusion of children with disabilities in ECD was measured using numbers. Quantitative approaches have well established statistical methods for analysing data (Shank & Brown, 2007:27; Berg & Howard, 2012:61). Hence, the quantitative approach was appropriate in the current study because using statistical methods to analyse data enabled data to be summarized easily, thereby facilitating communication of findings. The quantitative approach facilitates comparison (Bryman, 2001:20; Shank & Brown, 2007:27; Leedy & Ormrod, 2014:93). Data was collected from several participants and settings in this study and this enabled the results to be compared. The present study opted for this approach for the reason that the findings of the study became easier to compare.

### **3.3.2 Qualitative Approach**

The qualitative approach is a method of inquiry which seeks to establish narrative descriptions that inform the understanding of the researcher about a social phenomenon (Denzin & Lincoln, 2011:5; Mcmillan & Schumacher, 2010:281). The qualitative approach was appropriate in the current study due to its ability to provide detailed descriptions on how people experience the inclusion of children with disabilities in early childhood development. In the current study, detailed descriptions of participants' experiences were provided on the inclusion of children with disabilities in ECD.

In the qualitative approach the investigator usually works with a wealth of rich descriptive data collected through methods such as participant observation, in-depth interviewing and document analysis (Mouton, 2009: 169). In the current study, participants' perceptions, experiences, feelings and attitudes on factors affecting the inclusion of children with disabilities in early childhood development were gathered. Hence, the qualitative approach was appropriate in this study due to its rich descriptive data. Furthermore, the flexibility of the qualitative approach made it appropriate in the current study since many strategies were employed to get detailed information. The qualitative approach was chosen in the present study due to its subjectivity when dealing with wealthy descriptions from participants (Obiokor et al., 2010:24). In the current study, the qualitative approach was used in order to deal with rich



descriptions from participants on factors affecting the inclusion of children with disabilities in early childhood development.

The qualitative research approach views human thought and behaviour in a social context and covers a wide range of phenomena in order to understand and appreciate them thoroughly (Leedy & Ormrod, 2014:141; Lichtman, 2013:4; Hughes, 2000:3; Creswell, & Garrett, 2008:6). The qualitative approach was used in the present study because detailed information was obtained in the participants' settings and could be studied better in these settings. Furthermore, the present study used this approach for the reason that information from teachers, headmasters and parents was obtained in their settings. The qualitative approach allowed the researcher the flexibility to probe for more information and this enhanced rich in-depth details from participants. Research design is discussed in the following section.

### **3.4 RESEARCH DESIGN**

A research design is the plan according to which we choose research participants and collect information from them. In it we describe what we are going to do with the participants, with a view to reaching conclusions about the research problem (Welman, Kruger & Mitchell, 2005:52). Henning (2004:17) stated that a research design provides the framework that specifies the type of information to be collected, its sources and collection procedures. The present study used a [convergent parallel mixed methods research design](#) (Creswell & Plano Clark, 2011:67). In the [convergent parallel mixed methods design](#) the qualitative and quantitative strands are performed independently and their results are brought together in the overall interpretation (Schooneboom & Johnson, 2017:117). Following Morse's (1991:78) commonly used notation system for mixed methods, the [convergent parallel mixed methods design](#) used in this study was QUAL + quan indicating that the qualitative strand was primary although there was concurrent implementation of the components (Schooneboom & Johnson, 2017:117; Brooke, 2013:68; Mathiyazhagan & Nandan, 2010:8). The [convergent parallel mixed methods design](#) was appropriate in the present study because qualitative and quantitative data on the inclusion of children with disabilities in early childhood education centres in Masvingo, Zaka and Bikita districts were collected and analysed concurrently. The primacy of the qualitative strand was evident in data collection and analysis where most of the data were qualitative.

The convergent parallel mixed methods design was used in the present study to collect, analyse and interpret qualitative and quantitative data on the inclusion of children with disabilities in early childhood education centres. The study used naturalistic observations in parent interviews and teachers’ and school-heads’ questionnaires to collect a combination of qualitative and quantitative data. These data collection methods were executed in parallel for what Tomasi et al. (2018:81) call a holistic and multidimensional understanding of the phenomenon of interest, in this case the inclusion of children with disabilities in early childhood education centres. In the research process, two datasets were obtained, analyzed separately and compared. This was done for the purpose of corroboration and multiple validities legitimation (Schooneboom & Johnson, 2017:85; Demir & Pismek, 2018:134). The researcher aimed to triangulate the methods by directly comparing the component of quantitative statistical results from teachers and school heads as well as the qualitative findings from the parent interviews. The research process in this study is captured in Figure 3. 1.

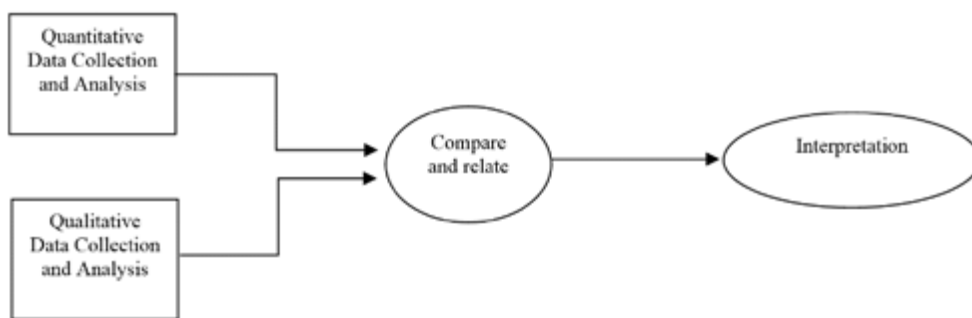


Figure 3.1: Research process using the convergent parallel mixed methods design

### 3.5 POPULATION

Population refers to a group of individuals that have one or more characteristics in common that are of interest to the researcher (Boglan & Biklen, 2007:91). A population is a group of elements or cases that can be individuals, objects, or events from which a research sample is selected (Creswell, 2009:23). A population is the complete set of elements from which a sample is taken (Saunders, Lewis & Thornhill, 2007:62). A population can be seen as a collection of persons with comparable features from which the participants of a study are drawn. The population of this study consisted of 309 heads of primary schools in Zaka, Bikita and Masvingo districts and 2 085 primary school-teachers teaching at ECD level at schools in these three districts. The population also consisted of an estimated 89 000 parents of children enrolled in ECD centres at primary schools in the three districts.

### **3.5.1 TARGET POPULATION**

The target population is the population that the research is interested in because of its characteristics (Saunders, Lewis & Thornhill, 2007:62). The target population of this study consisted of 200 heads of primary schools in Zaka, Bikita and Masvingo districts and 600 teachers in these schools who are either currently teaching or had enrolled and taught children with disabilities in ECD A and ECD B classes. The characteristic of interest to the researcher was that these teachers and school-heads had knowledge of factors affecting the inclusion of learners with disabilities at ECD level as they had served them. The target population also consisted of about 900 parents who either had their children with disabilities currently or previously enrolled in ECD centres at primary schools in the three districts. The characteristic of interest to the researcher was that these were the biological parents of ECD level children with disabilities and who therefore had knowledge of factors affecting the inclusion of their children in schools.

### **3.6 SAMPLE AND SAMPLING PROCEDURES**

A sample is a group of people, objects or items that are taken from a larger population (McMillan & Schumacher, 2010:10; Pellissier, 2010:15). The sample should be representative of the population to ensure that findings can be generalized from the sample to the target population (Kumar, 2005:69; Meanwell, 2017:7). The present study had 72 participants. Thirty-six teachers, 24 parents and 12 head-teachers were included in the sample. Sampling consists of obtaining information from only a part of a large population so as to infer about the whole population (Saldana, 2016:47; Schwandt, 2015:36). Denzin and Lincoln (2005:68) argued that the objective of sampling is to secure a sample which will represent the population. Purposeful sampling was used in the current study in order to achieve what Creswell and Piano Clark (2011:12) called the identification and selection of information-rich cases for the most effective use of limited resources. The typical case strategy of purposeful sampling (Palinkas et al., 2015:17) was used to select teachers who teach children with disabilities. The typical teacher had mainstream teacher training and so these formed the core of the teacher sub-sample in order to enable them to provide information on typical factors affecting the inclusion of these children in their classes. The maximum variation strategy of purposeful sampling (Palinkas et al., 2015:18) was used to select parents of children with disabilities so that they could provide a range of diverse factors affecting their children in inclusive ECD settings. Parents of children with varying types, severities and experiences of disabilities were deliberately selected.

Palinkas et al.'s (2015:18) stratified purposeful sampling was used for selecting school-heads. This technique was used in order to capture how school-heads with major variations in administrative background perceived factors affecting inclusion of children with disabilities in early childhood in different primary schools. Heads with various types of qualifications and experience in different sizes of schools were deliberately selected. The following section focuses on the instrumentation for the study.

### **3.7 INSTRUMENTATION**

The current study used two questionnaires, one for ECD teachers and another for school-heads. The study also used interviews with parents of children with disabilities. These instruments are described in the following sections.

#### **3.7.1 Questionnaires**

Questionnaires are any written instruments that present respondents with a series of questions or statements to which they are to react by either writing or selecting from among existing answers (Magwa & Magwa, 2015:76). In the present study, questionnaires were appropriate because they allowed greater uniformity in the way the questions were asked, thereby ensuring greater compatibility of responses. Questionnaires allowed the study to incur low costs of collecting data in that school-heads and teachers were found in one school. Questionnaires provide the respondents with standardized responses (Cohen et al., 2007: 335). Leedy and Ormrod (2005: 185) state that data collected from closed questions can be quantified and compared easily. Quantifying and comparing was made easier because Likert-scales were used. A Likert-scale refers to a series of gradations, levels or values that are descriptive of various degrees of a phenomenon under research (McMillan & Schumacher, 2006:198). This allowed for more accurate assessment of the responses. A low response rate was curtailed by appealing to the research participants' good will and explaining the rationale of the study to them. Questions were as short and simple as possible to increase the likelihood that they would be understood. The present study used self-administered questionnaires for heads of schools and teachers because questionnaires have greater anonymity which is associated with the absence of an interviewer.

The self-administered questionnaire for ECD teachers had 38 questions. Of these, 32 were closed-ended and six were open-ended. The first five closed-ended questions sought teachers'

biographic data. The remaining 27 closed-ended questions had a four point Likert-scale for easier quantification and comparison. Of the 27 closed-ended Likert-scale questions, a set of four or five dealt with a thematic area derived from each of the research questions. The first five questions sought data on the extent to which resources influenced the inclusion of children with disabilities in early childhood development. The next five sought data on the extent to which attitudes of stakeholders affected the inclusion of children with disabilities in ECD. The next four questions sought to establish the extent to which policies influenced the inclusion of children with disabilities in ECD. The next five sought to find out how teachers' training influenced the inclusion of children with disabilities in ECD. The next five addressed how the type and severity of disability affected the inclusion of children with disabilities in ECD. The last three questions sought to find out strategies to improve the inclusion requirements of children with disabilities in ECD. The ECD teachers' questionnaire also had include six open-ended questions dealing with each of the six thematic areas that the closed-ended questions dealt with (see Appendix B).

The self-administered questionnaire for school-heads had 31 questions. Of these, 25 were closed-ended and six were open-ended. The first three closed-ended questions sought demographic data. The remaining 22 closed-ended questions had a Likert-scale and were based on themes from the six research questions. These themes are: the extent to which resources influence the inclusion of children with disabilities in ECD; stakeholders' attitudes towards the inclusion of children with disabilities in ECD; the extent to which policies influence the inclusion of children with disabilities in ECD; the influence of teachers training to the inclusion of children with disabilities in ECD; how the type and severity of disability affect the inclusion of children with disabilities in ECD and strategies that that can be employed to improve inclusion requirements of children with disabilities in ECD.

The school-heads' questionnaire also had six open-ended questions based on the six themes described above (see Appendix C). The open-ended questions are important because, as Welman et al. (2005: 187) explain, the respondents' answers would not be influenced unduly by the presence of an interviewer and also the verbatim replies from the respondents provide rich sources of varied materials. However, despite these strengths, the questionnaires had the main limitation that they did not give the researcher the opportunity to probe the respondents' opinions and feelings. This limitation was, however, overcome by the inclusion of in-depth

interviews in the study. The following section discusses the collection of data using interviews in order to complement data from the questionnaires.

### **3.7.2 Interviews**

Interviewing has become a way of life in society (Henning, 2005:50). An interview is a technique by which research participants get involved in the study and talk about their views (Nolan, Macfarlane & Cartmel, 2013:28). An interview takes place between two or more people who are unequal in power and in ownership of the process (Henning, 2005:66). Interviewing has been described as one of the most powerful ways to understand another person's perspective (Obiokor, Bakken & Rotatori, 2010:24). The present study used in-depth interviews to elicit a comprehensive range of views, perceptions and reflections about participants' experiences on factors affecting the inclusion of children with disabilities in ECD centres in primary schools.

In these interviews there was immediate feedback, room for probing and clarification of issues raised and observation and recording of non-verbal responses. Gubrium and Holstein (2002:17) argued for a discourse of empowerment in interviews. This means that the respondents and researchers build some reciprocal understanding as meanings emerge during the course of the interview. Discourse of empowerment in interviews made interviews appropriate to the present study since the interviewer explained and helped clarify questions, thereby increasing the likelihood of useful responses. Interviews are particularly appropriate when dealing with illiterate people (Obiokor et al., 2010: 36). In the current study, interviews were used with parents of children with disabilities as some of them were illiterate.

The parents' interview guide had 20 questions. The first two questions were closed-ended and sought the parents' biographical data. The remaining 18 questions were open-ended. Each of the six thematic areas derived from the research questions was catered for by three open-ended questions. The following are the themes: The extent to which the availability and unavailability of resources influence the inclusion of children with disabilities in ED; how stakeholders' attitudes influence the inclusion of children with disabilities in ECD; the extent to which policies influence the inclusion of children with disabilities in ECD; how teachers' training influence the inclusion of children with disabilities in ECD; how the type and severity of disability influence the inclusion of children with disabilities in ECD, and what strategies can be employed to improve the inclusion of children with disabilities in ECD (see Appendix D).

Interviews and questionnaires were relevant in the current study because data about factors affecting the inclusion of children with disabilities in early childhood development needed to be elicited from the participants. To ensure that reliable, valid and trustworthy data was elicited, a pilot study was conducted and the following section discusses the pilot study.

### **3.8 PILOT STUDY**

A pilot study refers to a mini version of a full-scale study as well as a pre- testing of a particular research instrument such as a questionnaire or interview schedule (Burns, & Groove, 2009:42; Nolan et al., 2013:2). Piloting entails administering the instruments to a limited number of subjects from the same population as that for the intended study (Welman, Kruger & Mitchell, 2005:42). In the present study, the pilot study involved administering questionnaires to teachers and heads of schools then interviewing parents. A pilot study was conducted in the present study since it is an essential component of any research. Riet and Durrheim (2006:94) posit that pilot studies are preliminary studies on small samples that help to identify potential problems with the design, especially the research instruments. The information from the pilot study was used to refine the questionnaire and the interview schedule as instruments in the study.

In the current study, the self-administered questionnaire and interview schedule were pre-tested through a pilot study in order to increase their reliability, validity and practicability (Cohen, Manion & Morrison, 2011:34). [The pilot study helped to identify and eliminate potential problems to the current study. It allowed the researcher to revise the methods and instruments before the actual study. This improves the effectiveness of the study \(Delpont, 2005:37; Tashkkori & Teddlie, 2010: 122\). A pilot study is done to ensure that data collected answers the researcher's questions. A pilot study is done to detect unclearly formulated items and flaws to the proposed study \(Chimhenga, 2014:73; Davis & Sutton, 2004:177; Pratt & Loizos, 2003:59\). The purpose of the pilot study in the present study was to eliminate some ambiguous items.](#) Babbie (2010: 267) stated that questionnaire pre-testing is the surest way to avoid errors and ambiguous questions. In the present study, the results of the pilot study helped the researcher to identify and rectify misunderstandings, inadequate items and mechanical difficulties in the questionnaire and interview schedule.

### **3.8.1 The Sample for the Pilot Study**

The sample for the pilot study consisted of 10 teachers, 10 parents and six school-heads in Chivi District. The sample size for the pilot study was 27% of the sample in the main study. Convenience sampling was used to select participants who were within easy reach in Chivi District. Chivi District was selected because it was not part of the main study. According to Nardi (2006:95), the samples from the pilot study are not supposed to take part in the main study because repeated participation could bias the results. Chivi District has rural and peri-urban sub-environments that are similar to those in Zaka, Bikita and Masvingo districts which are in the same Masvingo Educational Province and are in the main study. The pilot study was, therefore, conducted on a sample that had similar characteristics to those of the sample in the main study.

### **3.8.2 Data Collection Procedures for the Pilot Study**

Permission was sought from the Ministry of Primary and Secondary Education head office before appointments were made with selected school-heads. The ministry has authority to grant such permission. School-heads in each of the six selected schools assisted with identification of ECD teachers and parents of children with disabilities in local communities. Questionnaires were administered on the school-heads and ECD teachers. In addition to answering the questions in the instruments, the school-heads, ECD teachers and parents of children with disabilities were given an opportunity to comment on each of the items. Their comments were taken into account in revising the questionnaire for collecting data in the main study. The following section discusses other procedures taken for ensuring the validity and reliability of quantitative data as well as the trustworthiness of qualitative data that was collected in the main study.

## **3.9 VALIDITY, RELIABILITY AND TRUSTWORTHINESS**

The study strived to ensure that the quantitative data were valid and reliable while the qualitative data were trustworthy. Babbie (2009:146) stated that these aspects have to be established before a study is conducted. The establishment of reliability, validity and trustworthiness in the main study is discussed in detail in the following sections.

### **3.9.1 Reliability**

Reliability is the consistency, dependability, accuracy and precision with which an instrument measures what it is intended to measure (Burns & Grove, 2005:374; Polit & Beck, 2004:416). Factors that can affect reliability include the researcher's orientation, attitudes and beliefs



(McMillan & Schumacher, 2010:217). To ensure reliability in this study, the researcher developed the instruments in consultation with the supervisor. Items in the instruments that were regarded as unclear by the supervisor were corrected or discarded. The reliability of the questionnaires used in the proposed study was also improved through the pilot study. The questionnaires were administered in a test-retest situation in a pilot study involving heads of schools and teachers of ECD classes in Chivi District. A correlation co-efficient of 0.8 was obtained using the Pearson product moment formula. Analysis of these participants' responses led to modification of some of the items in order to further improve the reliability to the questionnaires. Chivi District was deemed to be appropriate for the pilot study as it is in Masvingo Educational Province but was not involved in the main study.

### **3.9.2 Validity**

Validity is the relevance and appropriateness of the measuring instrument. This means that, validity is about the extent to which an instrument is able to meaningfully measure what it is expected to measure (Burns & Grove, 2005:755; LoBiondo-Wood & Haber, 2002:502). LoBiondo-Wood and Haber (2002:506) explain that it is the extent to which how truthful the research results are. The validity of the instruments in the current study was enhanced through careful systematic sampling of the research participants. Validity of the instruments was also enhanced through the use of appropriate research instrumentation and effective treatment of data.

Denzin and Lincoln (2005:10) posit that validity is greater in interviews when the interview is based upon a carefully-designed structure, thus ensuring that significant information is elicited. In the current study, internal validity focused on **construct validity** which was enhanced through the use of carefully structured questionnaires and interviews to elicit adequate and useful information. The **construct validity** of the questionnaires was enhanced through asking the right questions, phrased in the least ambiguous way. Furthermore, in the questionnaires the meanings of all terms were clearly-defined so that they had the same meaning to all respondents. To ensure validity of the constructs in this study, the researcher developed the instruments in consultation with the supervisor whose expertise helped to attain criterion jury validity. Construct validity subsumed all the other types of validity. Trustworthiness will be discussed in the next section.

### **3.9.3 Trustworthiness for Qualitative Data**

Trustworthiness is going to be discussed under the following subheadings, credibility, dependability, transferability and conformability in the following sections.

#### *3.9.3.1 Credibility*

Credibility involves carrying out the study in a believable way and demonstrating how credible the study is (Polit & Beck, 2006:301). In the present study, the researcher was in the field for long enough to have a full understanding of the factors affecting the inclusion of children with disabilities in early childhood in primary schools. Furthermore, to ensure credibility of the present study, data were collected from the natural settings where participants lived and worked as advocated by Cohen, Manion and Morrison (2011:180). Altheide and Johnson (1994:490) said that a researcher needs to give quality and sufficient time in the field in order to have a sincere and honest understanding of the phenomenon under investigation. Furthermore, in the current study, multiple sources of data collection were used to increase the credibility of the results. The researcher also used two research instruments for triangulation purposes in order to enhance credibility of the study. The use of two instruments complemented the weakness of one instrument with the strengths of another.

#### *3.9.3.2 Dependability*

Dependability refers to how stable the collected data are (Berg & Howard, 2012:108). Thomas and Harden (2008:15) state that dependability is an assessment of the quality of the integrated processes of data collection, data analysis and theory generation. In the present study, overlapping methods were employed to enhance dependability. The current study also employed in-depth methodological description to allow the study to be repeated. Furthermore, the methods used for selecting people and events to include in the study were clearly presented in order to enhance the dependability of the study. The current study also employed the dependability audit technique, whereby an independent auditor reviewed the activities of the researcher to see how well the techniques used met dependability standards.

#### *3.9.3.3 Transferability*

Transferability refers to the extent to which the findings can be transferred to similar contexts while maintaining similar meanings and inferences (Stake, 1994:239). Anderson (2004:310) posits that transferability is the degree to which the findings of the study can apply or transfer beyond the bounce of the study. In the current study, transferability was enhanced through providing details of the phenomena and setting in a formal research report. Since thick descriptions of the events are provided in sufficient detail in the report, other researchers can then apply relevant knowledge from the study to other settings.

### 3. 9. 3. 4 *Confirmability*

*Confirmability* refers to the degree to which the results of an inquiry could be confirmed by other researchers. It is concerned with establishing that data and interpretations of the findings are not fragments of the inquirer's imagination (Holloway & Wheeler, 2002:38; Tobin & Begley, 2004:392). In the current study, *confirmability* was enhanced through an audit trail and triangulation. In the present study the audit trail established *confirmability* of the study through an examination of the inquiry process and product to validate the data. The researcher accounted for all research decisions and activities to show how the data was collected, recorded and analysed. Triangulation also enhanced *confirmability* in the current study though the use of two different methods of data collection. The use of two methods of data collection complementing each other covered for the shortcomings of each data collection method.

## **3.10 DATA COLLECTION PROCEDURES**

Appointments with the appropriate school-heads and parents were made. The researcher moved from one school to another, personally administering the questionnaires. Questionnaires were completed in the presence of the researcher to ensure that responses reflected the participants' experiences and thoughts without undue influence from others, which might have compromised the validity of data gathered. At each school, the researcher also arranged interviews with parents of children with disabilities in early childhood development.

## **3.11 DATA ANALYSIS**

Data analysis is the systematic organization and synthesis of research data and the testing of research hypotheses (De Vos et al., 2012:716). The aim of data analysis was to give meaning to research data. The following sections discuss how data that were collected were systematically organized, synthesized and tested in order to give meanings that address the research questions.

### **3.11.1 Coding**

Closed-ended data from the questionnaires was coded in a way that made it amenable for computer analysis. Coding involves assigning numbers to observations so that collected data are converted into numerical codes (Burns & Groove, 2005:455). In this study, each closed-

ended item on the questionnaire was assigned a column number. Each participant had a serial number representing that individual's score for each variable. Every participant's responses on each selected point on the Likert-scale were awarded the assigned score. The serial number for each participant was captured first, then the column number for each item. The code for the response for each item was then entered against each column number.

### **3.11.2 Statistical Analysis**

The coded quantitative data were analysed using the Chi-square test to establish challenges in the inclusion of children with disabilities in early childhood development. One-way frequency tables were calculated for each closed-ended questionnaire item as an initial step. This was done to validate data and correct any spurious responses. One-way frequency tables on the biographical variables were also calculated in order to describe the sample. Combined two-way frequency tables were calculated for all Likert-scale items on the questionnaires in order to reduce analyses-output and create manageable data. The Chi-square test (SPSS version 16) was then used to analyse the data.

The Chi-square test analysed relationships between two variables at nominal and discrete levels. The test compared the actual frequencies with how closely they matched or differed from the expected distribution. The Chi-square test was computed as categorical data on resources, attitudes, policies, teacher-training, type and severity of disabilities were presented were categorical. Data were computed to show the significance of the relationship between the item responses of ECD teachers or school-heads and, in some circumstances, their combination when necessary. The Chi-square test sought to establish the significance of ECD teachers' and school-heads' responses on aspects of factors affecting the inclusion of children with disabilities in ECD centres in primary schools in Masvingo Province. Significance was established at 0.01 and 0.05 significance levels.

In order to identify items that were positively or negatively rated, ratios were computed. To do this, the sum of positive responses, 'Strongly Agree' and 'Agree', were divided by the sum of negative responses, 'Strongly Disagree' and 'Disagree'. These processes of statistical analysis were complemented by content analysis as discussed in the next section.

### **3.11.3 Content Analysis**

Content analysis was used to identify themes emerging from the six open-ended ECD teachers' questionnaire items, six open-ended school-heads' questionnaire items and the 18 open-ended items from the parents' interviews. Theme identification methods involved identifying recurrent instances across data sets and grouping them. Themes are umbrella constructs which can be identified before, during and after data collection (Welman et al., 2005:211). The systematic content analysis technique was employed to identify themes emerging from data collected using interviews for parents of children with disabilities. Miles and Huberman (1994:9) contend that the most critical data appear in words rather than numbers.

### **3.12 ETHICAL ISSUES**

The following ethical issues were addressed in this study:

#### **3.12.1 Permission**

Permission was sought to carry out the research, from the Ministry of Primary and Secondary Education (see Appendix E) as well as the Ethics Committee at UNISA (see Appendix A). Participation in the research was optional and participants were informed of their right to participate, not to participate and withdraw at any time.

#### **3.12.2 Informed consent**

Informed consent is an ethical requirement which demands that respondents be allowed to choose to participate or not in research after receiving full information about possible risks or benefits of participating (Chireshe, 2006:102; Welman et al., 2005:201). The researcher informed the participants about the pros and cons of participating in the study. The participants were informed about the benefits of the study, then they were free to choose to take part or not.

#### **3.12.3 Anonymity**

Participants were not required to identify themselves in order to pave way for accurate information. Henning (2005:73) and Welman et al. (2005:181) state that respondents should be informed that their identity will remain anonymous. They need to know that their privacy and sensitivity will not be disclosed so that they provide information freely. In this study, respondents were assured of anonymity.

#### **3.12.4 Confidentiality**

Confidentiality indicates the researcher's ethical obligation to keep the respondents' identity and responses private (Henning, 2005:73). In this study, the participants were not asked to write their names on the questionnaires and data obtained from respondents were kept confidential.

### **3.12.5 Protecting respondents from any form of harm**

Researchers should not harm the respondents (Welman et al., 2005:181). The researcher introduced herself and the research purpose so that participants were not suspicious of her. The researcher was honest and respected the rights of individuals. The respondents were assured of no harm during their participation. Macmillan and Schumacher (2010:117), in support of the above, asserted that the general principle usually invoked in codes of research ethics is, first and foremost, that no harm should befall research participants.

### **3.13 SUMMARY**

This chapter discussed the research paradigm used in the study, which was the post-positivist paradigm. The mixed methods research approach was discussed which included the qualitative and quantitative approaches. The survey research design was also discussed. Questionnaires and interviews were discussed as the instruments used to collect data and data collection procedures were also discussed. This chapter also looked at data analysis and ethical issues that were considered in the research. The next chapter focuses on data presentation, analysis and discussion.

## **CHAPTER 4: DATA PRESENTATION, ANALYSIS AND DISCUSSION**

### **4.1 INTRODUCTION**

The study aimed at investigating factors affecting the inclusion of children with disabilities in early childhood development centres. The previous chapter presented the research methodology, covering research design, sample, instrumentation, procedure, data analysis, validity, reliability and ethical issues. In the present chapter, the data generated from the current study were presented and discussed in the context of the six sub-headings derived from sub-research questions posed in Chapter 1, section 1.4 that guided the study. Specifically, the subheadings are resources and inclusive early childhood development, stakeholders' attitudes towards inclusive early childhood education, teachers' training and inclusive early childhood education, type and severity of disability and inclusive early childhood as well as strategies for improving the inclusion of early childhood education learners. The quantitative data generated from the current study were presented in tabular form per respective sub-research question guiding the study. Each table has columns indicating the following: who the respondents are; the statements they are responding to; responses ranging from strongly agree (SA), agree (A), undecided (U), disagree (DA) strongly disagree (SD); the total and the Chi-square values. Below each table is an explanation of the meaning of the presented data in terms of the respondents' agreeability to the statements. This is followed by presentation of qualitative data from school-heads' and school-teachers' open-ended questionnaire items as well as parents' responses to the interview items. In the following section, the findings of the current study on parents,' primary school-heads' and primary school-teachers' views on the extent to which availability of resources influences the inclusion of children with disabilities in early childhood in primary schools are presented and analysed.

## **4.2 AVAILABILITY OF RESOURCES AND THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION IN ZIMBABWEAN PRIMARY SCHOOLS**

### **4.2.1 Quantitative results**

The first sub- research question in Chapter 1, section 1.4 focused on the extent to which the availability of resources influences the inclusion of children with disabilities in early childhood education in Zimbabwean primary schools. In this section, the findings of the present study, in answer to this question, are summarised in Table 4.1 and analysed beneath the table.



**Table 4.1: Extent to which the availability of resources influences the inclusion of children with disabilities in early childhood education in Zimbabwean primary schools (For School-heads N = 12; for School-teachers N= 36)**

Respondents	Statements	Responses					Total	Chi-Square
		SA	A	U	DA	SD		
Primary school-heads	1. Low budgetary allocations are a barrier to inclusive Early Childhood Education.	0	0	0	11 (91.7%)	1(8.3)	12	X-squared = 35.44 X-crit=(15.0) 0.01)=30.58  Significant
	2. Lack of appropriate support structures in schools negatively affect inclusion in ECD Centres.	9(75%)	3(25%)	0	0	0	12	
	3. Lack of enough funds to buy assistive devices in schools is a barrier to the inclusion of children with disabilities in ECD.	11(91.7)	1(8.3)	0	0	0	12	
	4. Play materials influence the inclusion of children with disabilities in ECD Centres.	0	0	0	4	6	12	
	5. The success of inclusion of children with disabilities in ECD Centres depends on appropriate resources	9(75%)	3(25%)	0	0	0	12	
	6. Disability friendly structures influence positively the inclusion of children with disabilities in ECD Centres.	10(83.3%)	2	0	0	0	12	
	<b>TOTAL</b>	39	11	0	15	7	72	
Primary school-teachers	1. The success of inclusion in ECD Centres depends on availability of resources.	29(80.6%)	5(13.9%)	0	2(5.6%)	0	36	X-squared = 185.26  df = 24, p-value < 2.2x10 <sup>-16</sup>  X-square Crit = 176.60 Significant
	2. Inadequate resources are a barrier to the success of inclusion in ECD Centres.	23(63.9%)	11(30.6%)	1(2.8%)	0	1(2.8%)	36	
	3. Without appropriate resources schools cannot include all children with disabilities in ECD.	14(38.9%)	15(41.7%)	0	5(13.9%)	2(5.6%)	36	
	4. Low national budgets allocated to children with disabilities cannot sustain provision of assistive devices to them.	16(44.4%)	15(41.7%)	0	4(11.1%)	1(2.8%)	36	
	5. Lack of human resources leads to failure to include children with disabilities in ECD Centres. .	0	2(5.6%)	0	16(44.4%)	18(50%)	36	
	6. Use of appropriate assistive devices leads to the success of inclusion in ECD Centres	17(49.4%)	19(52.8%)	0	0	0	36	
	7. Lack of material resources leads to failure to include children with disabilities in ECD Centres.	13(36.1%)	21(58.3%)	0	1	1	36	
<b>TOTAL</b>	112	88	1	28	23	252		

Table 4.1 shows that for both primary school-heads and primary school-teachers, the observed Chi-square statistics were greater than Chi-square critical. Therefore, there is evidence to suggest that the school-heads' and school-teachers' views were agreeable that availability of resources positively influences the inclusion of children with disabilities in early childhood education. The table also shows a contradiction in that for primary school-heads, low budgetary allocations were not a barrier to inclusive education, while primary school-teachers viewed it as a barrier to inclusive education. These quantitative results are illuminated in the qualitative results that follow.

#### 4.2.2 Qualitative results

Some of the school-heads were of the view that government does not allocate a budget for children with disabilities in regular schools. The school-heads indicated that their mainstream schools lack a disabled children's budget allocation from government. They viewed budget allocations for children with disabilities as restricted to special schools. The following excerpts illustrate the above finding:

*“Government allocates more money to special schools. We only get our usual per capita grants” (Head 5).*

*“Budgets for children with disabilities are only allocated in special schools such as Henry Murray” (Head 2).*

*“Mainstream primary schools are not having budgetary allocations for the Government but only in special schools” (Head 12).*

*“We are not a special school so we do not have money set aside for children with disabilities (Head 8).*

*“Since I became Head here, I have never seen that money for children with disabilities from government. Usually that money for disabled children that you are talking about does not come at all. It is not useful to talk about it as if it comes” (Head 10).*

Some school-heads were, however, aware of government's budgetary allocations to mainstream schools. Those who were aware of the allocation pointed out that the money allocated for children with disabilities in the mainstream schools was inadequate. They indicated that the low budgetary allocations were, therefore, negatively affecting inclusion. These views are demonstrated in the following excerpts:

*“Money for children with special needs is allocated but it is very little. You cannot do much with it” (Head 3).*

*“Government allocates money for disabled children but it is not much. The money is late in coming” (Head 9).*

*“Low budgetary allocations hinder inclusion of learners with disabilities in ECD centres” (Head 11).*

*“The success of inclusion of children with disabilities in ECD centres depends on the allocation of resources. Government needs to allocate more resources for inclusion (Head 7).*

The primary school-heads revealed that the availability of necessary resources leads to the success of inclusion of children with disabilities in ECD centres. The heads indicated that centres with fewer resources have challenges in making inclusion effective. They highlighted that availability of resources makes management of children with disabilities easier in ECD centres. These views are illustrated in the following excerpts:

*“Our ECD classes lack the necessary resources for implementing proper inclusion of children with disabilities. We need resources” (Head 6).*

*“With few resources obviously we cannot do much for children with disabilities. We need more resources for effective inclusion of these children” (Head 3).*

*“Centres with adequate resources implement inclusion successfully but those with little resources have challenges to implement inclusion” (Head 1).*

*“The availability of resources enables children with disabilities to be easily managed and included” (Head 8).*

Similar to the school-heads’ views, some teachers indicated that budgetary support from government was needed. The teachers pointed out that budgetary support was necessary in order to complement their improvisations and innovations. They indicated that lack of support from government would result in inadequate assistive devices and learning materials, which would negatively affect inclusion of children with disabilities. These views are demonstrated in the following excerpts:

*“We may improvise certain things using locally available resources but it is never going to match the actual thing that government should have provided. So government needs to play its part and provide money for assistive devices” (Teacher 32).*

*“Although the teacher should be resourceful, government should chip in with funds to buy learning materials” (Teacher 26).*

*“Too much improvising on our part could end up harming the disabled child. There is need for government to buy necessary assistive devices” (Teacher 18).*

*“Inadequate resources are a barrier to the success of inclusion of children with disabilities in ECD Centres though we improvise where necessary (Teacher 30).*

*“Lack of wheelchairs and other assistive devices influence negatively the inclusion of children with disabilities in ECD” (Teacher 34).*

*“Government should support these children with hearing aids and so on so that they are assisted in their learning from an early age. We cannot be expected to be innovative where there are no gadgets such as hearing aids. These should just be provided by government so that we have inclusive education” (Teacher 15).*

Some of the primary school-teachers revealed that the availability of resources leads to the success of inclusion of children with disabilities in ECD centres. The teachers indicated that available resources enabled children with disabilities to socialize with non-disabled children and to participate in various aspects of life. They pointed out that appropriate resources empower children with disabilities so that they learn effectively. These views are demonstrated in the following excerpts:

*“Resources influence the inclusion of children with disabilities very strongly for them to mix and interact with others” (Teacher 33).*

*“Resources are the key to the inclusion of children with disabilities in ECD” (Teacher 21).*

*“The availability of resources enables children with disabilities to be included in all aspects of life” (Teacher 11).*

*“Logically, ECD learners need resources hence the availability of resources impacts to a greater extent the inclusion of children with disabilities as the resources will equip and empower the skills necessary for his or her development” (Teacher 1).*

*“Children in ECD centres learn through play so children need a lot of appropriate resources to influence the inclusion of children with disabilities. This implies that no resources mean no learning will take place” (Teacher 2).*

Conversely, the teachers were of the view that lack of resources was a hindrance to the inclusion of children with disabilities. Teachers indicated that resources were important for inclusion and that without them it would be extremely difficult if not impossible to implement inclusive education for children with disabilities. This is illustrated in the following excerpts:

*“Lack of resources leads to failure in the inclusion of children with disabilities in ECD Centres” (Teacher 30).*

*“Without resources it is not easy to include children with disabilities in our classes” (Teacher 12).*

*“Successful inclusion can only happen if we have the resources. Otherwise it is a waste of time” (Teacher 3).*

*“Without resources children with disabilities would not be able to mix with others, therefore no inclusion” (Teacher 33).*

The parents were in general agreement that non-availability of resources negatively affects the inclusive education of their children with disabilities. In the interviews with parents of children with disabilities, some parents indicated their own lack of resources, such as school uniforms negatively affecting the inclusion of children with disabilities. They pointed out that without school fees, the child's education would be interrupted frequently. These views are demonstrated in the following verbal quotes:

*“The child will not go to school and the Head will chase the child away wanting school fees which I do not have” (Parent 2).*

*“Because I do not always get school fees in time, the child will not go to school and it will affect the child's learning” (Parent 3).*

*“When a child goes to school without fees, the school will frequently send him or her back to collect money for fees. A lot of learning time will be lost” (Parent 24).*

*“Lack of fees and uniforms makes disabled children begin to look like beggars” (Parent 9).*

*“Disabled children whose fees has not been paid can easily lose the respect of others in the school” (Parent 6).*

Some of the parents of children with disabilities viewed the schools' lack of resources as hindering inclusion. The parents indicated that non-availability of equipment and books in the schools hinders the inclusion of children with disabilities in ECD. They also pointed out that if the school does not have assistive devices, the child would not be easily included in learning. This is demonstrated in the following verbal quotes:

*“Lack of resources hinders the child's learning” (Parent 7).*

*“If resources are not available, this will exclude the child from learning” (Parent 18).*

*“Without equipment for teaching Braille or sign language in schools, children with disabilities will not be able to learn these things” (Parent 10).*

*“When assistive aids are not available in the school, children with disabilities struggle with their learning” (Parent 8).*

*“Ramps are very important in schools. Our school does not have them. This could affect the inclusion of children with disabilities who need to attend school there” (Parent 21).*

Conversely, other parents indicated that availability of resources within the schools enables inclusion of their children with disabilities. The parents pointed out that availability of resources such as ramps, books and assistive devices would facilitate the inclusion of their children with disabilities. They indicated that play centres at schools are very useful for the

inclusion of children with disabilities in ECD. These views are illustrated in the following verbal quotes:

*“Play centres enable children to develop intellectually, physically and emotionally as they play” (Parent 6).*

*“Play centres enable the disabled child to interact with others” (Parent 9).*

*“Children learn through play thereby develop social skills and physical fitness at the play centres” (Parent 14).*

*“Play centres cater for all learning areas of the child” (Parent 18).*

*“In play centres all children are included in the learning” (Parent 22).*

*“Availability of play centres at a school makes both disabled and non-disabled children relax and mix freely. This is good for inclusion” (Parent 24).*

The next section presents respondents’ views on the extent to which stakeholder attitudes affect the inclusion of children with disabilities in early childhood education in primary schools in Zimbabwe.

### **4.3 EFFECT OF STAKEHOLDERS’ ATTITUDES ON THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION IN ZIMBABWEAN PRIMARY SCHOOLS**

#### **4.3.1 Quantitative results**

The second sub-research question in Chapter 1 section 1.4 focused on the extent to which stakeholders’ attitudes affect the inclusion of children with disabilities in early childhood education in primary schools in Zimbabwe. In this section, the findings of the current study in answer to this question on stakeholders’ attitudes are summarised in Table 4.2 and analysed under the table.

**Table 4.2: The extent to which stakeholders' attitudes affect the inclusion of children with disabilities in early childhood education (For School-heads N = 12; for School-teachers N= 36)**

Respondents	Statements	Responses					Total	Chi-Square
		SA	A	U	DA	SD		
Primary school-heads	1. Teachers' negative attitudes to inclusion negatively affect the inclusion of children with disabilities in primary schools.	5(41.7%)	5(41%)	0	1(8.3%)	1(8.3%)	12	Df= 20 X Crit=37.57 (0.01) X Cal=64.67  Significant
	2. Head teachers' willingness to include children with disabilities in ECD Centres positively affects inclusive education.	4(33.3%)	7(58.3%)	0	1(8.3%)	0	12	
	3. Parents' acceptance of their child's disability positively affects the inclusion of children with disabilities in ECD Centres.	4(33.3%)	5(41.7%)	2(16.7%)	1(8.3%)	0	12	
	4. The success of inclusion of children with disabilities in ECD Centres depends on stakeholders' attitudes.	7(58.3%)	4(33.3%)	0	1(8.3%)	0	12	
	5. Stakeholders' negative attitudes negatively affect the inclusion of children with disabilities in ECD Centres.	3(25%)	8(66.7%)	0	1(8.3%)	0	12	
	6. Teachers' lack of knowledge on disability contributes to negative attitudes towards the inclusion of children with disabilities in ECD Centres.	7(58.3%)	3(25%)	0	1(8.3%)	1(8.3%)	12	
	<b>TOTAL</b>	30	32	2	6	2	72	
Primary school-teachers	1. Attitudes determine the success of inclusion of children with disabilities in ECD Centres.	14(38.9%)	20(55.6%)	0	1(2.8%)	1(2.8%)	36	Df=20 X crit=37.57 X Cal = 64.55 significant
	2. Negative attitudes by teachers towards inclusion are a barrier to the success of inclusion at ECD level.	16(44.4%)	13(36.1%)	1(2.8%)	5(13.9%)	1(2.8%)	36	
	3. Successful inclusion of children with disabilities in ECD depends on stakeholders' attitudes.	0	0	2(5.6%)	14(38.9%)	20(55.6%)	36	
	4. Parents' attitudes determine the extent to which children with disabilities can be successfully included in ECD Centres.	13(36.1%)	18(50%)	1(2.8%)	4(38.9%)	0	36	
	5. Head-teachers' attitudes determine the extent to which children with disabilities can be included in ECD Centres.	0	5(13.9%)	1(2.8%)	10(27.8%)	20(55.6%)	36	
	6. Positive attitudes by stakeholders influence the success of inclusion in ECD Centres	16(44.4%)	19(52.8%)	0	1(2.8%)	0	36	
	<b>TOTAL</b>	59	75	5	35	42	216	

Table 4.2 shows that for both primary school-heads and primary school-teachers, the obtained Chi-square statistic is greater than the critical value. Therefore, there is significant evidence to suggest that the school-heads' and school-teachers' views were agreeable that there is association between stakeholders' attitudes and the inclusion of children with disabilities in early childhood education. What this means is that according to the primary school-heads and primary school-teachers, stakeholders' attitudes affect the inclusion of children with disabilities in ECD centres. These quantitative results are illuminated in the qualitative results that follow.

### **4.3.2 Qualitative results**

Most of the primary school heads revealed that negative attitudes by stakeholders affect inclusion negatively. The heads highlighted that many people in society think that children with disability are useless and difficult to take care of. They also indicated that teachers without appropriate skills to handle learners with disabilities may find other reasons for excluding them from their classes. The following excerpts illustrate these views:

*“Negative attitudes by stakeholders affect inclusion negatively” (Head 9).*

*“Negative attitudes by stakeholders will affect the inclusion children with disabilities negatively” (Head 12).*

*“Most people in our culture regard children with disabilities as worthless in society hence affect their inclusion negatively” (Head 4).*

*“Many in society think that disabled children are useless. Hence they need to be educated on this regard to consider all children equal and change of mind set is needed so that children are given opportunities to participate in their learning thereby being included” (Head 5).*

*“Without relevant skills to handle disability teachers reject inclusion giving varied reasons” (Head 1).*

On the other hand, the school-heads revealed that positive attitudes by stakeholders affect inclusion positively. The school-heads pointed out that positive attitudes motivate learners and parents. They submitted that positive mind-sets enable children with disabilities to be provided opportunities to participate in learning. The following excerpts illustrate this view:

*“Positive attitudes by stakeholders affect inclusion positively” (Head 9).*

*“Where stakeholders have the skills to handle disabilities, they will be positive and include learners in ECD” (Head 1).*



*“Positive attitudes motivate learners to learn and parents will provide their children with the necessary resources for inclusion. Negative attitudes by teachers greatly hinder inclusion of children with disabilities in ECD” (Head 6).*

*“With a positive mind-set, disabled children are given opportunities to participate in their learning thereby being included” (Head 5).*

Similarly, some of the primary school-teachers revealed that positive attitudes by stakeholders towards children with disabilities would make inclusion work successfully. The teachers pointed out that positive attitudes resulted in better learning. They indicated that if stakeholders are positive towards children with disabilities they tend to support their inclusion in ordinary classes. These views are illustrated in the following excerpts:

*“If stakeholders have positive attitudes towards children with disabilities then inclusion will work” (Teacher 33).*

*“Positive attitudes lead to the success of inclusive education” (Teacher 29).*

*“To a greater extent, positive attitudes by stakeholders influence the success of inclusion in ECD centres” (Teacher 27).*

*“Positive attitudes of stakeholders are the key for the better leaning of children. Stakeholders are the pillars of inclusive education. Positive attitudes by stakeholders enable children with disabilities to be included in ECD” (Teacher 9).*

*“Stakeholders’ attitudes influence the inclusion of children with disabilities in ECD. If stakeholders are positive then they will support the inclusion of the children” (Teacher 3).*

*“The attitudes of stakeholders determine the success of inclusion of children with disabilities in ECD centres. Positive attitudes affect inclusion positively and negative attitudes affect inclusion negatively” (Teacher 17).*

Conversely, some of the primary school teachers revealed that negative attitudes by stakeholders towards children with disabilities would negatively affect inclusion through lack of support. The teachers indicated that lack of government support was indicative of negative attitudes in government. They also pointed out that children with disabilities could detect negative stakeholder attitudes and react negatively by reducing their participation in class. The teachers noted that young children learn negative attitudes from adults, such as parents and local communities who do not accept disabilities. These views are illustrated in the following excerpts:

*“Attitudes from different stakeholders affect the success of inclusion of children with disabilities in ECD centres. If stakeholders show negative attitudes towards this will affect negatively the inclusion of children with disabilities in ECD” (Teacher 2).*

*“Stakeholders’ attitudes will affect inclusion at ECD to a higher extent in that if attitudes are negative this will lead to children with disabilities being excluded and positive attitudes will affect negatively the inclusion of these children in ECD” (Teacher 24).*

*“If government as a key stakeholder shows negative attitudes by not availing resources, this makes inclusion flop” (Teacher 2).*

*“Children with disabilities can easily pick negative attitudes and react negatively too” (Teacher 10).*

*“Young children without disabilities only learn to be negative towards children with disabilities from us adults and this results in negative responses and poor learning” (Teacher 1).*

Some of the parents of children with disabilities, however, identified the school-heads and school-teachers as the important stakeholders with negative attitudes that result in children with disabilities being excluded in ECD centres. The parents revealed that if school-heads and school-teachers have negative attitudes, this would affect the emotions and learning of their children with disabilities and could result in discrimination. They pointed out that school-heads and school-teachers said that the signing of the child with disability or epileptic fits would affect other learners. These views are illustrated in the following quotes:

*“If head-teachers and teachers have negative attitudes towards the child this will affect the child’s learning and emotions” (Parent 17).*

*“The head and teachers were negative about including the child saying that my child’s signing will affect the learning of other children” (Parent 19).*

*“Teachers at first were accepting but when he fell they sent a message to come and get the child. Teachers feared that they would catch the epilepsy hence excluding the child” (Parent 12).*

*“If teachers have negative attitudes, the child becomes very emotional” (Parent 1).*

*“The teacher thought that the other children could also become epileptic if they came into contact with my child’s saliva” (Parent 6).*

The parents of children with disabilities revealed that positive attitudes by school-heads and teachers as stakeholders were important for inclusive education. The parents pointed out that positive attitudes would assist with mental, social and physical development. They indicated that teachers who are positive were good models for children with disabilities as well as non-disabled children. These views are illustrated in the following quotes:

*“If head-teachers have positive attitudes they will help the child to develop socially, intellectually and physically (Parent 17).*

*“Positive teachers are good models to help my child to become socially stable (Parent 12).*

*“Teachers who accept children with disabilities help other children without disabilities to learn to accept too (Parent 6).*

*“A teacher who is positive towards the child with disability is a good example to other children who do not have disabilities” (Parent 1).*

*“Once the teacher accepts the child with disability, the child himself becomes more positive about going to school and learning” (Parent 8).*

On the other hand, one parent identified non-disabled children as stakeholders whose negative attitudes may embarrass and affect inclusion negatively. The parent indicated that she felt embarrassed by the reactions of her child’s school mates. This is illustrated in the following quote:

*“I was very much embarrassed by the fact that when my child arrived at school his peers gathered around him and were jeering at him since he was signing as his language” (Parent 19).*

Some of the parents also revealed that positive attitudes by parents were important for inclusive education. The parents indicated that fellow parents influenced teachers, head-teachers and school children without disabilities to have positive attitudes. They noted that the positive attitudes of fellow parents enabled the child with disability to be included socially, intellectually and physically in ECD centres. These views are demonstrated in the following quotes:

*“If other parents have positive attitudes they will help the child to develop socially, intellectually and physically” (Parent 17).*

*“Positive attitudes by all parents will enable the child to be treated equally like others hence included” (Parent 21).*

*“Most members of the SDC are parents of children without disability and so when they are positive about disability, the teachers and headmaster are also positive” (Parent 23).*

*“Children without disabilities learn a lot about disability from their parents at home. When the parents are positive, the children will also be positive” (Parent 24).*

*“Parents who are positive help their own children to be positive too” (Parent 11).*

Other parents identified themselves as stakeholders whose attitudes were important for the inclusion of children with disabilities. The parents revealed that their feelings regarding separation from the child resulted in an attitude that hindered inclusion of the child. They indicated that they were hurt by separation and thought their children were going to be isolated

in school. They pointed out that separation from their children with disabilities was not easy. These views are illustrated in the following quotes.

*“I felt bad to separate with my child and I often phoned the teacher to find out if the child was safe. I thank both the head and teachers who helped to realize that I was spoiling my child” (Parent 20).*

*“It used to hurt me and I used to say why me Lord but later on I found out that my attitude was affecting my child. I am now stronger and accept this as the will of God. I love my child as he is” (Parent 23).*

*“The child could easily fall since he had no arms and hands and was born in that condition. This made me very uncomfortable for the child to go to school. At school the child was taught to write using his mouth and the child could interact with others in play. He could play soccer with others. The child is included in the learning. I am now quite happy” (Parent 9).*

*“Separating with my child was very difficult as I felt that I was the only person who could take proper care of him. I only managed to separate after I had been advised by the teacher that I was making the situation worse” (Parent 2).*

*“I didn’t want the child to go to an ordinary school but a special school. I feared that others would laugh at him” (Parent 15).*

Other parents did not specify the type of stakeholders but generally talked about stakeholders’ negative attitudes. The parents indicated that negative attitudes either hinder inclusion or exclude children with disabilities as illustrated in the following quotes.

*“Negative attitudes by stakeholders make the child to be excluded” (Parent 8).*

*“Negative attitudes hinder inclusion” (Parent 16).*

The next section presents respondents’ views on the extent to which policies influence the inclusion of children with disabilities in early childhood education in primary schools in Zimbabwe.

## **4.4 THE INFLUENCE OF POLICIES ON THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION**

### **4.4.1 Quantitative results**

The third sub-research question in Chapter 1 section 1.4 focused on the extent to which policies influence the inclusion of children with disabilities in early childhood education in primary schools in Zimbabwe. In this section, the findings of the current study in answer to this question on the influence of policies are summarised in Table 4.3 and analysed under the table.

**Table 4.3: Extent to which policies influence the inclusion of children with disabilities in early childhood education (For School-heads N = 12; for School-teachers N= 36)**

Respondents	Statements	Responses					Total	Chi-Square
		SA	A	U	DA	SD		
Primary school-heads	1. The success of inclusion of children with disabilities in ECD depends on clear policies.	7(58.3%)	4(33.3%)	1(8.3%)	0%	0%	12	Df=20 X Crit(0.01) =37.57  X Crit(0.01) =37.57 X Cal=35.36 Not Significant
	2. Rights of children with disabilities to inclusive education are influenced by laws.	7(58.3%)	4(33.3%)	1(8.3%)	0	0	12	
	3. There are specific policies that mandate the rights of children with disabilities to inclusion.	7(58.3%)	3(25%)	0	0	2(16.7%)	12	
	4. Lack of specific policies is a barrier to inclusion of children with disabilities in ECD.	0	0	1(8.3%)	9(75%)	2(16.7%)	12	
	4. Lack of specific policies is a barrier to inclusion of children with disabilities in ECD.	0	0	1(8.3%)	9(75%)	2(16.7%)	12	
	5. General education policies enhance provision of inclusive education for children with disabilities in ECD.	1(8.3%)	9(75%)	0	1(8.3%)	1(8.3%)	12	
	6. International policies on equalization of opportunities for people with disabilities enhance the inclusion of children with disabilities in ECD Centres in Zimbabwe.	5(41.7%)	6(50%)	1(8.3%)	0	0	12	
<b>TOTAL</b>		27	26	4	10	5	72	
Primary school-teachers	1. The success of inclusion of children with disabilities in ECD depends on clear policies.	12(33.3%)	10(27.8%)	5(5.6%)	6(16.7%)	3(8.3%)	36	Df=20 X Crit (0.01)=37.57 X Cal=50.82  Significant
	2. Rights of children with disabilities to inclusive education are influenced by laws.	9(25%)	8(22.2%)	4(11.1%)	8(22.2%)	7(19.4%)	36	
	3. There are specific policies that mandate the rights of children with disabilities to inclusion.	10(27.8%)	10(27.8%)	2(2.8%)	4(5.6%)	10(27.8%)	36	
	4. Lack of specific policies is a barrier to inclusion of children with disabilities in ECD.	12(33.3%)	10(33.3%)	1(2.8%)	5(13.9%)	8(22.2%)	36	
	5. General education policies enhance provision of inclusive education for children with disabilities in ECD.	10(25%)	20(55.6%)	2(2.8%)	2(2.8%)	2(2.8%)	36	
	6. International policies on equalization of opportunities for people with disabilities enhance the inclusion of children with disabilities in ECD Centres in Zimbabwe.	10(27.8%)	14(38.9%)	2(2.8%)	6(16.7%)	4(5.6%)	36	
	<b>TOTAL</b>		63	72	16	31	34	

Table 4.3 shows that for primary school-teachers, the obtained Chi-square value is greater than the critical value whereas for primary school-heads the obtained Chi-square value is less than the critical value. This means that on one hand, primary school-teachers were agreeable that policies influence the inclusion of children with disabilities in ECD. On the other hand, there is not enough evidence to suggest that primary school-heads were agreeable that policies influence inclusion of children with disabilities in ECD. This implies that policies may not be the only factor influencing the inclusion of children with disabilities. These quantitative results are illuminated in the qualitative results that follow.

#### **4.4.2 Qualitative results**

Some of the school-heads revealed that policies do not influence the inclusion of children with disabilities. The school-heads indicated that there was no need for policies specific for children with disabilities. They submitted that existing, general education policies are already being used effectively for inclusive education of children with disabilities in ECD. The following excerpts illustrate these views:

*“The general policies that are already there are quite useful. There is no need for additional policies” (Head 3).*

*“Policies do not teach. It is us, the people on the ground who are important in making inclusive education work, not policies” (Head 12).*

*“General policies greatly affect the development of infrastructure, the provision of qualified personnel and the provision of gadgets” (Head 6).*

*“Policies influence to low extent the inclusion of children with disabilities in ECD. Policies do not source resources neither do they change stakeholders’ and teachers’ attitudes towards children with disabilities” (Head 8).*

Despite this view, there were some school-heads who viewed existing general education policies as inadequate. The school-heads indicated that policies that are specific to disability influence the inclusion of children in ECD centres. They highlighted the policies needed to be clear so that they are implemented effectively. This is demonstrated in the following quotes:

*“Clear policies, that is, those with clear aims, content, methodology, organisation and evaluation instruments are easy to implement unlike unclear policies. Policies should be clear on the severity of disability to include. Policies are powerful instruments because they give reference to laws of a country. Therefore implementers enrol learners with disabilities in their centres not because they are willing, but because they will be afraid of the measures that will be taken against them” (Head 1).*

*“If there are policies on disability children’ rights are enhanced” (Head 9).*

*“Government policies are crucial for enabling inclusion of children with disabilities because without them some would simply ignore these children (Head 4).*

Some primary school-teachers concurred with the school-heads and indicated that clear and specific policies enable the successful inclusion of children with disabilities in ECD centres. The teachers pointed out that policies that are specific to children with disabilities enabled inclusion through observance of the children’s rights. They highlighted that policies were there to equalise opportunities for children with disabilities. These views are illustrated in the following excerpts:

*“Policies enable the inclusion of children with disabilities in ECD” (Teacher 16).*

*“Clear policies enable the success of inclusion of children with disabilities in ECD” (Teacher 30).*

*“Clear policies influence the inclusion of children with disabilities though equalisation of opportunities and observing their rights” (Teacher 34).*

*“Specific policies on disability will enable children with disabilities to be included in ECD centres while policies not specific will hinder inclusion so there is need for comprehensive policies to enable the inclusion of children with disabilities in ECD” (Teacher 14).*

*“Policies influence the inclusion of children with disabilities. If policies are there the rights of children with disabilities are enhanced for example policies like the education act influence inclusion in that children with disabilities should learn in communities they come from” (Teacher 13).*

Conversely, some of the teachers revealed that unclear policies made the implementation of inclusion difficult. The teachers indicated that there was no follow-up by policy makers to ensure proper implementation of policies in ECD Centres. They highlighted that lack of follow-up resulted from unclear policies and lack of resources. These views are illustrated in the following excerpts:

*“Some of the policies are not very clear on the issue of inclusivity hence the need for clear policies for inclusion of children with disabilities for example there is lack of clarity on educational policies regarding the inclusion of children with disabilities making it difficult to implement something which is not clear” (Teacher 3).*

*“Policies are made, but there is no follow up by policy makers to check whether these policies are being properly implemented in ECD centres in Zimbabwe” (Teacher 2).*



*“Policies that require all teachers to teach children with disabilities are difficult to implement because they do not explain how these teachers should be trained to do the job” (Teacher 24).*

*“Policies need to have enough detail to allow everyone to follow what is required. Some policies are not clear” (Teacher 8).*

*“Policies may be there but they do not clarify what needs to be done in all situations” (Teacher 4).*

Some parents of children with disabilities concurred with the school-heads’ and teachers’ position that policies specific to children with disabilities enable inclusion. The parents noted that policies influence the inclusion of children with disabilities in ECD by recognizing their legal rights. They highlighted that without policies, the children with disabilities would be abused and discriminated against. This is illustrated in the following quotes.

*“Lack of policies will hinder inclusive education” (Parent 16).*

*“Laws mandate the rights of children with disabilities to equal treatment” (Parent 3).*

*“Specific policies enhance the inclusion of children with disabilities in ECD centres” (Parent 11).*

*“If policies are specific then children with disabilities will enhance their rights to inclusion” (Parent 7).*

*“Specific laws will address the needs of children with disabilities” (Parent 10).*

*“Lack of policies hinder inclusion and people will live like animals” (Parent 14).*

*“Lack of policies makes children to be abused and discriminated” (Parent 8).*

Some of the parents revealed that school policies influence the inclusion of children with disabilities by facilitating the children’s discipline. The parents indicated that government policies give teachers direction on their interactions with children with disabilities. They highlighted that without government policies, there would be no direction on what to do. These views are illustrated in the following quotes:

*“School policies enable children to have discipline” (Parent 16).*

*“Without school policies many children with disabilities would be bullied and leave school” (Parent 17).*

*“Government policies enable children to be disciplined. They guide teachers so that they know how to deal with the children” (Parent 15).*

*“Without government policies schools would not know what to do with disabled children” (Parent 1).*

The next section presents respondents' views on the extent to which teachers' training influences the inclusion of children with disabilities in early childhood education in primary schools in Zimbabwe.

## **4.5 THE INFLUENCE OF TEACHERS' TRAINING ON THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION**

### **4.5.1 Quantitative results**

The fourth sub-research question in Chapter 1 section 1.4 focused on the extent to which teachers' training influences the inclusion of children with disabilities in early childhood education in primary schools in Zimbabwe. In this section, the findings of the current study in answer to this question on the influence of teachers' training are summarised in Table 4.4 and analysed under the table.

**Table 4.4: Extent to which teachers' training influences the inclusion of children with disabilities in early childhood education (For School-heads N = 12; for School-teachers N= 36)**

Respondents	Statements	Responses					Total	Chi-Square
		SA	A	U	DA	SD		
Primary School-heads	1. Trained teachers are important to the success of inclusive education at ECD level.	7(58.3%)	2(16.7%)	2(16.7%)	1(8.3%)	0	12	Df=20 X Crit=37.5 (0.01) X Cal=18.98 Not Significant
	2. The success of early childhood inclusion depends on teachers' continued professional development.	7(58.3%)	0	2(16.7%)	0	3(25%)	12	
	3. Teacher's training in ECD determines the quality of inclusive education.	2(16.7%)	0	0	7(58.3%)	3(25%)	12	
	4. Lack of training in Early Childhood Development is a barrier to the success of inclusive education in ECD.	4(33.3%)	4(33.3%)	1(8.3%)	2(16.7%)	1(8.3%)	12	
	5. Adequate training of teachers in Special Needs Education equips teachers with knowledge and skills for effective inclusion at ECD level.	7(58.3%)	5(41.7%)	0	0	0	12	
	6. Inadequate teachers' training is a barrier to the success of inclusion of children with disabilities in ECD.	4(33.3%)	3(25%)	0	3(25%)	2(16.7%)	12	
	<b>TOTAL</b>		22	9	5	24	12	
Primary School-teachers	1. Trained teachers are important to the success of inclusive education at ECD level.	20 (55.6%)	4(11.1%)	4(11.1%)	5(13.9%)	3(8.3%)	36	Df=20 X Crit=37.5 (0.01) X Cal=64.14 Significant
	2. The success of early childhood inclusion depends on teachers' continued professional development.	19 (52.8%)	16(44.4%)	0	1(2.8%)	0	36	
	3. Teacher's training in ECD determines the quality of inclusive education.	0	1(2.8%)	0	21(58.3%)	14(38.9%)	36	
	4. Lack of training in Early Childhood Development is a barrier to the success of inclusive education in ECD.	0	5(13.9%)	2(5.6%)	14(38.9%)	15(41.7%)	36	
	5. Adequate training of teachers in Special Needs Education equips teachers with knowledge and skills for effective inclusion at ECD level.	24(66.7%)	10(27.8%)	2(5.6%)	0	0	36	
	6. Inadequate teachers' training is a barrier to the success of inclusion of children with disabilities in ECD.	17(49.4%)	18(50%)	1(2.8%)	0	0	36	
	<b>TOTAL</b>		80	54	9	41	32	

Table 4.4 shows that for primary school-heads, the obtained Chi-square value is less than the critical value whereas for primary school-teachers, the obtained Chi-square value is greater than the critical value. Therefore, this shows that on the one hand, there is not enough evidence to suggest that the school-heads' views were agreeable that teachers' training influences the inclusion of children with disabilities in ECD. On the other hand, there is significant evidence that the primary teachers' views were agreeable that teachers' training influences the inclusion of children with disabilities in ECD. These quantitative results are illuminated in the qualitative results that follow.

#### **4.5.2 Qualitative results**

Some of the primary school-heads revealed that teachers' training influences the inclusive education of children in early childhood development. The school-heads indicated that higher, appropriate and adequate training promotes successful inclusion. They highlighted that teacher training equips teachers with appropriate teaching methods, skills and knowledge that enable inclusive education. These views are illustrated in the following excerpts:

*“Teachers with appropriate training on disability welcome inclusion and inclusion will be a success. Teachers with training know the appropriate teaching methods and materials so will be comfortable with inclusion” (Head 1).*

*“The more teachers are trained the more inclusive our education system will be and inclusion will be a success” (Head 11).*

*“Adequate training arms the teacher with knowledge relevant teaching methodologies relevant hands on skills in the implementation of inclusive education” (Head 6).*

*“Teachers' training equips teachers with suitable skills to teach and take care of children with disabilities” (Head 4).*

Similar to these school-heads' views, some of the primary school-teachers' open-ended answers to their questionnaire revealed that the teachers were of the view that teacher training influences the inclusive education of children in early childhood development. The teachers indicated that when teachers are trained in special needs education, they are equipped with knowledge and skills for inclusive education. They highlighted that strategies for managing children with disabilities are acquired through training in special needs education. This is illustrated in the following excerpts:

*“Teachers' training is critical for inclusive education. All teachers need to be trained in order to properly include children with disabilities” (Teacher 3).*

*“Teachers’ training in ECD improves that quality of inclusive education because it equips teachers with relevant knowledge and skills on inclusion” (Teacher 34).*

*“Teachers training is effective in the sense that teachers will be equipped with skills and knowledge to handle children with disabilities” (Teacher 15).*

*“When teachers are trained they are equipped with knowledge and skills to manage children with disabilities” (Teacher 32).*

*“Teachers’ training equips the teachers with knowledge, skills and strategies for effective inclusion at ECD level” (Teacher 2).*

*Trained teachers know what is needed for children with disabilities to learn. When teachers are trained they are equipped with knowledge and skills to manage children with disabilities. So teachers’ colleges should produce teachers who are able to handle all learners with and without disabilities” (Teacher 24).*

Complementary to these views, some of the teachers viewed lack of training as resulting in lack of knowledge, which negatively affects inclusive education through lack of knowledge on how to help or being afraid of children with disabilities. These views are expressed in the following excerpts:

*“Without training in Special Education teachers would not have strategies for helping children with disabilities” (Teacher 36).*

*“The failure of inclusive education results from lack of training of teachers” (Teacher 30).*

*“Without additional teacher training inclusive education of children with disabilities becomes a flop” (Teacher 27).*

*“Untrained teachers are unable to handle children with disabilities” (Teacher 23).*

*“Lack of knowledge by teachers influence negatively the inclusion of children with disabilities in ECD since teachers will not be able to assist these children with disabilities” (Teacher 24).*

Participating parents also expressed the view that teacher training influences inclusive education. Some parents revealed that teachers’ training equips teachers with knowledge and skills to handle children with disabilities in inclusive education. They indicated that continuous staff development on disability issues also equips teachers with knowledge and skills on inclusive education. The views of parents of children with disabilities are demonstrated in the following quotes:

*“Teachers’ training will equip teachers with knowledge to handle children with disabilities in inclusive ECD centres” (Parent 7).*

*“Teachers’ training will equip teachers with knowledge and skills to include children with disabilities in their classes” (Parent 8).*

*“There is need for continuous development staff development since things change so teachers will gain current information to handle children with disabilities” (Parent 19).*

*“Continuous staff development will enable teachers to gain new knowledge and skills to manage children with disabilities in ECD centres” (Parent 21).*

*“Lack of teachers’ training make teachers ineffective to include children with disabilities in ECD centres” (Parent 4).*

*“Lack of teachers training will hinder inclusion of children with disabilities in ECD centres” (Parent 16).*

Some of the school-heads, however, revealed that teacher-training does not influence the inclusive education of children in early childhood development. The school-heads indicated that every teacher had to be able to teach children with disabilities regardless of training background. They noted that the teacher’s correct attitude and commitment were more important than training. These views are illustrated in the following excerpts:

*“Teaching children with disabilities is every teacher’s job starting from ECD to grade seven. The child has to be taught by different teachers at each level as that is what inclusion is all about” (Head 9).*

*“What is important is not training in Special Education. Every teacher should be able to teach all the children in his or her class regardless of disability” (Head 3).*

*“Teacher-training is less important than one’s correct attitude and commitment towards these children. No training can give any teacher the love that must be given to these disabled children” (Head 10).*

*“No training can give any teacher the love that must be given to these disabled children” (Head 7).*

*“An untrained teacher who loves children with disabilities is better than a trained teacher who does not love them” (Head 12).*

The next section presents respondents’ views on the extent to which type and severity of disability affect the inclusion of children with disabilities in early childhood education in primary schools in Zimbabwe.

## **4.6 EFFECTS OF TYPE AND SEVERITY OF DISABILITY ON THE INCLUSION OF CHILDREN WITH DISABILITIES IN ECD**

### **4.6.1 Quantitative results**

The fifth sub-research question in Chapter 1, section 1.4 focused on the extent to which the type and severity of disability affect the inclusion of children with disabilities in early childhood education in primary schools in Zimbabwe. In this section, the findings of the current study, in answer to this question on the effect of type and severity of disability, are summarised in Table 4.5 and analysed below the table.

**Table 4.5: The extent to which the type and severity of disability affect the inclusion of children with disabilities in ECD (For School-heads N = 12; for School-teachers N= 36)**

Respondents	Statements	Responses					Total	Chi-Square
		SA	A	U	DA	SD		
Primary School-teachers	1. The type of disability influences inclusion of children with disability in Early Childhood Education.	3(25%)	4(33.3%)	2(16.7%)	2(16.7%)	1(2.8%)	12	Df=20 X Crit=37.57 (0.01) X Cal=11.2 Not Significant
	2. Most teachers are positive about including children with physical disabilities in Early Childhood Education.	2(16.7%)	0	2(16.7%)	3(25%)	5(41.7%)	12	
	3. Teachers are willing to include children with mild disability in Early Childhood Education.	0	2(16.7%)	0	6(50%)	4(33.3%)	12	
	4. The more severe the child's disability the more challenges it poses to inclusion.	9(75%)	3(25%)	0	0	0	12	
	5. The severity of disability influences the successful inclusion of children with disabilities at ECD level.	0	2(16.7%)	0	6(50%)	4(33.3%)	12	
	6. The type of disability influences teachers' willingness to include children with disabilities in their classes.	0	2(16.7%)	1(8.3%)	5(41.7%)	4(33.3%)	12	
	<b>TOTAL</b>	14	13	5	22	18	72	
Primary Schoolteachers	1. The type of disability influences inclusion of children with disability in Early Childhood Education.	5(13.9%)	6(16.7%)	4(11.1%)	10(27.8%)	11(30.6%)	36	Df=20 X Crit=37.5 (0.01) X Cal=21.72 Not Significant
	2. Most teachers are positive about including children with physical disabilities in Early Childhood Education.	5(13.9%)	4(11.1%)	3(8.3%)	13(36.1%)	11(30.6%)	36	
	3. Teachers are willing to include children with mild disability in Early Childhood Education.	4(11.1%)	4(11.1%)	5(13.9%)	15(41.7%)	8(22.2%)	36	
	4. The more severe the child's disability the more challenges it poses to inclusion.	11(30.6%)	14(38.9%)	2(5.6%)	3(8.3%)	6(16.7%)	36	
	5. The severity of disability influences the successful inclusion of children with disabilities at ECD level.	3(8.3%)	4(11.1%)	4(11.1%)	10(27.8%)	15(41.7%)	36	
	6. The type of disability influences teachers' willingness to include children with disabilities in their classes.	13(36.1%)	10(27.8%)	2(5.6%)	1(2.8%)	10(27.8%)	36	
	<b>TOTAL</b>	41	42	20	52	61	216	



Table 4.5 shows that for both primary school-heads and primary school-teachers, the obtained Chi-square value is less than the critical value. Thus, there is not enough evidence to suggest that the school-heads and school-teachers were agreeable that type and severity of disability affect the inclusion of children with disabilities at ECD level. These quantitative results indicate that type and severity of disability as a combined factor may not be the sole determinant of inclusive education for children with disabilities at ECD level. On the surface, these quantitative results may appear to contradict the qualitative results, but are actually illuminated when type and severity are dealt with as separate factors in the qualitative results that follow.

#### **4.6.2 Qualitative results**

Some of the school-heads revealed that the severity of disability has an effect on the inclusion of children with disabilities. The school-heads indicated that the more severe the child's disability, the more difficult it was to include him or her in education. They highlighted that difficulties arose because teachers were not trained to handle severe disabilities. They also pointed out that ECD centres did not have appropriate infrastructure, facilities and disability-related resources to cater for more severe disabilities. These views of school-heads are captured in the following excerpts:

*“Severe cases of disability are difficult to include” (Head 11).*

*“Severe cases of disability are difficult to include since these learners need special resources and adapted environment” (Head 1).*

*The severity of disability affects inclusion in that most of the teachers were not trained to handle severe cases of disabilities. The more severe the disability the more the child is affected negatively” (Head 10).*

*“Once the disability is severe, teachers may fail to handle the child in an inclusive setting” (Head 4).*

*“Some disabilities which are severe are difficult to include” (Head 9).*

*“Since most schools are not ideal in terms of infrastructure and equipment it is very difficult to include children with severe disabilities” (Head 2).*

Some teachers expressed the view that the type and severity of disability influence the inclusion of children with disabilities in early childhood education. The teachers revealed that severe cases require more attention and more resources and could affect other learners negatively, as teachers could not cope in normal classes. They also highlighted those children with certain

types of disabilities such as deafness were uncooperative and violent. These views are captured in the following excerpts:

*“The severity of disability may cause more challenges to inclusion” (Teacher 8).*

*“Children with severe disabilities are difficult to include because they need much more attention” (Teacher 7).*

*“Severe cases of disabilities cannot be included in ECD since it can affect other learners” (Teacher 29).*

*“Type and severity of disability influences the inclusion of children with disability in the sense that severe cases impose challenges” (Teacher 34).*

*“On this one, I have failed. He doesn’t say anything and cannot write anything. He is only good at beating others. He should be at a special school for the deaf” (Teacher 15).*

*“Teachers cannot cope with severe cases of disability in a mainstream class. Some of these children need special attention which is not easy with a class of 40 learners which is a large class” (Teacher 4).*

*“Most classrooms do not have equipment and this makes it difficult to include children with severe disabilities” (Teacher 2).*

Some parents also revealed that the type of disability influences the inclusion of children with disabilities in early childhood education. The parents indicated that teachers choose the type of disability to include. They pointed out that since some types of disability are more difficult to include, depending on the teacher’s knowledge, teachers are more willing to include children with the kinds of disabilities that they are knowledgeable about. These views are illustrated in the following quotes:

*“The type of disability to include depends on the teacher’s knowledge on that disability” (Parent 6).*

*“Some types of disability are difficult to include” (Parent 20).*

*“My child has epilepsy when he falls at school the teacher fears to catch on the disability. At one time he called me to come and get the child home. This leads to the child being discriminated since teachers want to include cases they can handle” (Parent 1).*

*“Some disabilities are difficult to include hence teachers are willing to include the type of disability they can manage” (Parent 18).*

Some parents of children with disabilities in ECD centres revealed that mild cases of disability are easier to include than more severe cases. These parents indicated that teachers are more willing to include mild cases in their classes. They pointed out that teachers cannot manage

some of the severe cases which caused problems in teaching situations. These views are illustrated in the following quotes:

*“Mild cases of disability are easier to include than severe cases (Parent 21).*

*“Severe cases of disability are difficult to manage while mild cases are easier to manage” (Parent 6).*

*“The severity of disability affects inclusion in that the more severe cases are difficult to include than mild cases” (Parent 18).*

*“The more severe the disability the more problems it causes” (Parent 8).*

*Mild cases are easier to include than severe cases. Teachers are willing to include mild cases of disability since severe cases are difficult to include” (Parent 20).*

*“Most teachers are willing to include mild cases of disability since severe cases are difficult to manage. The more severe the disability the more problems it causes to inclusion” (Parent 6).*

Some parents, however, expressed the view that the type of disability does not influence the inclusion of children with disabilities in ECD. They revealed that school-heads are willing to include all cases. These parents indicated that the school-heads were willing to include all types and levels of severity since they are not the ones teaching the children. They submitted that the school-heads were not knowledgeable about what goes on in the classrooms. These views are illustrated in the following quotes:

*“Head-teachers don’t know what is happening in the classrooms” (Parent 9).*

*“Head-teachers do not teach the children so can include anyone” (Parent 16).*

*“Head-teachers are willing to include everyone despite the severity of disability” (Parent 19).*

*“Head-teachers don’t teach these children so they don’t choose who to include” (Parent 2).*

*“Type of disability has nothing to do with inclusion” (Parent 4).*

*“Since each type of disability has different needs, teachers will not choose the type of disability to include and the school heads do not teach these children so they don’t choose the type of disability to include” (Parent 3).*

In concurrence with these parents’ view, some teachers revealed that the type of disability does not influence inclusive education of children with disabilities at ECD level. This view is captured in the following excerpts:

*“The type of disability does not affect inclusive education in ECD. Teachers do not choose the type of disability to include because each type of disability has its own needs” (Teacher 19).*

*“My willingness to include the child does not depend on the type of disability” (Teacher 21).*

*“Type of disability does not affect inclusion” (Teacher 11).*

*“Type of disability does not affect anything” (Teacher 24).*

*“Teachers do not choose the type of disability to include” (Teacher 9, 3, 12)*

The next section presents respondents’ views on strategies which can be employed to improve the inclusion requirements of children with disabilities in early childhood education in primary schools in Zimbabwe.

## **4.7 STRATEGIES FOR IMPROVING THE INCLUSION REQUIREMENTS OF CHILDREN WITH DISABILITIES IN ECD**

### **4.7.1 Quantitative results**

The sixth sub-research question in Chapter 1, section 1.4 focused on strategies which can be employed to improve the inclusion requirements of children with disabilities in early childhood education in primary schools in Zimbabwe. In this section, the findings of the current study in answer to this question on strategies, are summarised in Table 4.6 and analysed below the table.

**Table 4.6: Strategies which can be employed to improve the inclusion requirements of children with disabilities in ECD (For School-heads N = 12; for School-teachers N= 36)**

Respondents	Strategy	Responses					Total	Chi-Square
		SA	A	U	DA	SD		
Primary School-heads	1. Making the learning environment accessible	9(75%)	3(25%)	0	0	0	12	Df=20 X
	2. Adapting the learning environment	5(41.7%)	7(58.3%)	0	0	0	12	
	3. Play-way strategy	7(58.3%)	4(33.3%)	0	1(8.3%)	0	12	Crit=37.57 (0.01) X
	4. Multi-disciplinary strategy	6(50%)	4(33.3%)	1(8.3%)	1(8.3%)	0	12	
	5. Teaching functional skills to children with disabilities	5(41.7%)	4(33.3%)	1(8.3%)	2(16.7%)	0	12	Cal=77.31 Significant
	6. Early intervention	5(41.7%)	4(33.3%)	1(8.3%)	2(16.7%)	0(0%)	12	
	<b>TOTAL</b>	38	26	2	5	1		
Primary School-teachers	1. Making the learning environment accessible	17(49.4%)	10(27.8%)	3(8.3%)	4(11.1%)	2(5.6%)	36	Df=20 X
	2. Adapting the learning environment	10(27.8%)	18(50%)	2(5.6%)	3(8.3%)	3(8.3%)	36	
	3. Play-way strategy	15(41.7%)	10(27.8%)	2(5.6%)	4(11.1%)	5(13.9%)	36	Crit=37.57 (0.01) X
	4. Multi-disciplinary strategy	11(30.6%)	13(36.1%)	4(11.1%)	3(8.3%)	5(13.9%)	36	
	5. Teaching functional skills to children with disabilities	12(33.3%)	14(38.9%)	4(11.1%)	2(5.6%)	4(11.1%)	36	Cal=80.4 Significant
	6. Early intervention	11(30.6%)	10(27.8%)	5(13.9%)	5(13.9%)	5(13.9%)	36	
	<b>TOTAL</b>	76	75	20	21	24	216	

Table 4.6 shows that for both primary school-heads and primary school-teachers, the obtained Chi-square value is greater than the critical value. Thus, there is significant evidence that the school-heads and school-teachers were agreeable that the employment of the above strategies has the potential to improve the inclusion of children with disabilities in early childhood education. Table 4.6 also shows that for both primary school-heads and teachers, the strategies for making the learning environment accessible are viewed as the most important for the inclusion of children with disabilities in ECD. These quantitative results are illuminated in the qualitative results that follow.

#### **4.7.2 Qualitative results**

Some of the school-heads viewed the following as strategies which can be used for improving the inclusion of children with disabilities in ECD: early intervention, teaching through play and adapting the physical environment. They also suggested multidisciplinary approaches. The school-heads' views are captured in the following excerpts:

*Play and multidisciplinary approaches improve the inclusion of children with disabilities in ECD” (Head 9).*

*“The multidisciplinary strategy is very useful in the inclusion of children with disabilities in ECD in that teachers have to be specialists who work with others in different areas putting their heads together to help the child with disability” (Head 3).*

*“Early intervention catches learners while still young. Children develop rapidly while still young hence it’s important to intervene early” (Head 6).*

*Adapting the environment enables needs of the child to be met. Schools need to improve the construction of ramps and pathways to allow access to learners who use wheelchairs. The environment should be adapted to meet the needs of all learners” (Head 2).*

*“Strategies should not be discriminatory in nature so that all learners are included. If RBM and examination oriented curriculum are altered inclusion may be effective and children with disabilities will be included in ECD” (Head 1).*

*“Early intervention and adapting the environment will improve the inclusion of children with disabilities in ECD. Early intervention will enable to catch the children young and adapting the environment will enable the environment to suit the needs of all learners” (Head 4).*

Most teachers suggested strategies that can be employed to improve inclusion requirements of children with disability at ECD level. The school-teachers suggested strategies such as increasing variety of learning activities, play-way methods of teaching, and teaching functional skills. They also suggested paying special responsibility allowances to teachers of children with disabilities in order to motivate them. These views are shown in the following excerpts.

*“Children with disabilities easily get bored with monotonous activities so they need to constantly need to change so that they enjoy and learn” (Teacher1).*

*“Children with disabilities learn the same things over and over but this needs to be done in various ways to avoid boring them” (Teacher 36).*

*“There is need to have quite a number of strategies that help each and every learner regardless of their disabilities” (Teacher 15).*

*“The teaching of functional skills enables the teacher to identify learners’ capabilities early so that they can be developed” (Teacher 21).*

*“Content that is taught to children with disabilities may need to be broken down into more manageable units for them to succeed” (Teacher 27).*

*“A special allowance should be paid to teachers in an inclusive setting for inclusion to work” (Teacher 13).*

Some parents of children with disabilities concurred with the teachers’ suggested strategies. The parents suggested adaptation of the learning environment, teaching functional skills, early intervention and multidisciplinary approaches to teaching. They also concurred that play improves the inclusion of children with disabilities in ECD centres. These strategies are demonstrated in the following quotes.

*“Functional skills will enable children with disabilities to be functional thereby included in ECD centres” (Parent 14).*

*“Early intervention enables the child’s disability to be managed early” (Parent 14).*

*“Children learn faster while they are young hence the need to intervene early” (Parent 19).*

*“Multidisciplinary approach will help professionals to put heads together to help the child learn” (Parent 14).*

*“Different professionals are knowledgeable in different areas to help the child” (Parent 9).*

*“When the environment is adapted it will meet the needs of the child. Functional skills will enable the child to participate fully thereby being included. Early intervention will enable to catch them young” (Parent 16).*

The next section discusses these results, referring to related literature.

## **4.8 DISCUSSION OF RESULTS**

The current study investigated factors affecting the inclusion of children with disabilities in ECD in Masvingo primary schools, Zimbabwe, with a view to improving the success of inclusion of children with disabilities at ECD level. In this section, the findings from the study are discussed under the six sub-headings derived from the sub research questions guiding the study as posed in section 1.4 of Chapter 1. Specifically, the sub-headings are: resources and inclusive early childhood development; stakeholders’ attitudes and inclusive early childhood education; policies and inclusive early childhood education; teachers’ training and inclusive early childhood education; type and severity of disability and inclusive early childhood education, as well as strategies for improving the inclusion of early childhood education learners. In the first sub-section, the findings of the study on resources and early childhood development are going to be discussed.

### **4.8.1 Resources and early childhood development**

The present sub-section is a discussion of how resources influence the inclusion of children with disabilities in early childhood development as revealed by the findings of the study. In the discussion, reference is made to available literature related to resources and early childhood development.

It emerged, from the current study, that the availability of disability-friendly resources positively influences the inclusion of children with disabilities in ECD centres. The availability of funding to buy assistive devices and play materials was viewed by participants as likely to enable children with disabilities and those without disabilities to participate together in play. Availability of funding was likely to facilitate disability-friendly structures, which were then also likely to enable



children with disabilities to become independent within the ECD centres. Such independence would most likely result in inclusion in various activities in and out of the classrooms. This finding of the present study, that availability of disability-friendly resources positively influences the inclusion of children with disabilities, is consistent with international literature, for example in the UK (Griffiths, 2020:63; Stewart, 2020:51), US (Okoro et al., 2018: 34; Tatter, 2019:45; Anderson, 2019:12), Australia (Anderson & Boyle, 2017:52), Laos (Grimes, 2010:17), Vietnam (Rydstrom, 2010:15), China (Deng & Poon-McBrayer, 2004:12), Sweden (Leddy, 2015:17), Botswana (Shumba & Taukobong, 2009:33), Ethiopia and Thailand (Schiemer & Proyer, 2013:14), Nigeria (Adeniyi et al., 2015:16), Kenya (Owuor, 2014:17; Omondi, 2016:13; Okongo et al., 2015:16), South Africa (Geldenhuys & Wever, 2013:18; Walton, 2018:34; Adewumi, 2019:38), Namibia (Mokaleng, 2019:14), Lesotho (Serpell, 1999:17; Johnstone, 2007:28), India (Limaye, 2016:72; Singh, 2016:3231; Tripathi, 2018:1314; Chakraborti-Ghosh, 2017:55) and Malawi (Chavuta et al., 2008:12), which all found that availability of resources positively influences the inclusion of children with disabilities. Similarly, previous Zimbabwean studies, for example Mushoriwa (2002:34), Chireshe (2013:45) and Chimhenga (2016:87), established that availability of resources was an important factor influencing inclusion.

The finding of the present study, that availability of resources would influence inclusion positively, however, contradicts Gronlund et al. (2010:22), who observed that simply availing more resources does not necessarily improve inclusivity in a school. Gronlund et al. (2010:22) noted that without appropriate coordination, the availability of more and more resources could actually lead to negative consequences for inclusive education. A possible explanation for this difference is that Gronlund et al. (2010:22) investigated the extent to which varying levels of resources were actually being utilized to improve educational outcomes in schools, while the current study did not focus on varying levels but, rather, on availability and unavailability of resources. In addition, the current study did not restrict itself to educational outcomes but broadly focused on influence of available or unavailable resources on inclusion for children with disabilities.

The current study also revealed that participants viewed the unavailability of resources in ECD centres as negatively influencing the inclusion of children with disabilities to a large extent. Participants were agreeable that without adequate resources, schools cannot include more children with disabilities. The lack of appropriate support structures in schools was viewed as negatively affecting inclusion of children with disabilities in ECD. This lack of appropriate support structures

was compounded by a lack of adequate funds to buy assistive devices and play materials in schools. In combination, these deficiencies were a big barrier to the inclusion of children with disabilities in ECD. Without appropriate support structures, children with disabilities were unlikely to be able to freely participate in play activities and so would be isolated. This was ultimately likely to negatively affect the inclusion of children with disabilities.

The finding that lack of resources negatively influences inclusion concurs with prevailing literature, for example in the US (Okoro et al., 2018:38; Tatter, 2019:55; Anderson, 2019:17), Australia (Westwood & Graham, 2003:85), United Kingdom (Avramidis et al., 2000:93; Griffiths, 2020:57; Stewart, 2020:41), Canada (Wuart et al., 2013:15), New Zealand (Purdue, 2009:140), Hong Kong (Zhang, 2011:14; Cheuk & Hatch, 2007:695), India (Limaye, 2016:76; Singh, 2016:3229; Tripathi, 2018:1315; Chakraborti-Ghosh, 2017:62), Kenya (Omondi, 2016:71), Owuour, 2014:84), Botswana, (Shumba & Taukobong, 2007:65; Malatsi et al., 2015:4), Lesotho (Serpell, 1999:12; Johnstone, 2007:31), Namibia (Eloff & Kgwete, 2007:354; Zimba et al., 2004:17; Zimba et al., 2007:46; Mokaleng, 2019:57), Malawi (Chavuta et al., 2008:7) and South Africa (Department of Education, 2001:3; Stofile & Green, 2007: 61; Walton, 2018:30; Adewumi, 2019:33) which all found that without adequate resources, inclusion is negatively affected.

Similarly, previous Zimbabwean studies, for example, (Mpofu, 2000:137, Chimedza, 2008:129; Musengi & Chireshe, 2012:112; Mpofu et al., 2007: 69; Mpofu et al., 1997: 18; Chireshe, 2013:226, Chimhenga, 2016: 37; Majoko, 2016:14; Musengi, 2019:97) established that inadequate resources negatively affect inclusion. The current study's finding therefore supports literature which reveals that shortage of resources is an impediment to the inclusion of children with disabilities. However, the current study's finding is not consistent with Oliva's (2016:17) finding that schools often have more resources than they actually use for inclusive education. A possible explanation for this inconsistency is that Oliva (2016:17) explored stakeholders' awareness of, and ability to, use available resources while, the present study investigated availability or unavailability of resources and how this influences inclusive education for children with disabilities in early childhood.

The present study further revealed that teachers and parents of children with disabilities viewed low budgetary allocations as resulting in inadequate resources which, in turn, become a barrier to

inclusive education. The finding that low budgetary allocation results in inadequate resources for inclusion is consistent with international literature, for example in the US (Okoro et al., 2018:40; Tatter, 2019:58; Anderson, 2019:21), Namibia (Zimba et al., 2007:43; Sukhraj, 2008:42), Zambia (Hayes & Bulat, 2017:27), Cameroon (Mbibeh, 2013:57), Botswana (Dart, 2007:63), Kenya (Peter & Nderitu (2014:24), South Africa (Ntsnswisi, 2008:61; Tshifura, 2012:101; Hayes & Bulat, 2017:27), which all found that low budgetary allocation results in inadequate resources for inclusion.

Similarly, previous Zimbabwean studies, for example Chireshe (2013:12), Chimhenga (2014:33) and Chimedza (2008:129) established that funding for inclusive education is a substantial concern for governments as it is not adequate. Therefore, the present study's finding that low budgetary allocations result in inadequate resources supports the literature which reveals that inclusion is negatively affected by inadequate resources resulting from low national budgets. However, the present study's finding is inconsistent with studies such as by Moberg (2000:74) and Sadek and Sadek (2000:12), which found that budgetary allocations for inclusive education are sometimes not known and not used by school administrators. A possible explanation for this difference is that, rather than low budgetary allocations being solely responsible for negatively influencing inclusive education, lack of utilization of available budgetary allocations may also be negatively influencing inclusion of children with disabilities.

The current study also found that many school-heads appeared to be unaware of the availability of government's additional funds for each school that enrolls children with disabilities. The school-heads' unawareness of additional funding revealed a knowledge gap, which, therefore means that available additional funds are not being requested. In turn, this implies that no additional resources may be sourced for children with disabilities, thereby negatively influencing the inclusion of children with disabilities. The current study's finding on the school-heads' knowledge gap about additional funds for children with disabilities supports other studies, for example in the US (Daane et al., 2000: 18), Egypt (Moberg, 2000: 74) and Finland (Sadek & Sadek, 2000: 12), which all established that principals may not have a good understanding of inclusive education as they may have received limited training on how to run an inclusive school. In the current study's finding, unawareness of government's additional funding for learners with disabilities means that resources available from government are not being utilized, thereby negatively affecting inclusion of children with disabilities at ECD level.

It also emerged, from the current study, that some participants viewed the unavailability of necessary resources from government as impeding the increased enrolment of children with disabilities and, therefore, their inclusion in ECD. Some school-heads and school-teachers viewed the provision of resources for inclusion as a government responsibility, which was not being fulfilled. The focus on government as failing to provide resources is a focus on what Bronfenbrenner's Ecological System Theory informing this study called the macro system. The macro system includes government and political systems over which parents and educators have little control.

The educators viewed government, over which they had no control, as failing to provide resources for inclusive education. In terms of how they conceptualize inclusive education, this implies that the school-heads and school-teachers see the school as unchangeable until resources are availed from government in order to influence inclusion by increasing numbers of children with disabilities in schools. On the other hand, the parents of children with disabilities viewed the inclusion of their children as being negatively influenced by local resources that needed to be availed at home, class and school in order to enable the holistic development of individual children with disabilities. The parents' focus on resources that are unavailable from home, class and school keeps responsibility for inclusion within Bronfenbrenner's microsystem and mesosystem levels in the ecological theory informing this study. The microsystem consists of the child's nuclear family, while the mesosystem consists of the extended family, neighbours and education workers. Placing responsibility for unavailable resources within families, neighbourhoods and local schools in this way implies potential for changing the schools locally.

Parents' conceptualization of inclusion focuses on underutilized, existing school and community resources to change the schools, and therefore, influence inclusion by better serving individual children with disabilities. This contrasts with placing responsibility for unavailable resources on government, which results in an external locus of control that does not promote local self-help activities for inclusion of children with disabilities. The professionals focused on how unavailable resources decrease the quantity of children served from external resources, while parents focused on local resources that were not being utilized to improve the quality of service to the individual child with a disability. Since most of the parents who participated in the current study were the biological parents of children with disabilities, they were interested in the actual outcomes for their individual child rather than increasing numbers of hypothetical children with disabilities.

The subsequent sub-section discusses the extent to which stakeholders' attitudes affect the inclusion of children with disabilities in early childhood education as revealed by the findings of the present study.

#### **4.8.2 Stakeholders' attitudes and early childhood education**

The present sub-section is a discussion of the extent to which stakeholders' attitudes affect the inclusion of children with disabilities in early childhood education as revealed by the findings of the current study. In the discussion, reference is made to literature related to stakeholders' attitudes and early childhood education.

The present study revealed that stakeholders' attitudes affect the inclusion of children with disabilities in ECD to a large extent. The current study revealed that positive attitudes by stakeholders affect inclusion positively. School-heads were of the view that teachers' positive mind-sets enable children with disabilities to be provided with opportunities to participate in learning. Increased opportunities to participate in learning enhance inclusive education. The finding of the present study that teachers' positive mind-sets enabled the provision of increased learning opportunities for children with disabilities supports prevailing literature, for example Avramidis et al. (2000:195), Subban and Sharma (2005:4), Hodge and Jansma (2000:215) and Berghs et al. (2020:16), which all found that possessing previous experience of disability appears to positively predispose teachers towards facilitating more learning opportunities in inclusive education and allows mainstream teachers to feel more comfortable within the inclusive classroom. Direct experiences of having had learners with disabilities in previous mainstream settings appeared to be an essential factor in shaping teachers' positive views toward inclusive settings (Avramidis et al., 2000:197). Hodge and Jansma (2000:215) established that teachers with previous experience of disability are inclined to have positive attitudes and appeared to have higher expectations of students with disabilities than those without such prior experience. Subban and Sharma (2005:4) also revealed that prior experience with disability made teachers amenable to teaching children with disabilities in mainstream settings.

The current study's finding that positive attitudes by stakeholders affect inclusion positively also supports prevailing literature, for example Schein (1985:45), Trent et al. (1998:16), Kugelmass

(2001:54), Dyson (2006:98), Ainscow et al. Weiner (2013:63), Cassady (2011:19), Vaz (2015:24) Gaines and Barnes (2017:77) and Berghs et al. (2020:18), which all found that positive attitudes by stakeholders positively affect the inclusion of children with disabilities. The positive attitudes of teachers were, therefore, an important factor in the success of inclusion of children with disabilities at ECD level in Zimbabwe. However, the current study's finding is inconsistent with literature indicating that positive teacher attitudes involving provision of accommodations for children with disabilities may be negatively viewed by peers as watering down the curriculum, thereby negatively influencing acceptance and inclusion (Ellis, 2017:16; Matthew & Ambady, 2018:43). It is possible that the difference between this literature and the current study's finding is that in the current study, specific accommodations by stakeholders were not compared with reactions of other stakeholders.

The current study further revealed that parents of children with disabilities viewed some parents in the community as having positive attitudes which have a positive influence on the inclusive education of children with disabilities at ECD level. The parents of children with disabilities indicated that fellow parents in the community influenced school-teachers, school-heads and other schoolchildren without disabilities to have positive attitudes. In turn, these community stakeholders' positive attitudes would positively affect the emotions and learning of children with disabilities and, therefore, promote their inclusive education. The finding of the current study that community stakeholders positively influence inclusive education supports prevailing literature, for example Cole et al. (2004: 18), Cossier et al. (2013: 47), Kalambouka et al. (2007: 29), Hayes and Bulat (2017: 5), Sansome (2020:73) and Chataika et al. (2020:22), which all found that positive community attitudes resulted in positive outcomes for the inclusive education of children with disabilities. In line with Bronfenbrenner's Ecological Systems Theory which informed this study, the current study found reciprocal interaction of positive parents' attitudes in the microsystem of the home with positive school-teachers' and community attitudes in the mesosystem of school and community. Community and school attitudes positively influenced the home just as they were also positively influenced by home attitudes thereby, enabling individual children with disabilities to be accepted in ECD classes. Attitudes held by the parents of children without disabilities and other non-disabled peers were, similarly, emanating from community attitudes and were positively influencing inclusive education. At the general level where specific stakeholders were not

identified, implementation of inclusive education for children with disabilities in ECD was positively influenced by positive stakeholder attitudes.

The current study also revealed that negative attitudes by stakeholders negatively affect the inclusion of children in ECD. All the categories of participants concurred that if stakeholders' attitudes are negative, then they would affect inclusion negatively. The finding of the current study that negative stakeholder attitudes affect inclusion negatively concur with prevailing literature, for example Skipper (2006:9), Cassady (2011:7), Chambers and Forlin (2010:41), US Department of Education (2015:74) and Henry-Buckmire (2020:233), which all found that the negative attitudes of stakeholders affect the implementation of inclusive education for children with disabilities negatively. The current study's finding that negative stakeholder attitudes affect inclusion negatively also supports international literature, for example in the United States (Avramidis et al., 2002:144; Silverman, 2007:28) and Kenya (Mwangi & Orodho, 2014:28). Earlier studies in Zimbabwe (Majoko, 2016:2; Mafa, 2012:19; Chimhenga, 2014:17) also established that negative attitudes by stakeholders negatively affect the inclusion of children with disabilities in ECD.

It also emerged, from the current study, that government was a stakeholder whose attitude is not supportive of inclusive education for children with disabilities in ECD. Participants indicated that lack of government support for children with disabilities was indicative of negative attitudes in government towards their inclusive education. The current study's finding that participants viewed government attitude as negative is consistent with international literature, for example in Greece (Antonak & Livneh, 2000:217), Turkey (Duquette, 2006:29), Ireland (Hammond & Ingalls, 2003:25) and Thailand (Leyser & Tappendorf, 2001:760), which all found that governments with negative attitudes towards disabilities do not support inclusive education. Governments with negative attitudes towards disabilities are unlikely to provide human, material, technological and financial support and assistance for children with disabilities, thereby compromising the implementation of inclusive education for children with disabilities in ECD.

The current study also revealed that parents of children with disabilities identified school-heads as stakeholders whose negative attitudes result in children with disabilities being excluded from ECD centres. The attitudes of school-heads towards inclusive education were viewed as determining their subordinates' implementation of inclusive education for children with disabilities in ECD. The finding of the current study that school-heads were viewed as holding negative attitudes

towards the implementation of inclusive education for children with disabilities in schools is consistent with prevailing literature, for example Avramidis et al. (2000:198), Cook (2001:316), Ladbrook (2009:67) and Engelbrecht et al. (2001:257), which all found that the negative attitudes of school-heads towards inclusive education result in unsuccessful implementation at school level. In these studies school-heads were found to be adjusting their expectations for learners with disabilities and had low concern about the academic performance of these children with disabilities. Such adjusted expectations are negative attitudes which are likely to negatively affect the inclusion of children with disabilities in ECD.

It also emerged, from the current study, that participants viewed school-teachers as other stakeholders whose negative attitudes negatively influenced inclusive education at ECD level. Negative attitudes by teachers were viewed as emanating from their lack of appropriate knowledge and skills to handle learners with disabilities, although the school-teachers usually found other reasons for excluding such learners from their classes. The participating school-teachers concurred with the view that lack of knowledge of disability contributed to their unwillingness to include children with disabilities in ECD. The current study's finding that negative teacher attitudes emanated from lack of knowledge concurs with international literature, for example in Kenya (Mulinge, 2016: 30), South Africa (Hay et al., 2001:216; Pottas, 2005:66), Iraq (Subban & Sharma, 2005:4), Ethiopia (Beyene & Tizazu, 2010:92), United Arab Emirates (Van Reusen et al., 2001), Australia (Taylor et al., 1997:17) and Nigeria (Fakolade et al., 2009:156), which all found that negative teacher attitudes negatively influenced inclusive education.

The current study's finding that school-teachers had negative attitudes which negatively influenced inclusion also supports studies by Cook (2001:316), Ladbrook (2009:67), Engelbrecht et al. (2001:257) Greene (2017:60), Sharma and Michael (2017:49), Zwane and Malale (2018:77) and Majoko (2018:343), which revealed that teachers adjusted expectations for learners with disabilities and developed relatively low accountability and concern about the academic and behavioural performance of these children with disabilities. In addition, international literature, for example in Lesotho (Tshifura, 2012:75), Nigeria (Fakolade et al., 2009:156) and South Africa (Bothma, 1997:50), also established that school-teachers often feel compelled to make changes in their classroom teaching-learning situation as a result of decisions in which they have not participated. This creates negative attitudes which negatively influence the implementation of inclusive education for children with disabilities at ECD level in schools.



The current study further revealed that participants identified some parents of children with disabilities as having negative attitudes which were a barrier to inclusive education at ECD level. Parents with negative attitudes were unlikely to collaborate and support other stakeholders, such as school-heads, in raising various resources for the implementation of inclusive education for children with disabilities. Participating parents revealed that their protectiveness and resistance to separation from their children with disabilities hindered inclusion at ECD level. The current study's finding that parents have negative attitudes towards the implementation of inclusive education for children with disabilities concurs with Chireshe (2011:158), who revealed that parents, as stakeholders, believed that the inclusion of children with disabilities may slow the pace of the teacher, thus negatively affecting other learners. Norwich (2002:55) also indicated that there is a conflict of rights as a result of both the child's and the parents' attitudes, which will affect the implementation of inclusive education for children with disabilities. In South Africa, Engelbrecht et al. (2001:258) also revealed that the role that parents have in making decisions about their children with disabilities and their support of their children through their education affects the implementation of inclusive education in schools.

The current study also found that other children in the school have negative attitudes towards the implementation of inclusive education for children with disabilities in ECD classes. The parents of children with disabilities viewed the attitudes of non-disabled children in class as negative towards inclusive education. The parents pointed out that children with disabilities could detect negative stakeholder attitudes and react negatively by reducing their participation in class. Children with disabilities could be affected emotionally and begin to feel discriminated. It was noted that young children without disabilities learn negative attitudes from adults such as parents and local communities who do not accept disabilities. The finding of the current study that other children in class have negative attitudes towards the inclusive education of children with disabilities is consistent with prevailing literature, for example Cook et al. (2001:574), Nowicki and Sandieson (2002:246) and Szumski et al. (2020:22), which revealed that negative peer attitudes were generally recognised as a major barrier to inclusion at school for children with disabilities. These children with disabilities get frustrated in the mainstream classes because of the negative attitudes and labelling they experience from other children in the school.

The subsequent sub-section discusses the extent to which policies influence the inclusion of children with disabilities in early childhood education as revealed by the findings of the present study.

#### **4.8.3 Policies and inclusive early childhood education**

The present sub-section is a discussion of the extent to which policies influence the inclusion of children with disabilities in early childhood education as revealed by the findings of the current study. In this discussion, reference is made to literature related to policies and early childhood education.

It emerged, from the current study, that participants viewed the success of inclusion of children with disabilities at ECD level as dependent on clear policies. This is regardless of whether these policies were specific to inclusive education or were general education policies. The participants concurred that whether policies were specific or general, it was important for them to be clear in order to properly implement inclusive education. The finding of the present study that clear policies are important for inclusive education is consistent with prevailing literature, for example Slee (1997:418), Kearney and Kane (2006:216), Winter and O’Raw (2010:28), Ileri et al. (2020) and Schuelka (2018), which all found that clear policies are important. Clarity in this case related to the provision of details which those implementing and those overseeing the implementation could track easily. However, the finding that clear policies lead to proper implementation is inconsistent with literature arguing that policies in schools are subject to complex processes of interpretation and translation rather than mere mechanical implementation (Ball et al., 2011: 88; Viennet & Pont, 2017:53). The contrary literature indicates that successful inclusive education can be attained by involving the implementers in the formulation of such policies. For example, Winter and O’Raw (2010: 28) and Smith and Benavot (2019) argued that clarity of top-down policy implementation results from bottom-up support and a partnership approach, in order to ensure the successful implementation of inclusive education. Similarly, Kearney and Kane (2006:216) and Burns et al. (2016) found that teachers need to be allowed to input their own perspectives on the development of inclusive education policies. The possible explanation for the difference between the current finding and the contrary literature is that clarity needs to be complemented by involving teachers in formulating or interpreting policies in order to have successful inclusive education.

This means that the school-teachers and school-heads who have to implement inclusive education policies must not only be expected to support clear reforms coming from their superiors, but should also be supported so that they can make the necessary changes. Lack of teacher input and support can lead to non-compliance with the policies and, therefore, negatively impact the inclusive education of children with disabilities in at ECD level in primary schools.

The current study further established that school-based policies needed to be in place in order to complement government policies and legislation, thereby positively facilitating the inclusion of children with disabilities at ECD level in Zimbabwe. Parents of children with disabilities pointed out that schools needed to come up with policies to support whatever government policies were in place. It is envisaged that school level policies would show commitment to implementing inclusive education by school-heads and school-teachers. The absence of commitment in developing policies at school level is occurring at a level Bronfenbrenner's theory that informed this study refers to as mesosystem level. The mesosystem level involves education workers such as teachers and heads in schools. The mesosystem is in direct contact with the microsystem of the child with disabilities, thereby implying that the absence of policy at mesosystem level has a directly negative impact on the clarity of how the child should be included at classroom or micro level, as it shows lack of commitment. The observation that if schools do not have school-level policies they lack inclusive education commitment supports prevailing literature, for example Burns et al. (2016), Nyanga and Nyanga (2013:166), and Wevers and Geldenhuys (2013:3), who revealed that policy-making within schools indicates commitment to inclusive education. Nyanga and Nyanga (2013:166) revealed that successful implementation of inclusive education for children with disabilities in Zimbabwe is hampered by a lack of commitment by schools towards learners with disabilities. In South Africa, Wevers and Geldenhuys (2013:3) revealed that many learners with special educational needs are still excluded from full access to quality and equitable educational opportunities in mainstream primary schools as a result of a lack of support from policymakers within the schools. Similarly, in Zimbabwe, despite the fact the government has shown its concern regarding the inclusive education of persons with disabilities by including the rights of persons with disabilities in the Constitution of Zimbabwe (2013), there are no clear, lower level policies to support the inclusive education of children with disabilities in primary schools with ECD centres.

It also emerged, from the present study, that there were no mandatory policies specific for inclusive education. Most participants viewed the lack of mandatory policies specifically on inclusive

education as a barrier to the inclusion of children with disabilities at ECD level in Zimbabwean primary schools. The lack of mandatory policies meant that it was unlikely that a legally binding framework existed for effective and efficient planning, development, management and implementation of inclusive education for children with disabilities in the ECD centres in primary schools. This implies that the teachers implementing inclusive education were unlikely to make informed, legally-bound decisions about the way children with disabilities should be assisted in teaching and learning situations in ECD centres in primary schools in Zimbabwe. The finding that the absence of specific policy is detrimental to inclusion supports prevailing literature, for example Ainscow et al. (2013), Hayes and Bulat (2017), Gongera et al. (2013:113), Zimba et al. (2007: 41), UNICEF (2014:2), WHO (2011:217), UNICEF (2012: 6), UNCRPD (2006), SDG 4 (2015), UNESCO (2009), Burns et al. (2016), and Wermke et al. (2020:71), which all established that the absence of policies that respond specifically to children with disabilities undermines their inclusive education. These studies found that there was no clear government policy on the administration and management of special needs education in inclusive settings in primary schools.

Similarly, earlier Zimbabwean studies, for example Mutepfa et al. (2007:342), Mafa (2012:20), Deluca et al. (2014:5), Mpofu (2004:955) and Chireshe (2011:157; 2013:224), also established that Zimbabwe does not have an inclusive education specific policy, but has inclusive education related policies such as the Education Act (1996) (Revised 2006) and the Disabled Persons Act (1996) (Revised 2006) which advocate non-discrimination in the provision of education and the non-discrimination of people with disabilities. This absence of mandatory policy and legislation is likely to negatively impact on the implementation of inclusive education for children with disabilities in ECD Centres in primary schools in Zimbabwe. Inclusive education for children with disabilities is undermined at ECD level when those who are supposed to implement the policy are not properly informed about what they should do. Without specific policies for the inclusion of these children, implementers of ECD education would not know what the law requires of them and such a knowledge-gap negatively influences inclusive education.

On a different dimension, most school-heads did not consider lack of specific policies as a barrier to the inclusion of children with disabilities at ECD level. The school-heads stated that although there are no specific policies on the inclusion of children with disabilities in ECD, there are general education policies that enhance provision of inclusive education for children with disabilities in ECD. This finding is an additional dimension which supports international literature, for example

in the United States (Sletzt, 2010:1), Britain (Follari, 2011:12, Morrison, 1995:433), New Zealand (Purdue, 2009:138) and South Korea (Paik & Hearly, 1999:253), which all found that general education policies have a positive impact on all learners, including children with disabilities in mainstream schools. Earlier Zimbabwean studies, for example Mandina (2012:3), Chikutuma and Mawere (2013:54), Mafa (2012:20) and Mushoriwa (2002:48), also revealed that general education policies positively influence the inclusion of children with disabilities just as they influence the education of diverse other learners who may not have disabilities. In this view, policies of a general nature have a positive influence on all learners, including those with disabilities who are enrolled at ECD level in primary schools in Zimbabwe. This view is strengthened by the current study's other finding that participants concurred that international policies on equalization of opportunities for people with disabilities enhance the inclusion of children with disabilities in ECD centres in Zimbabwe. In other words, the specificity and clarity that is in international policies such as the Salamanca Statement (UNESCO, 1994), the UNCRPD (2006), the SDG 4 (UN, 2015) and UNESCO (2009) may be sufficient to positively influence inclusion of children with disabilities in ECD centres in primary schools in Zimbabwe.

The school-heads' additional dimension that the absence of a specific policy is not a barrier to inclusive education can also be explained as being informed by a different understanding of inclusive education. The school-heads' view that general education policies that are already there are effective appears to be based on an understanding of inclusive education as something that is attainable once children with disabilities are enrolled in schools. The school-heads, therefore, view the existing Education Act (1996) (Revised 2006) and Disabled Persons Act (1996) (Revised 2006) as adequate for ensuring enrolment of children with disabilities in schools. This understanding of inclusion as enrolment implies that the children with disabilities have to adapt to schools, without the schools themselves having to change to accommodate the learners. Such an understanding of inclusion is not in line with Bronfenbrenner's Ecological Systems Theory informing this study because according to Yorke (2008:4), the theory is premised on the idea that when dealing with barriers to learning, focus must be on the system rather the learner. In light of the ecological theory, the school-heads' focus on the learner having to adapt rather than the school system adapting is likely to result in exclusion of children with disabilities who cannot easily adapt. This explanation supports a study by Ladbrook (2009:57), which revealed that principals failed to conceptualise the ecological theory and what it implies on the policy documents regarding inclusion practices.

Choosing to adapt children with disabilities to the ECD centres negatively affects the implementation of inclusive education. The school-heads' view can, therefore, be explained in terms of a knowledge-gap. According to Daane et al. (2000:18) and Moberg (2000:74), principals may not have a good understanding of inclusive education as they may have received limited training on how to run an inclusive school. This affects their understanding of inclusive education policies and, therefore, negatively influences inclusive education of children with disabilities at ECD level in primary schools. The school-heads' knowledge-gap is in contrast with teachers' and parents' intuitive understanding that there is need for guidance through policies in order for inclusion to be effective at classroom level. The teachers' and parents' understanding is based on direct, day to day contact with children with disabilities which the school-heads may not necessarily have.

The subsequent sub-section discusses how teachers' training influences the inclusion of children with disabilities in early childhood education as revealed by the findings of the present study.

#### **4.8.4 Teachers' training and inclusive early childhood education**

The current section is a discussion of how teachers' training influences the inclusion of children with disabilities in early childhood education as revealed by the findings of the present study. In the discussion, reference is made to available literature on teachers' training and inclusive early childhood education.

It emerged, from the current study, that most participants viewed specialist training as having a positive influence on the inclusive education of children with disabilities at ECD level in primary schools to a large extent. The participants viewed adequate training of teachers in special needs education as equipping teachers with knowledge and skills for effective inclusion at ECD level. Teachers who are equipped with knowledge and skills may be better able to address the needs of children with disabilities at ECD level. The current study's finding that specialist training positively influences inclusion concurs with prevailing literature, for example Odom (2000:7), Oriedo (2003:29), Wangari (2015:23), Majoko (2013:42), NGEC (2016:23), Huang and Damond (2009:5), Okeke (2010:69), Ewa (2016:91), Cagran and Schmidt (2011:82), Hayes and Bulat (2017:22) Crispel and Kaspersky (2019:12), Lindqvist et al. (2020:42) and Ackers (2018:21),

which all found that adequate training of teachers in special needs education equips teachers with knowledge and skills for effective inclusion. However, the current study's finding that specialist training positively influenced inclusive education of children with disabilities contradicts some literature (York-Barr, 2005:29; Hodkinson, 2005:78) which criticised the focus on disability as too narrow and, therefore, exclusionary since disability is only one form of diversity. The possible explanation for this difference is that the contradictory literature unnecessarily restricted training in special needs education to knowledge of disability only. The current study took a broad view of training in special needs education which also encompasses inclusive education and diversity generally.

It also emerged, from the current study, that most teachers are not specially trained in special needs education. The current study's finding that teachers are not specially trained to enable the implementation of inclusive education is consistent with international research, for example in Botswana (Dart, 2007:63; Khan, 2012:109; Mukhopadhyay, 2013:77), South Africa (Engelbrecht & Green, 2001:19; Fakudze, 2012:69; Ntsanwisi, 2008:89; Tshifura, 2012:116; Leser et al., 1997:208; Adewumi, 2019:29), Zambia (Aro & Ahonen, 2011:32), United States (Avramidis et al., 2000:3; Ingen, 2018:16), New Zealand (Purdue, 2009:138) and Hong Kong (Zhang, 2011:14; Wong & Chik, 2016:135), which all found that teachers are not specially trained to enable inclusive education. Similarly, previous Zimbabwean studies, for example Chimhenga (2014:52), Majoko (2016:2), Nyanga and Nyanga (2013:3), Mpofo (2004:336), Mandina (2012:229), Moyo et al. (2012:146), Musengi and Chireshe (2012: 231) and Mpofo and Shumba (2012:327), established that most teachers are not specially trained in special needs education and had too weak facilitation techniques and too limited vocabulary to adequately assist children with disabilities. The finding that teachers do not have training in special needs education also supports Eloff and Kgwete (2007:353), Crispel and Kaspersky (2019:8) and Ackers (2018:17) who found that teachers in mainstream schools need to be trained in teaching methods that are child-centred and in using active and participative learning techniques that improve their confidence and capacity to teach children both with and without disabilities. All these studies revealed that teachers were not trained enough to implement inclusive education. The current study's finding supports the above literature which found that there is lack of specialist training in special needs education for the inclusive education of children with disabilities.

The current study further revealed that school-heads and school-teachers did not view training in ECD as a determinant of high quality in inclusive education. This finding can be explained by the consideration that inclusive education is a specialist area in which knowledge of disabilities is more critical than any other knowledge, such as knowledge of ECD. This finding appears to be informed by an understanding of inclusive education as dealing specifically with children with disabilities only, rather than the generality of diversity and individual differences. Such a disability perspective to inclusive education has been criticised in the contemporary literature, for example Allan (2003:56), York-Barr (2005:29), Hodkinson (2005:78), Green and Engelbrecht (2007:4), which all criticised the focus on disability as too narrow and, therefore, exclusionary since disability is only one form of diversity. Participants in the current study appear to have had this narrow focus premised on remediating medical deficits arising from disability rather than what Hodkinson (2005:79) calls a broader focus on diversity, which would include different learning styles, gender and socio-economic background. This broader focus is congruent with Bronfenbrenner's Ecological Systems Theory informing this study, whose basic tenet is that social environments occur at several levels within which multiple factors are important. Inclusive education is multi-layered (Winzer & Mazurek, 2017:59) and is, therefore, amenable to a broad rather than narrow focus. A broader focus on diversity would have enabled the participating school-heads and school-teachers to appreciate the contributions of ECD training for the inclusion of all children, including those with disabilities and others without disabilities. The importance of this is that, usually, some of the barriers to learning that children with disabilities face do not emanate directly or solely from their disabilities but from their learning styles, gender, socio-economic status, among others. This means that participants wrongly viewed training at ECD level as unimportant for positively influencing the inclusive education of children with disabilities in ECD centres in primary schools in Zimbabwe.

The subsequent sub-section discusses how the type and severity of disability affect the inclusion of children with disabilities in early childhood education as revealed by the findings of the present study.

#### **4.8.5 Type and severity of disability and inclusive early childhood education**



The present sub-section is a discussion of how the type and severity of disability affect the inclusion of children with disabilities in early childhood education as revealed by the current study. In the discussion, reference is made to literature related to type and severity of disability and inclusive early childhood education.

It emerged, from the current study, that severity and type of disability affect the inclusion of children with disabilities in early childhood education. On severity, the study found that participants concurred that the milder the disability, the more willing teachers would be to include children with disabilities in ECD classes. According to all the categories of participants, the milder the child's disability, the less challenges it posed and, therefore, the more acceptable the child was for inclusive education. The finding that the milder the disability the more willing teachers would be to include children with disabilities supports international literature, for example in Britain (Ryan, 2009:190; Nutbrown et al., 2013:45; Lopes et al., 2004:415; Griffiths, 2020:60; Stewart, 2020:47), Sweden (Ludqvist et al., 2015:67; Lindqvist, 2020:62), Hong Kong (Bantu, 2010:7; Yun & Sin, 2014:87; Lai & Gill, 2014:5), India (Narumanch & Bhangava, 2011:128; Singh, 2016:3225), Botswana (Mukhopadhyay et al., 2012:39), Ghana (Alhassan, 2014:143), which all established that the milder the disability, the more likely the child is going to be accepted for inclusion. Similarly, an earlier Zimbabwean study by Maunganidze and Kasayira (2002:75) found that children with mild forms of disabilities were included willingly by teachers in mainstream schools. The current study's finding that the milder the disability was, the less challenge it posed for inclusion and, therefore, the more positively it would affect the inclusive education of children with disabilities at ECD level, therefore, supports prevailing literature.

It also emerged, from the current study, that according to all the categories of participants, the more severe the disability, the more negatively it affected inclusion of children with disabilities. This finding supports the prevailing literature, for example Hilbert (2014:19), Ryan (2009:185) and Nutbrown et al. (2013:40), which all found that parents of children with disabilities were less likely to favour an inclusive programme that served children with severe disabilities. The finding that the more severe the disability, the more negatively it affected inclusion of children with disabilities also supports international literature, for example in Britain (Ryan, 2009:185; Nutbrown et al., 2013:40; Lopes et al., 2004:413; Griffiths, 2020:57; Stewart, 2020:41), Sweden (Ludqvist et al., 2015:63; Lindqvist et al., 2020:78), Hong Kong (Bantu, 2010:4; Yun & Sin, 2014:82; Lai & Gill, 2014:2), India (Narumanch & Bhangava 2011:122), Botswana

(Mukhopadhyay et al., 2012:38) and Ghana (Alhassan, 2014:140), which established that the more severe the disability, the less likely the child is going to be accepted for inclusion. A previous Zimbabwean study Maunganidze and Kasayira (2002:74) also established that the more severe the disability, the less likely the child is going to be accepted for inclusion. The current study's finding that the more severe the disability, the more challenges it posed and, therefore, the more negatively it would affect the inclusive education of children with disabilities at ECD level in primary schools in Zimbabwe, therefore, supports the prevailing literature.

It further emerged, from the current study, that physical disability, epilepsy and hearing impairment were disabilities that teachers were negative about including in ECD classes. All categories of participants concurred that teachers are negative about including children with physical disabilities in ECD. The current study's finding that teachers are negative about including children with physical disabilities supports prevailing literature, for example Heller et al. (1996:36), Eloff et al. (2002: 15), Cahill and Eggleston (1995: 57), Green (2007: 22), Louvet (2007: 47) and Greguol et al. (2018:23), which all established that teachers had concerns about learners with physical disabilities, whom they view as being in constant need of special care for their particular disability and that they can, therefore, not be included in mainstream classes, as it places too much stress on teachers. Physical disabilities include neuromotor impairments such as cerebral palsy and spinal cord disorders, degenerative diseases such as muscular dystrophy, and orthopaedic and musculoskeletal disorders (Heller et al., 1996:36) which are easily identifiable even in early childhood. Physical disabilities may, therefore, be more easily identified and stigmatized in early childhood as compared to less visible disabilities. Harper (1999:60) argues that stigmatisation of individuals with a physical disability is such that it is even present towards children and so this would negatively impact their inclusion in the early years of education. Prevailing literature, for example Cahill and Eggleston (1995:57), Green (2007:22), Louvet (2007:47) and Lindqvist et al. (2020:73), indicates that individuals with physical disabilities are often stigmatised. Prevailing literature, for example Green (2007:27), Harper (1999:54), Lightfoot et al. (1999:73), Weiserbs and Gottlieb (2000:20), also revealed that individuals without a disability may experience discomfort or express sadness towards a person with a physical disability. Such experiences have detrimental effects on children with disabilities, who may internalize the pessimistic feelings of others (Barg et al., 2010:377) thereby negatively affecting inclusive education.

The finding that teachers are negative about including children with physical disabilities contrasts with literature which indicates that learners with physical disabilities are generally thought to be easier to include than learners with disabilities that are more challenging in terms of learning, such as intellectual disabilities (Asola & Obiakor, 2016:220; Sands et al., 2000:256). The ease of including learners with physical disability is due to the fact that they may not necessarily need alterations to the curriculum, but require some modifications to the physical learning environment (Sands et al., 2000:256; Asola & Obiakor, 2016:220). The difference between prevailing literature which found physical disabilities being more acceptable for inclusion and the present study's finding that they are not acceptable for inclusion may be because the present study did not compare physical disability to other types of disabilities. Focus in the present study was on how various types of disability affected inclusion of children with disabilities, without necessarily comparing the different types. In the present study, therefore, despite the self-report quantitative data from educators indicating that the combination of type and severity of disability may have no effect on inclusion, the qualitative data from all categories of participants revealed that teachers were negative about including children with physical disabilities. Teachers who are negative about including children with physical disability would, therefore, negatively affect the inclusive education of children with this type of disability at ECD level in primary schools in Zimbabwe.

The current study also found that the disabling condition of epilepsy was viewed by participants as having needs that were difficult to meet and, therefore, negatively affected inclusive education at ECD level in primary schools in Zimbabwe. Parents reported that their children with epilepsy were prejudiced and discriminated against, as school-teachers were afraid of catching the condition. In these situations, children with epilepsy were unlikely to participate freely and do well in class. The finding that epilepsy was viewed as having needs that were difficult to meet and, therefore, negatively affected inclusion supports prevailing literature, for example Galletti and Sturniolo (2004:24), Wilde and Haslam (1996:64), Eklund and Sivberg (2003:49), McEwan et al. (2004:2) and Barnett and Gay (2016:7), which indicates that about one-third of children with epilepsy underachieve in school and reported experiences of prejudice and discrimination. Although it is unclear, from these studies, whether underachievement was due to the epilepsy, medication for epilepsy or other school factors, it is the prejudice and discrimination that is likely to result in unsuccessful inclusion in education. In the present study, therefore, despite the self-report quantitative data from educators indicating that the combination of type and severity of

disability may have no effect on inclusion, the qualitative data from parents of children with disabilities revealed that teachers were negative about including children with epilepsy. Teachers who are negative about including children with epilepsy would negatively affect inclusive education of children with this type of disability at ECD level in primary schools in Zimbabwe.

It also emerged, from the current study, that the disabling condition of hearing impairment was viewed by participants as having needs that were difficult to meet and, therefore, negatively affected inclusive education of children with disabilities at ECD level in Zimbabwe. Parents reported that teachers were not able to use sign language and did not have appropriate techniques for teaching learners with hearing impairment. The finding that hearing impairment was viewed as having needs that were difficult to meet and, therefore, negatively affected inclusion supports international literature, for example in Nigeria (Ademokoya, 2019:22), Namibia (Bruwer & February, 2019:38), Kenya (Adoyo & Maina, 2019:77), Tanzania (Namirembe, 2019:116), China (Dingqian et al., 2019:290), India (Mandke & Chandekar, 2019:267), Vietnam (Hoa & Woodward, 2019:199), which all found that hearing impairment was viewed as having needs that were difficult to meet and therefore negatively affected inclusion in mainstream schools. Similarly, earlier Zimbabwean studies (Musengi, 2019:138; 2016:42; Musengi & Chireshe, 2012:142), established that hearing impairment was perceived as having needs that were difficult to meet in ordinary schools. All this literature observed that lack of knowledge about sign language was an impediment to learning for children with hearing impairment. In the present study, therefore, despite the self-report quantitative data from educators indicating that combination of type and severity of disability may have no effect on inclusion, the qualitative data from all categories of participants revealed that teachers were negative about including children with hearing impairment. Teachers who are negative about including children with hearing impairment would negatively affect inclusive education of children with this type of disability at ECD level in primary schools in Zimbabwe.

The subsequent sub-section discusses strategies that can be employed for improving the inclusion requirements of children with disabilities in early childhood education as revealed by the findings of the present study.

#### **4.8.6 Strategies for improving the inclusion of early childhood education learners**

The present sub-section is a discussion of strategies that can be employed for improving the inclusion requirements of children with disabilities in early childhood education as revealed by the findings of the current study. In the discussion, reference is made to literature related to strategies for improving the inclusion of early childhood education learners.

In the present study, some participants suggested the provision of special training for teachers as a strategy. Training of teachers could be done as pre-service or in-service continuous professional development and this is consistent with the Global Campaign for Education (2012:78), WHO (2011:57) and Crispel and Kaspersky (2019:12), Lindqvist et al. (2020:42) and Ackers (2018:21), which observed that for inclusive education to adequately cater for the needs of children with disabilities, there is a need for adequate pre-service and in-service training for teachers designed to enhance their knowledge and skills on inclusive education. Training would enable teachers to fully utilize available resources. Training to improve utilisation of resources is in tandem with literature indicating that the availability of resources on its own would not influence inclusion positively (Gronlund et al., 2010:22; Oliva, 2016:17). Gronlund et al. (2010:22) observed that simply availing more resources does not necessarily improve inclusivity in a school. They noted that without appropriate coordination and know-how, the availability of more and more resources could actually lead to negative consequences for inclusive education. Training also enables teachers to know how to partner multiple stakeholders and improve the inclusion requirements of children with disabilities at ECD level. Training for this objective as a strategy concurs with literature indicating that well-coordinated efforts of different partners, including communities, parents and civil society, local and national governments, nongovernmental organisations (NGOs) and funding agencies lead to an increase in the quality of ECD programmes (UNICEF, 2000:10; Myers, 2004:10; Hyde & Kabiru, 2003:35). Partnerships involve a process of mutual collaboration in which all parties contribute according to their expertise, resources and experiences (UNICEF, 2000:12). The different partners symbolise the ecological systems and well-coordinated collaboration impacts positively on the quality of ECD programmes.

It emerged, from the current study, that teachers' training as a strategy would help in adapting the learning environment, using the play-way method, multidisciplinary approach, teaching functional skills and early intervention in order to meet the needs of children with disabilities. The finding of the present study that special training for teachers is a strategy which facilitates addressing the learning needs of children with disabilities is consistent with international literature, for example

in Britain (Nutbrown et al., 2013:23; Odom et al., 2011:54, Obiakor, 2010:3) United States (Follari, 2011:7; Ingen, 2018:16), Australia (Forlin, 2010:32), Hong Kong (Zhang, 2011:10; Wong & Chik, 2016:135), Kenya (Eleweke & Rhodha, 2000:35, Kenyata, 2014:52) and South Africa (Adewumi, 2019:29), which all found that special training for teachers greatly improves inclusive education. Teacher training could, therefore, be used as a strategy to address various inclusive education objectives.

It also emerged, from the current study, that adapting the learning environment was recommended as a useful strategy for meeting the learning needs of children with disabilities at ECD level in primary schools. Participants pointed out that an adapted learning environment would benefit all learners, including those without disabilities. This finding of the current study concurs with studies by Kurtts (2006:17), Rose and Meyer (2002:9), which found that a successful way of promoting an adaptable learning environment was by using a universal design for learning (UDL) as it enables teachers to better engage diverse groups of learners. This is consistent with prevailing literature, for example Obiakor et al. (2010:79), Marriga et al. (2014:26), Bruce et al. (2010:123), Capp (2017:792) and King-Sears (2020:191), which all found that adapting the environment helps in meeting the learning needs of children with and without disabilities in mainstream settings. The implications of UDL are that even without effective disability identification systems, teachers can still support diverse learning needs, even without knowing which learners may have disabilities (Hayes & Bulat, 2017:23). This means that simple shifts in how teaching and learning materials are developed and how classrooms are set up may go far in meeting UDL goals for learners who may have undisclosed invisible types of disabilities such as epilepsy. The current study's finding that adapting learning environment involved the use of multiple strategies for presenting content, use of a variety of materials and teaching to a variety of learning styles supports the literature cited above. Thus, adapting learning environments is a strategy to facilitate the inclusive education of children with disabilities in ECD centres in primary schools in Zimbabwe.

A further finding of the current study is that play is crucial as a strategy in facilitating the inclusive education of children with disabilities at ECD level in primary schools in Zimbabwe. The participants pointed out that non-serious, enjoyable, social and sometimes fantasy activities were equally beneficial to children with and without disabilities in early childhood. This finding of the current study is consistent with prevailing literature for example, Pyle and Danniels (2017):274, Fesseha and Danniels (2016:361), Lindon (2012:38), Linington (2011:10), Agbenyega and Degu

(2011:65), Chikutuma (2013:89), Ailwood (2003:289) and Kwela et al. (2000:164) which all found that play has positive effects in children's cognitive development, learning, peer relationships and emotional well-being. Ailwood (2003:286) explains that play in ECD forms a significant nodal point at which understanding of childhood, motherhood, family, psychology and citizenship collide. Play enhances learning through its rules and is therefore a positive teaching strategy (Ailwood, 2003:289; Rotumoi & Too, 2012:10). From a developmental perspective, play as a teaching method is a primary vehicle and indicator for children's mental growth (Ailwood, 2003:290). In line with Bronfenbrenner's Ecological Systems Theory which informs this study, as children interact with the ecology through play, this promotes cognitive development and maturation. This is consistent with Mulford (2003:12), who observed that play behaviours are characterised by active participation, intrinsic motivation, attention to means rather than ends and freedom from external rules. Since the characteristics of play coincide with the characteristics of inclusion, the present study found that play was a crucial strategy to improve inclusive education of children with disabilities in ECD centres in primary schools in Zimbabwe.

The current study also found that early intervention is an important strategy for facilitating the inclusive education of children with disabilities in ECD in primary schools in Zimbabwe. This finding of the current study concurs with UNICEF (2013:8) and KPMG (2014:6), which both observed that the experiences and opportunities provided in the early years set the foundation for future learning and development. According to WHO (2012:12), the first three years of a child's life are a critical period characterized by rapid development, particularly of the brain and, thus, provide the essential building blocks for future growth, development and progress. UNESCO (2009:17) and Mikami (2020:250) also point out that if children with disabilities are to survive, flourish, learn, be empowered and participate as full citizens, intervention during the first three years of their lives is essential. The above literature is consistent with the current study's finding that early intervention is an important strategy for facilitating inclusive education for children with disabilities in ECD in primary schools in Zimbabwe.

It also emerged, from the current study, that teaching functional skills is a crucial strategy for enabling the inclusive education of children with disabilities in ECD in primary schools in Zimbabwe. School-teachers and parents of children with disabilities pointed out that these learners needed to learn daily living skills or self-care skills, socialisation and emotional adjustment skills, language and communication as well as environmental knowledge. Functional skills teaching

focuses on contextually relevant, real-life activities that will help children with disabilities to learn, live and function adequately at higher levels of learning as well as when they become adults. The finding that teaching functional skills is a crucial strategy for enabling inclusion concurs with prevailing literature, for example Bertills et al. (2018:387), Storey and Miner (2017:3), Baine (1991: 40), Brennan (1995:67) and Moores et al. (2013:4) which all found that a curriculum for children with disabilities should teach functional knowledge and skills in order to be relevant for developing appropriate adaptive behaviour. Moores et al. (2013:4) found that a functional skills teaching approach enables a child to accomplish particular tasks in the local environment rather than to promote change in impairment. This is in tandem with Bronfenbrenner's Ecological Systems Theory orienting this study as it conceptualizes inclusive education as environment-focussed rather than individual-focussed. The current study, therefore, found that the teaching of functional skills is an important strategy that can be used to lessen the dependence of children with disabilities on non-disabled peers and so improve inclusive education in ECD in primary schools in Zimbabwe.

The current study also revealed that a multidisciplinary approach was suggested by participants as a strategy that is likely to improve the inclusion of children with disabilities in ECD in primary schools in Zimbabwe. It was pointed out that inclusion succeeds where there is a culture of collaboration among different professionals in problem-solving, in order to improve education for children with disabilities. The finding that a multidisciplinary approach was a strategy that is likely to improve the inclusion of children with disabilities is consistent with prevailing literature, for example Mieghem et al. (2020:675), Miles and Ainscow (2011:77), Booth and Ainscow (2011:14) and Dyson and Millward (2000:17), which all found that multidisciplinary collaboration around resolving barriers to participation and learning experienced by learners with disabilities would more effectively widen participation and achievement of these learners.

It also emerged, from the present study, that a key strategy to facilitate inclusion of learners with disabilities would be to have a budget for the payment of special allowances for teachers and buying inclusive materials for learners with disabilities in ECD in primary schools. This finding supports studies by Chireshe (2013:230) and Sukhraj (2008:12), which observed that various countries in Africa cited the lack of financial resources as a primary reason for delaying the implementation of an inclusive education system. The strategy suggested in the current study resonates with Hayes and Bulat (2017:25) who note that the challenge of having no government



budgets for inclusive education and relying heavily on non-governmental organisations (NGOs) is that there will be large discrepancies in the quality of services provided, as only affluent families may receive appropriate services because of high tuition costs. The current study's finding on the strategy of having a budget to support inclusive education supports UNICEF (2012:15) which observed that although an initial investment will be needed especially in times of reform and transition, the inclusive education model will be more cost-effective in the long term. The finding of the current study, therefore, was that an adequate budget for sustaining special responsibility allowances and material resources would be a key strategy for improving the inclusive education of children with disabilities in ECD in primary schools in Zimbabwe.

#### **4.9 SUMMARY**

This chapter has presented, analysed and discussed the findings from the empirical study. Findings from the empirical study were presented in the context of sub-questions posed in Chapter 1. It emerged, from the study, that the school-teachers, school-heads and parents of children with disabilities raised factors such as a lack of resources, inadequate teacher training, negative attitudes and lack of mandatory policies as negatively affecting the implementation of inclusive education for children with disabilities in ECD in primary schools in Zimbabwe.

The subsequent chapter presents the summary, conclusions and recommendations of the study.

## **CHAPTER 5: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS**

### **5.1 INTRODUCTION**

The aim of this study was to establish the factors affecting the inclusion of children with disabilities in ECD in primary schools in Masvingo Province, Zimbabwe. The previous chapter presented, analysed and discussed the findings from the study. This chapter presents the summary of the study, conclusions and recommendations from the study.

### **5.2 REVIEW OF THE RESEARCH PROBLEM**

Globally, disability prevalence is on the increase (UNICEF, 2013:36; Berns, 2010:7; World Bank, 2011:10) and primary school net attendance rate for all children is 90% in Masvingo region which is the highest in Zimbabwe (UNICEF, 2014:2). However, Chapter 1 revealed that children with disabilities have lower school attendance rates than children without disabilities (UNESCO, 2015:65; UNESCO, 2017:89) and there is a shortage of places in special schools for children with disabilities (Chitiyo & Wheeler, 2004:14; Charema, 2010:45). Children with disabilities have therefore, begun to attend mainstream primary school early childhood centres in increasing numbers (Charema, 2010:46). Internationally, different researchers have investigated factors affecting inclusion of children with disabilities in early childhood education in primary schools (Vaz, 2015:19; Ondongo & Davidson, 2016:32; Mangope, 2017:102; Crispel & Kaspersky, 2019:12; Henry-Buckmire, 2020:233). Existing Zimbabwean studies on the inclusive education of children with disabilities in mainstream schools tended to focus on single factors, without looking at various other factors that affect inclusion while some excluded policy and stakeholders' issues as factors (Mpofu & Shumba, 2012:72; Majoko, 2016:12). As was highlighted in Chapter 1, these studies also focused on other parts of Zimbabwe without focusing on Masvingo Province, which is an educational region that UNICEF (2014:2) reported as having the highest primary school net attendance rate in Zimbabwe. The above scenario prompted this research, as it was intended to find out the factors affecting the inclusion of children with disabilities in ECD in primary schools in Masvingo Province, Zimbabwe.

The following section summarises literature related to this study.

### **5.3 SUMMARY OF RELATED LITERATURE**

The summary of related literature is presented according to sub-research questions of the present study.

#### **5.3.1 Resources and inclusion of children with disabilities in early childhood education**

Research has established that resources play a key role in inclusive early childhood development (Zhang, 2011:14; Cheuk & Hatch, 2007: 695). Literature from developed and developing countries has confirmed that lack of resources is the reason for failure to include learners with disabilities and that resources for inclusive education have not been infused into general education so as to ensure effective teaching in inclusive classes (Mbibeh, 2013:57; Peter & Nderitu, 2014:24). Previous Zimbabwean studies also found that shortage of resources was an impediment to the implementation of inclusive education for children with disabilities (Mpfu et al., 2007:236; Chimedza, 2008:129; Mavundukure & Nyamande, 2012:12; Chimhenga, 2016:37).

#### **5.3.2 Stakeholders' attitudes and inclusion of children with disabilities**

Attitudes and beliefs of stakeholders in early childhood education are reportedly the most significant factor in determining the inclusion of children with disabilities worldwide since people's perceptions determine their action (Chambers & Forlin, 2010:74). Literature from developed and developing countries shows that the most frequently reported barriers to early childhood inclusion that have remained largely unchanged over the past several decades are attitudes and beliefs (Ryan, 2009:278; Shatri, 2017:62). Zimbabwean studies revealed that most teachers had negative attitudes and, therefore, would not accept learners with disabilities in their classrooms (Barnatt & Kabzems, 1992:132; Majoko, 2016:2).

#### **5.3.3 Policies and the inclusion of children with disabilities**

The widespread proliferation of laws and policies on disabilities, globally, has seen increased attention being paid to the education of children with disabilities (Kim, 2014:985; Lamport et al., 2012:60), with some countries experiencing accelerated growth of early intervention programmes

in inclusive education following the enactment of laws. Policies tend to be embedded in particular models of disability and most policies in African countries are embedded in the individual deficit model of disability (Tesemma, 2011:41). Although Zimbabwe does not currently have any specific policy or legislation in place for inclusive education, it does have a range of policies that are meant to support and promote the inclusion of children with disabilities (Deluca et al., 2014:5). Inclusion in ECD in Zimbabwe is supported by these policies and legislations that mandate the rights of children with special needs to inclusion (Mandina, 2012:13; Mushoriwa, 2002:48) and ECD programmes (Chikutuma & Mawere, 2013:54).

#### **5.3.4 Teacher training and the inclusion of children with disabilities**

Teachers are the key to successful inclusive education programmes (Haskell, 2000:3; Chimhenga, 2014:24). This is because globally, the practice of teaching is linked to learner achievement (Tope, 2012:5; Tella, 2008:22) and underpinned by theoretical perspectives which come out of teachers' training and which range from positivist to constructivist theories of how children learn (Brown & Paatsch, 2010:130). Teaching approaches adopted in an inclusive classroom are, therefore, dependent on the theoretical orientation of the training programme a teacher underwent. International literature stressed the importance of continued professional development for all who work with young children in inclusive education (Nutbrown, 2012:49; Hunt & Marshall 2012:7). Many studies in Zimbabwe showed that teachers' lack of knowledge and pre-service training in inclusive education is a key barrier to its implementation (Majoko, 2016:2; Chireshe, 2013:227; Chimhenga, 2014:44).

#### **5.3.5 Type and severity of disability and the inclusion of children with disabilities**

Type and severity of disability are reportedly some of the most significant factors in determining the inclusion of children with disabilities worldwide (Ryan, 2009:185). Internationally, research has found that the nature and type of disability can influence attitudes towards inclusion (Florian & Linklater, 2010:276; Slentz, 2010:28; Odongo & Davidson 2016:10). Studies on the effects of severity of disability on inclusion have shown that teachers appear more willing to include children with mild disabilities because the more severe the child's disability, the more challenges it poses to inclusion (Huang, & Diamond, 2009:38; Ludqvist et al., 2015). Zimbabwe is not an exception in that studies also revealed that the type and severity of disability pose great challenges to the

inclusion of children with disabilities in mainstream schools (Barnett & Kabzems, 1992:36; Tafirei et al., 2013:14).

### **5.3.6 Strategies for improving inclusion of children with disabilities**

Educating learners with disabilities in mainstream settings requires instructional approaches that promote learner achievement and positive social psychological outcomes (Florian, 2009:39; Putnam, 2009:81). The notion of specialist pedagogy that mainstream teachers need to have in order to include learners with special educational needs is widely debated in the psychological literature (Meggitt, 2015:277; Florian, 2009:52). William et al. (2014:59) posit that regular schools with an inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities and achieving education for all. International studies found that the school, home and community environments should be accessible (Obiakor et al., 2010:79; Lundqvist et al; 2015:3) as the physical structure of the environment should be barrier free to allow learner participation. Zhang (2011:10) established that environmental modifications can take many forms in order to provide access and opportunity to promote independence and empowerment to learners.

The next section summarises the research methodology followed in the present study.

## **5.4 SUMMARY OF RESEARCH METHODOLOGY**

The present study used a mixed methods research approach. A survey design was adopted in order to facilitate collection and analysis of data on the inclusion of children with disabilities in early childhood education centres in primary schools in Masvingo, Zaka and Bikita districts of Masvingo Province in Zimbabwe. The present study had 72 purposively sampled participants who were 36 teachers, 24 parents and 12 head-teachers. Questionnaires were personally administered on, and interviews conducted with, these participants. The researcher was guided by the ethical responsibilities and legal constraints that accompany the gathering and reporting of information to protect the rights and welfare of the participants involved in the research study. Quantitative data were analysed using the Chi-square test and presented in tables, while qualitative data were analysed thematically and presented in narrative form.

The next section presents a summary of the findings of this study.

## **5.5 SUMMARY OF THE FINDINGS**

The summary of findings is presented according to sub-research questions of the study.

### **5.5.1 Sub-research question 1: How do resources influence the inclusion of children with disabilities in early childhood education in Zimbabwean primary schools?**

The current study revealed that the unavailability of disability-friendly resources was negatively influencing the inclusion of children with disabilities in ECD centres to a large extent. Participants were agreeable that without adequate resources, schools cannot include more children with disabilities. The lack of appropriate support structures in schools was viewed as negatively affecting inclusion of children with disabilities at ECD level. This lack of appropriate support structures was compounded by low budgetary allocations, resulting in a lack of adequate funds to buy assistive devices and play materials in schools. The current study also found that despite some school-heads and teachers viewing the provision of resources as a government responsibility which was not being fulfilled, many of them had a knowledge-gap on the availability of government's additional funds for schools enrolling children with disabilities and so available additional funds were not being requested. In turn, this implies that no additional resources were being sourced for children with disabilities, thereby influencing the inclusion of children with disabilities negatively. In combination, these deficiencies were a big barrier to the inclusion of children with disabilities in ECD. The present study also revealed that availability of disability-friendly resources would positively influence the inclusion of children with disabilities in ECD. Resources were viewed as greatly influencing the inclusion of children with disabilities in early childhood education in primary schools in Zimbabwe.

### **5.5.2 Sub-research question 2: To what extent do attitudes of stakeholders affect the inclusion of children with disabilities in early childhood education in Zimbabwe?**

The study revealed that stakeholders' attitudes affect the inclusion of children with disabilities in ECD to a large extent. Negative attitudes by stakeholders were negatively affecting the inclusion of children in ECD. Government and school-heads' lack of support was said to be indicative of negative attitudes towards inclusive education for children with disabilities in ECD. The negative attitudes of some school-heads not only resulted in exclusion of children with disabilities, but also determined their subordinates' negative attitudes towards implementation of inclusive education for children with disabilities in ECD. Negative attitudes by teachers were viewed as emanating from their lack of appropriate knowledge and skills to handle learners with disabilities, although the school-teachers usually found other reasons for excluding such learners from their classes. The participating school-teachers concurred with the view that lack of knowledge about disability contributed to their unwillingness to include children with disabilities in ECD. The current study further revealed that some parents of children with disabilities and some peers without disabilities in school had negative attitudes, which was a factor negatively affecting inclusive education at ECD level. It also emerged, from the study, that positive attitudes by stakeholders affect inclusion positively, as positive mind-sets enable children with disabilities to be provided opportunities to participate in learning. Attitudes, therefore, influenced inclusion of children with disabilities at ECD level to a large extent.

### **5.5.3 Sub-research question 3: To what extent do policies influence the inclusion of children with disabilities in early childhood education in Zimbabwe?**

The study revealed that policies influence the inclusion of children with disabilities in early childhood education to a large extent. There were no mandatory policies specific for inclusive education and this was viewed by most participants as a barrier to the inclusion of children with disabilities in ECD in Zimbabwean primary schools. The lack of mandatory policies meant that there was no legally-binding framework for effective and efficient planning, development, management and implementation of inclusive education for children with disabilities in the ECD centres in primary schools. On a different dimension, most school-heads viewed general education policies as adequate for enhancing provision of inclusive education as they had an understanding of inclusive education as something that is attainable once children with disabilities are enrolled in schools. They viewed the success of inclusion of children with disabilities in ECD as dependent on clear, detailed policies on which they were consulted, regardless of whether these policies were

specific to inclusive education or were general education policies. The current study further established that school based policies were not in place and that this showed lack of commitment to complement government policies and legislation in order to positively influence the inclusion of children with disabilities at ECD level in Zimbabwe.

#### **5.5.4 Sub-research question 4: How does teacher training influence the inclusion of children with disabilities in early childhood education in Zimbabwean primary schools?**

It emerged, from this study, that most teachers are not specially trained in special needs education and that such lack of training negatively influences inclusion of children with disabilities in Early Childhood Education. Having specialist training was viewed as having a positive influence on the inclusive education of children with disabilities in ECD in primary schools. Adequate training of teachers in special needs education equipped teachers with knowledge and skills to address the needs of children with disabilities at ECD level. The current study further revealed that training in ECD was not viewed as a determinant of high quality in inclusive education, as inclusive education was understood as dealing specifically with children with disabilities, rather than the generality of diversity and individual differences.

#### **5.5.5 Sub-research question 5: How does the type and severity of disability affect the inclusion of children with disabilities in early childhood education in Zimbabwe?**

The study revealed that type and severity of disability affect the inclusion of children with disabilities in Early Childhood Education. It was found that teachers were negative about including children with physical disability, epilepsy and hearing impairment in ECD classes. It further emerged, from the current study, that the milder the disability, the less challenges it posed and therefore the more acceptable the child was for inclusive education. Conversely, the more severe the disability, the more negatively it affected inclusion of children with disabilities.

#### **5.5.6 Sub-research question 6: What strategies can be employed to improve inclusion requirements of children with disabilities at ECD level in Zimbabwean Primary Schools?**



It emerged, from the study, that strategies to improve the inclusion requirements of children with disabilities at ECD level in Zimbabwean Primary Schools included: special pre-service and in-service training of teachers in special needs education, adapting the learning environment to meet the learning needs of children with disabilities, utilizing play to facilitate active participation, early intervention, teaching functional skills, using a collaborative, multidisciplinary approach and providing a budget for inclusive education.

The next section draws conclusions from the study's findings.

## **5.6 CONCLUSIONS**

The main thrust of this study was to establish the factors affecting the inclusion of children with disabilities in ECD in primary schools in Masvingo Province, Zimbabwe. Basing on the findings of this study, it can be concluded that there are several factors that positively influence the inclusion of children with disabilities in ECD when available and negatively influence when unavailable in primary schools. The lack of resources because of unavailability of funding to procure play materials, assistive devices and other disability-friendly resources negatively influenced the inclusion of children with disabilities because without appropriate support structures, children with disabilities were unlikely to be able to freely participate in play activities and so would be isolated. Negative attitudes by stakeholders, such as government, school-heads, some teachers and parents of children with disabilities negatively affected the inclusion of children in ECD. Teachers were negative about including children with physical disability, epilepsy and hearing impairment in ECD classes. There was also a lack of mandatory policies on inclusion, meaning that there was no legally-binding framework for effective and efficient planning and implementation of inclusive education for children with disabilities in the ECD centres in primary schools. Existing general education policies were also not detailed enough to give proper guidance for implementation of inclusive education. This was compounded by a lack of specialist training in special needs education, which negatively affected the inclusive education of children with disabilities in early childhood. Without appropriate training, teachers were negative about including children with physical disabilities, epilepsy and hearing impairment and the more severe the disability was, the more unlikely it was for the child to be included in class. Various strategies

were suggested in order to improve the inclusion requirements of children with disabilities in ECD classes in primary schools. The next section discusses the recommendations.

## **5.7 RECOMMENDATIONS**

From the findings of this study, recommendations related to policy and practice that may improve the inclusion requirements of children with disabilities in ECD in primary schools have been made.

### **5.7.1 Policy**

This study recommends a policy that mainstreams disability so that disability studies could become part of the curriculum throughout the education system. This means that, all schools, colleges and universities would have disability studies as part of their curriculum. The inclusion of disability studies in education may instil greater sensitivity on the special educational needs of learners with disabilities to all peers, teachers, school-heads and parents of learners. Furthermore, the study recommends the enactment of detailed, unambiguous, bottom-up policies which may help to improve the inclusion of children with disabilities at ECD level in primary schools. There is also a need for legislation that makes it mandatory for all teachers to acquire professional training in special needs education or inclusive education.

### **5.7.2 Practice**

#### *5.7.2.1 Provision of resources*

The study recommends that government budgets for, and provides disability-friendly resources to all primary schools so as to accommodate learners with disabilities in inclusive schools. Learners with disabilities have more needs than non-disabled peers and, therefore, require more resources which government and other stakeholders need to provide in order to avoid punishing parents of children with disabilities by requiring them to foot the bills for the additional resources. It is also very important for schools to identify locally available resources which can be improvised and adapted to become disability-friendly in order to facilitate inclusive education. There is also need

for schools to devise ways of monitoring and supervising the utilization of resources that would have been provided for children with disabilities in order to ensure efficient use and therefore inclusion at ECD level in primary schools.

#### *5.7.2.2 Disability sensitization*

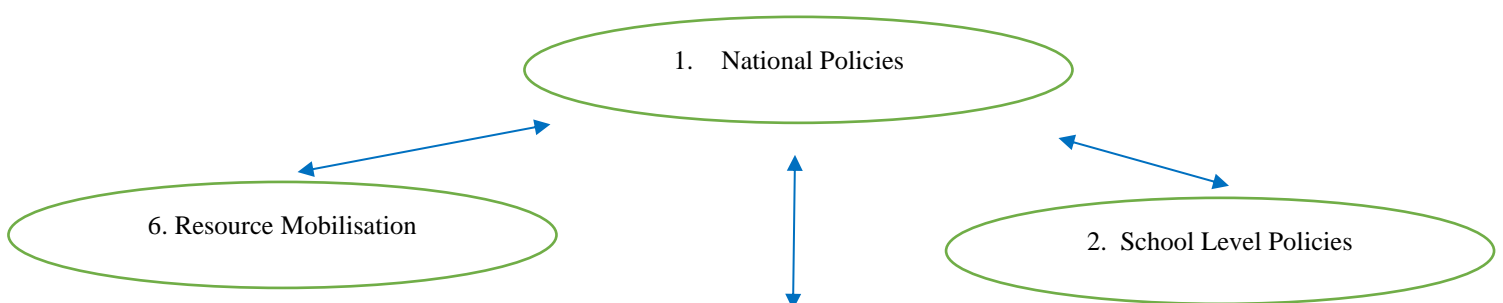
The study recommends that schools and stakeholders intensify disability-awareness campaigns in local communities and in the media in order to develop positive attitudes towards disability in society. Schools can cultivate and nurture positive attitudes in parents, teachers and learners without disabilities towards children with disabilities through school-assembly presentations and workshops. It is important for more people to become aware of the potential and rights of children with disabilities. Successful people with disabilities could be used as models to motivate communities to realize the potential of children with disabilities. Disability advocacy groups can also participate in lobbying government, schools, politicians and local organizations to accord children with disabilities dignity, respect and equitable treatment in mainstream schools in order for them to be included.

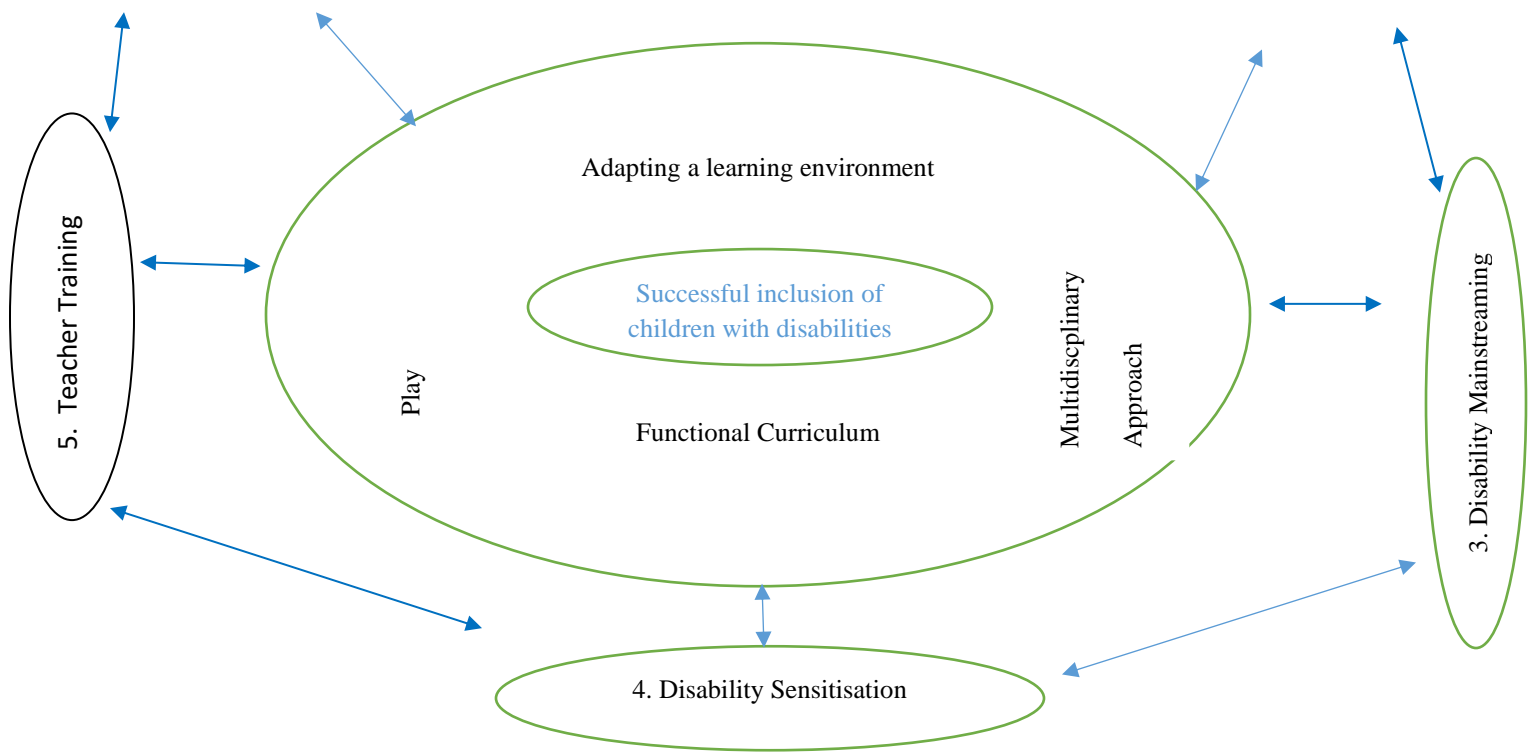
#### *5.7.2.3 Training of teachers*

The study recommends that all teachers be trained in special needs education and inclusive education at both pre-service and in-service levels. Continuous professional development is very important since the area of inclusive education for children with disabilities is continually changing. Training of teachers needs to take a broad, diversity approach that will allow the teachers to generalize principles learnt about handling one aspect of diversity to emerging diversities that they may not have encountered in training. Training needs to cover as many different types of disabilities as possible and also equip teachers with skills to be able to accommodate children with severe disabilities.

### **5.7.3 A proposed model for improving the inclusion requirements of children with disabilities**

The model being proposed by the current researcher, E. Musengi (2020), is a reflection of the suggestions from the participants, the literature surveyed for this study and the theoretical framework that guided this study, in order to improve the inclusion requirements of children with disabilities at ECD level in primary schools. The proposed model was designed based on Bronfenbrenner's (2005:15) Ecological Systems Theory that informed this study. Bronfenbrenner's (2005:15) theory analyses children's development within the context of a system of reciprocal relationships in the child's environment. As Hornby (2011:27) pointed out, the theory propounds that individual human development and behaviour cannot be understood independently of the social context in which it occurs as the social environment influences behaviour and is reciprocally influenced by behaviour at several levels. Special features of E. Musengi's (2020) proposed model include emphasis on reciprocal interaction across and within Bronfenbrenner's levels. Across levels, policy development at mesosystem level reciprocally interacts with policy development at macro system level to ensure that the two are aligned and ecologically valid. Within the exosystem level, pre-service teacher training reciprocally interacts with in-service teacher training to ensure seamless continuous professional development that responds to the rapid changes in inclusive education. Catering for these rapid and continuous changes in inclusive education over time takes cognisance of Bronfenbrenner's chronosystem. Similarly, disability mainstreaming reciprocally interacts with disability sensitization at macro system level in order to fill any gaps that may be left at exosystem, mesosystem and microsystem levels as changes in conceptualization of inclusive education and disabilities occur over time. These special features which are meant to improve the inclusion requirements of inclusive education for children with disabilities are illustrated in the proposed model in Figure 5.1.





**Figure 5.1: A proposed E. Musengi (2020) model for improving the inclusion requirements of children with disabilities at ECD Centres in primary schools**

The proposed model in Figure 5.1 shows that all the factors influencing inclusive education for children with disabilities are linked and interact with each other in such a way that no single factor should be treated in isolation. This implies that the suggested solutions, if implemented individually, cannot result in holistic inclusive education to solve the problem. Inclusive education is a holistic concept that affects and is affected by various factors, which all need to be accounted for in order to effectively include children with disabilities in ECD in primary schools. The proposed model’s components are briefly analysed below.

**Component 1: Development of national policy on inclusive education of children with disabilities**

National policy on inclusive education of children with disability needs to be developed in line with children's rights as enshrined in the Constitution of Zimbabwe, the Education Act (2006), Disabled Persons Act (2006) and the Child Protection and Adoption Act (2006) at macro system level. At that same macro system level, national policy development on inclusive education can also borrow best practices from international disability protocols such as the UNCRPD (2006). In terms of content, the study recommends a national policy that advocates for equity based on one's special educational needs. In terms of form, the study recommends a national policy that is not only guided by legislation and international disability protocols but also interacts and aligns with the needs of local community stakeholders as articulated in lower or microsystem level policies at school level.

### **Component 2: Development of school policies on inclusive education of children with disabilities**

School or microsystem level policies on inclusive education of children with disabilities need to be based on analysis of how the special educational needs of children with disabilities interact with their parents, peers without disabilities, teachers and members of the local community. This is line with Ball et al. (2011:48) who observed that various stakeholders are policy subjects and policy actors at the same time. Therefore, in terms of content, the study recommends school policies that focus on meeting needs of all school community members equitably. In terms of form, the study recommends school policies that are not only guided by macro system or national policy and legislation but also interact with and are therefore aligned to the microsystem and mesosystem level needs of local stakeholders as articulated in needs analyses conducted within schools and communities. Participatory approaches, therefore, need to be used in developing school policies for inclusive education of children with disabilities in line with Ball et al. (2011:48).

### **Component 3: Disability mainstreaming**

The inclusion of disability studies from ECD to tertiary level may be used as a means to influence a change in attitudes of parents, teachers, school-heads, non-disabled peers and society in general on disability issues which affect the inclusive education of children with disabilities. Many societies in the world treat children with disabilities as second class citizens (Barnes, 1992:12; Cunningham, 2016:25). In order to reverse such second class treatment, there is need to capitalize on understanding the children's development within the context of a system of reciprocal relationships that form the child's environment as espoused by Bronfenbrenner's bio-ecological systems theory which underpins this study. Attitudes towards children with disability cannot be understood independently of the social context in which they occur as the social environment influences and is influenced by those attitudes at several levels. Disability issues, therefore, need to be mainstreamed so that they become a part of everyday social life for everyone at various levels. Education as part of the secondary socialisation process can be used as a tool to mainstream disability and reverse negative attitudes. Attitudes of teachers, parents, school-heads and non-disabled peers can be improved when disability issues are mainstreamed into all other policies and practices.

#### **Component 4: Disability sensitization and early intervention**

The influence of cultural beliefs in the macro system and exosystem levels where children with disabilities are regarded as inferior to children without disabilities (Cunningham, 2016:25) can be changed through workshops, paper and electronic media such monographs, newspaper columns, magazines and electronic journals, the internet and television programmes that raise awareness and acceptance in families and the community in general that all children have equal value (Kulkarni et al., 2018:45). Respected members of society such as chiefs, village heads and church leaders may, therefore, be involved in disability-awareness campaigns that encourage equity and maintaining the cultural fabric of the nation. Available media may be helpful in reinforcing the need for the deconstruction of negative beliefs about disabilities. Such disability campaigns need to be complemented by intensified early intervention programmes in which infants with disabilities and their parents participate. Guralnick (2007:73) explains that early intervention is important as it helps children with disabilities during critical or sensitive periods of their physical, social and mental development before enrolment in early childhood education in primary schools. Early intervention, therefore, helps to prevent children's impairments from developing into handicaps.

### **Component 5: Teacher training**

At the exosystem and mesosystem levels, all who aspire to become teachers in schools need to undergo several modules in special needs education, disability studies and inclusive education. Similarly, all serving teachers need to undergo training in special needs education, disability studies and inclusive education. Training of teachers needs to take a broad, diversity approach. A broad, diversity approach allows the teachers to generalize principles learnt about handling one aspect of diversity to emerging diversities that they may not have been encountered in training (Allan, 2003:19; York-Barr, 2005:29; Hodkinson, 2005:78; Green & Engelbrecht, 2007:4). Training needs to cover as many different types of disabilities as possible and also equip aspiring teachers with skills to be able to accommodate children with severe disabilities (Winzer & Mazurek, 2017:59). In-service training may also need to interact with pre-service training and teachers' experiences in schools in order to remove any bad teaching habits that may have developed over the years (Forlin & Sin, 2017:1117). The proposed model advocates immersion into organizations of people with disabilities in order to fully appreciate the social justice intentions of inclusive education at early childhood level (Shaefer, 2019). The training would also need to incorporate strong early intervention and early childhood development principles and practices. Key aspects that would need to be covered include how to adapt the learning environment, incorporating play, a functional curriculum and multidisciplinary approach to teaching children with disabilities.

### **Component 6: Resource mobilization**

The study recommends that at the macro system level, government budgets for, and provides disability-friendly resources to all primary schools so as to accommodate learners with disabilities in inclusive schools. Learners with disabilities have more needs than non-disabled peers and, therefore, require more resources which government and other stakeholders need to provide in order to avoid punishing parents of children with disabilities to pay for the additional resources. This macro system support would then interact with and complement local efforts in which local communities and schools also engage NGOs, for assistance in procuring much needed resources for inclusive education. In line with Hayes and Bulat (2017), locally available resources also need to be explored by communities and schools so that these resources are adapted and improvised in place of unavailable commercial resources. In line with Gronlund et al.'s (2010:22) and Oliva's



(2016:17) finding that schools often have more resources than they actually use for inclusive education, whatever resources are mobilized would need to be fully utilized to ensure that they effectively provide the service that they are supposed to.

## **5.8 CONTRIBUTION OF THE STUDY**

The current study extends the breadth and depth of the body of knowledge, attitudes, skills and understandings regarding inclusive education of children with disabilities at ECD centres in primary schools. This body of knowledge, attitudes, skills and understandings will assist and support inclusive education stakeholder individuals, organizations and institutions such as school-heads, children with disabilities, their parents, teachers, non-disabled peers, the government and the community in strategizing on resolving challenges associated with inclusive education at ECD centres in primary schools. The study is intended to be a reference or manual to deal with matters affecting children with disabilities in ECD centres. The results of this study can be used as a springboard for further research.

## **5.9 RECOMMENDATIONS FOR FUTURE RESEARCH**

This current study focused on one province, so it is very important to study all the other provinces in Zimbabwe in order to establish whether the findings can be generalised. An in-depth study on the African and Zimbabwean cultural beliefs that influence the inclusion of learners with disabilities from early childhood education to tertiary education is critical in order to find a lasting solution that can improve inclusive education. Comparative studies which include other countries in Africa and in developed countries are necessary to find out whether the same situation prevails in other countries.

## **5.10 FINAL COMMENTS**

The study successfully established the factors affecting the inclusion of children with disabilities in ECD centres in primary schools in Masvingo Province, Zimbabwe. The experiences of school-heads, school-teachers and parents of children with disabilities revealed how the factors affected the inclusion of children with disabilities. The inclusion of children with disabilities was found to be affected by a range of factors such as lack of disability-friendly resources that were not being sought from government as most school-heads did not know about government's allocation of additional funding for schools with children with disabilities. Negative attitudes towards disability in general, and specific types and severities of disability in particular, as well as lack of detailed policies on inclusive education and lack of appropriate training in inclusive education, were all factors that colluded with lack of resources to negatively affect the inclusion of children with disabilities in ECD centres in primary schools in Zimbabwe. This study suggested possible solutions to improve the inclusion requirements of children with disabilities. The suggested solutions pertain to all stakeholders. Emphasis was placed on grassroots participation of teachers, school-heads and parents of children with disabilities in formulating and implementing inclusive education policies at school and national levels.

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#### APPENDIX A: ETHICS CLEARANCE CERTIFICATE

UNISA COLLEGE OF EDUCATION ETHICS REVIEW COMMITTEE

Date: 2019/04/17

Ref: **2019/04/17/58561242/13/MC**

Name: Mrs E Musengi

Student no: 58561242

Dear Mrs Musengi

**Decision:** Ethics Approval from  
2019/04/17 to 2024/04/17

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**Researcher(s):** Name: Mrs E Musengi  
E-mail address: musengie@yahoo.com  
Telephone: +263 77 224 7640

**Supervisor(s):** Name: Prof R Chireshe  
E-mail address: chireshe@yahoo.co.uk  
Telephone: +263 77 730 8244

**Title of research:**

**Factors affecting the inclusion of children with disabilities in early childhood development centres in Masvingo Primary Schools, Zimbabwe**

**Qualification:** PhD in Inclusive Education

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Thank you for the application for research ethics clearance by the UNISA College of Education Ethics Review Committee for the above mentioned research. Ethics approval is granted for the period 2019/04/14 to 2024/04/17.

*The **low risk** application was reviewed by the Ethics Review Committee on 2019/04/14 in compliance with the UNISA Policy on Research Ethics and the Standard Operating Procedure on Research Ethics Risk Assessment.*

The proposed research may now commence with the provisions that:

1. The researcher(s) will ensure that the research project adheres to the values and principles expressed in the UNISA Policy on Research Ethics.



2. Any adverse circumstance arising in the undertaking of the research project that is relevant to the ethicality of the study should be communicated in writing to the UNISA College of Education Ethics Review Committee.
3. The researcher(s) will conduct the study according to the methods and procedures set out in the approved application.
4. Any changes that can affect the study-related risks for the research participants, particularly in terms of assurances made with regards to the protection of participants' privacy and the confidentiality of the data, should be reported to the Committee in writing.
5. The researcher will ensure that the research project adheres to any applicable national legislation, professional codes of conduct, institutional guidelines and scientific standards relevant to the specific field of study. Adherence to the following South African legislation is important, if applicable: Protection of Personal Information Act, no 4 of 2013; Children's act no 38 of 2005 and the National Health Act, no 61 of 2003.
6. Only de-identified research data may be used for secondary research purposes in future on condition that the research objectives are similar to those of the original research. Secondary use of identifiable human research data requires additional ethics clearance.
7. No field work activities may continue after the expiry date **2024/04/17**. Submission of a completed research ethics progress report will constitute an application for renewal of Ethics Research Committee approval.

Note:

The reference number **2019/04/17/58561242/13/MC** should be clearly indicated on all forms of communication with participants, as well as with the Committee.

College of Education

Kind regards,

UNISA 

**APPENDIX B: QUESTIONNAIRE FOR PRIMARY SCHOOL-TEACHERS TEACHING ECD A & B LEARNERS WITH DISABILITIES**

This questionnaire seeks your opinion on factors affecting the inclusion of children with disabilities in Early Childhood Development Centres. The questionnaire is being used in research study is part of the researcher's Doctor of Education Degree studies at the University of South Africa (UNISA). This study intends to improve the inclusion of children with disabilities in regular primary schools at ECD level. You were selected to participate in this study because you are involved in education of primary school children with disabilities within an inclusive environment at ECD level in Zimbabwe. You should not write your name on the questionnaire since the final research report will not identify any individual so that no responses can be traced back to any

participant. All information provided by you will be treated as strictly confidential. There are no right or wrong answers. The researcher is only interested in your opinions. You are therefore kindly requested to complete the questionnaire as honestly as you can. Thank you for taking time to complete the questionnaire.

### SECTION A: BIOGRAPHICAL DATA

Kindly fill in the blank spaces or tick the appropriate box.

#### 1. Age

20- 25 years	1
26-30 years	2
31-35 years	3
36-40 years	4
over 40 years	5

#### 2. Gender

Male	1
Female	2

#### 3. Highest Professional Qualifications

Certificate in education	1
Diploma in education	2
Bachelor's degree	3
Master's degree	4
Doctors degree	5
Other specify	6

#### 4. Teaching experience

5 years and below	1
6 -10 years	2
11-15 years	3
Over 15 years	4

5. Grade being taught

ECD A	1
ECD B	2
Grade one	3
Grade two	4

**SECTION B: RESOURCES AND INCLUSIVE EARLY CHILDHOOD DEVELOPMENT**

**To what extent do the following statements apply to resources in inclusive Early Childhood Development inclusion?** Please tick the appropriate box that best represents your opinion on the influence of resources on inclusive Early Childhood Development.

Key: 1.SA-Strongly Agree 2. A-Agree 3.U- Undecided 4. DA- Disagree 5. SDA- Strongly Disagree

Statement	SA	A	U	DA	SDA
1. The success of inclusion in ECD Centres depends on availability of resources.	1	2	3	4	5
2. Inadequate resources are a barrier to the success of inclusion in ECD Centres.	1	2	3	4	5
3. Without appropriate resources schools cannot include all children with disabilities in ECD.	1	2	3	4	5

4. Low national budgets allocated to children with disabilities cannot sustain provision of assistive devices to them.	1	2	3	4	5
5. Lack of human resources leads to failure to include children with disabilities in ECD Centres. .	1	2	3	4	5
6. Use of appropriate assistive devices leads to the success of inclusion in ECD Centres	1	2	3	4	5
7. Lack of material resources leads to failure to include children with disabilities in ECD Centres.	1	2	3	4	5

Comment on how resources influence the inclusion of children with disabilities in ECD -----  
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**SECTION C: STAKEHOLDERS’ ATTITUDES TOWARDS INCLUSIVE EARLY CHILDHOOD DEVELOPMENT**

**To what extent do you agree or disagree with the following statements on stakeholders attitudes?** Please tick the appropriate box that best represents your opinion on the extent to which stakeholders’ attitudes affect inclusive Early Childhood Development.

<b>Statement</b>	<b>SA</b>	<b>A</b>	<b>U</b>	<b>DA</b>	<b>SDA</b>
1. Attitudes determine the success of inclusion of children with disabilities in ECD Centres.	1	2	3	4	5



2. Negative attitudes by teachers towards inclusion are a barrier to the success of inclusion at ECD level.	1	2	3	4	5
3. Successful inclusion of children with disabilities in ECD depends on stakeholders' attitudes.	1	2	3	4	5
4. Parents' attitudes determine the extent to which children with disabilities can be successfully included in ECD Centres.	1	2	3	4	5
5. Head-teachers' attitudes determine the extent to which children with disabilities can be included in ECD Centres.	1	2	3	4	5
6. Positive attitudes by stakeholders influence the success of inclusion in ECD Centres	1	2	3	4	5

Comment on the extent to which stakeholders' attitudes affect inclusive Early Childhood Education-----

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#### **SECTION D: POLICIES TO INCLUSIVE EARLY CHILDHOOD EDUCATION**

**To what extent do you agree or disagree with the following statements on the extent to which policies influence inclusion of children with disability at ECD level? Please tick the appropriate box that best represents your opinion on policies in inclusive Early Childhood Development.**

<b>Statement</b>	<b>SA</b>	<b>A</b>	<b>U</b>	<b>DA</b>	<b>SDA</b>
1. The success of inclusion of children with disabilities in ECD depends on clear policies.	1	2	3	4	5

2. Rights of children with disabilities to inclusive education are influenced by laws.	1	2	3	4	5
3. There are specific policies that mandate the rights of children with disabilities to inclusion.	1	2	3	4	5
4. Lack of specific policies is a barrier to inclusion of children with disabilities in ECD.	1	2	3	4	5
5. General education policies enhance provision of inclusive education for children with disabilities in ECD.	1	2	3	4	5
6. International policies on equalization of opportunities for people with disabilities enhance the inclusion of children with disabilities in ECD Centres in Zimbabwe.	1	2	3	4	5

Comment on the extent to which policies influence the inclusion of children with disability at ECD level -----  
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**SECTION E: TEACHERS’ TRAINING AND THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION**

**To what extent do you agree or disagree with the following statements on teachers’ training as factor in inclusion?** Please tick the appropriate box that best represents your opinion on teachers’ training affects the inclusion of children with disabilities in Early Childhood Development.

<b>Statement</b>	<b>SA</b>	<b>A</b>	<b>U</b>	<b>DA</b>	<b>SDA</b>
1. Trained teachers are important to the success of inclusive education at ECD level.	1	2	3	4	5
2. The success of early childhood inclusion depends on teachers’ continued professional development.	1	2	3	4	5
3. Teacher’s training in ECD determines the quality of inclusive education.	1	2	3	4	5

4. Lack of training in Early Childhood Development is a barrier to the success of inclusive education in ECD.	1	2	3	4	5
5. Adequate training of teachers in Special Needs Education equips teachers with knowledge and skills for effective inclusion at ECD level.	1	2	3	4	5
6. Inadequate teachers' training is a barrier to the success of inclusion of children with disabilities in ECD.	1	2	3	4	5

Comment on how teacher's training influences the inclusion of children with disabilities in Early Childhood Education-----  
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**SECTION F: TYPE AND SEVERITY OF DISABILITY AND EARLY CHILDHOOD EDUCATION**

**To what extent do you agree or disagree with the following statements on type and severity of disability and inclusive Early Childhood Education?** Please tick the appropriate box that best represents your opinion on the effects of type and severity of disability on inclusive Early Childhood Development.

<b>Statement</b>	<b>SA</b>	<b>A</b>	<b>U</b>	<b>DA</b>	<b>SDA</b>
1. The type of disability influences inclusion of children with disability in Early Childhood Education.	1	2	3	4	5
2. Most teachers are positive about including children with physical disabilities in Early Childhood Education.	1	2	3	4	5
3. Teachers are willing to include children with mild disability in Early Childhood Education.	1	2	3	4	5

4. The more severe the child's disability the more challenges it poses to inclusion.	1	2	3	4	5
5. The severity of disability influences the successful inclusion of children with disabilities at ECD level.	1	2	3	4	5
6. The type of disability influences teachers' willingness to include children with disabilities in their classes.	1	2	3	4	5

Comment on how type and severity of disability influence the inclusion of children with disability in Early Childhood Education-----  
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**SECTION G: STRATEGIES FOR IMPROVING THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD EDUCATION**

**To what extent do you agree or disagree with the following statements on strategies to improve inclusion requirements for children with disability at ECD? Please tick the appropriate box that best represents your opinion on strategies for improving the inclusion of children with disabilities in Early Childhood Development.**

<b>Statement</b>	<b>SA</b>	<b>A</b>	<b>U</b>	<b>DA</b>	<b>SDA</b>
1. Strategies for making the learning environment accessible are important for the inclusion of children with disabilities in ECD.	1	2	3	4	5
2. The success of inclusion depends on strategies for adapting the learning environment.	1	2	3	4	5
3. Play-way strategies of teaching improve the inclusion of children with disabilities in ECD.	1	2	3	4	5
4. Multi-disciplinary strategies enhance the inclusion of children with disabilities in ECD.	1	2	3	4	5

5. Teaching functional skills to children with disabilities is a strategy that enables the children's inclusion in ECD.	1	2	3	4	5
6. Early intervention is a strategy that would improve the inclusion of children with disabilities in ECD.	1	2	3	4	5

Comment on strategies that can be employed to improve inclusion requirements of children with disability at ECD level-----

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Thank you for taking time to complete the questionnaire.



**APPENDIX C: QUESTIONNAIRE FOR PRIMARY SCHOOL-HEADS (PRINCIPALS)**

The questionnaire seeks your opinion on factors affecting the inclusion of children with disabilities in Early Childhood Development Centres. The study is part of the researcher's Doctor of Education

Degree studies at the University of South Africa (UNISA). This study intends to improve the inclusion of children with disabilities in regular primary schools at ECD level. You were selected to participate in this study because you are involved in education of primary school children with disabilities within an inclusive environment at ECD level in Zimbabwe. You should not write your name on the questionnaire since the final research report will not identify any individual so that no responses can be traced back to any participant. All information provided by you will be treated as strictly confidential. There are no right or wrong answers. The researcher is only interested in your opinions. You are therefore kindly requested to complete the questionnaire as honestly as you can. Thank you for taking time to complete the questionnaire.

### SECTION A: BIOGRAPHICAL DATA

Kindly fill in the blank spaces or tick the appropriate box.

1. Age

21-30 years	1
31-40 years	2
41-50 years	3
Over 50 years	4

2. Gender

Male	1
Female	2

3. Highest Professional Qualifications

Certificate in education	1
Diploma in education	2
Bachelors' degree	3
Master's degree	4
Doctors' degree	5
Other specify	6

### SECTION B: RESOURCES AND INCLUSIVE EARLY CHILDHOOD DEVELOPMENT

**To what extent do you agree or disagree to the following statements on how resources influence inclusive early childhood development?** Please tick the appropriate box

Key: 1. SA-Strongly Agree 2. A-Agree 3. U- Undecided 4. DA - Disagree 5. SDA- Strongly Disagree

Statement	SA	A	U	DA	SDA
1. Low budgetary allocations are a barrier to inclusive Early Childhood Education.	1	2	3	4	5
2. Lack of appropriate support structures in schools negatively affect inclusion in ECD Centres.	1	2	3	4	5
3. Lack of enough funds to buy assistive devices in schools is a barrier to the inclusion of children with disabilities in ECD.	1	2	3	4	5
4. Play materials influence the inclusion of children with disabilities in ECD Centres.	1	2	3	4	5
5. The success of inclusion of children with disabilities in ECD Centres depends on appropriate resources	1	2	3	4	5
6. Disability friendly structures influence positively the inclusion of children with disabilities in ECD Centres.	1	2	3	4	5

Comment on how resources influence the inclusion of children with disabilities in ECD Centres.

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**SECTION C: STAKEHOLDERS’ ATTITUDES TOWARDS INCLUSIVE EARLY CHILDHOOD EDUCATION**

**To what extent do you agree or disagree with the following statements on the extent to which stakeholders’ attitudes affect inclusive education at ECD level? Tick the appropriate box.**

Statement	SA	A	U	DA	SDA
1. Teachers' negative attitudes to inclusion negatively affect the inclusion of children with disabilities in primary schools.	1	2	3	4	5
2. Head teachers' willingness to include children with disabilities in ECD Centres positively affects inclusive education.	1	2	3	4	5
3. Parents' acceptance of their child's disability positively affects the inclusion of children with disabilities in ECD Centres.	1	2	3	4	5
4. The success of inclusion of children with disabilities in ECD Centres depends on stakeholders' attitudes.	1	2	3	4	5
5. Stakeholders' negative attitudes negatively affect the inclusion of children with disabilities in ECD Centres.	1	2	3	4	5
6. Teachers' lack of knowledge on disability contributes to negative attitudes towards the inclusion of children with disabilities in ECD Centres.	1	2	3	4	5

Comment on the extent to which stakeholders' attitudes affect inclusion of children with disabilities in Early Childhood Centres -----  
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**SECTION D: POLICIES AND INCLUSIVE EARLY CHILDHOOD EDUCATION**

**To what extent do you agree or disagree with the following statements on the extent to which policies influence inclusive early childhood development? Tick the appropriate box**



Statement	SA	A	U	DA	SDA
1. The success of inclusion of children with disabilities in ECD depends on clear policies.	1	2	3	4	5
2. Rights of children with disabilities to inclusive education are influenced by laws.	1	2	3	4	5
3. There are specific policies that mandate the rights of children with disabilities to inclusion.	1	2	3	4	5
4. Lack of specific policies is a barrier to inclusion of children with disabilities in ECD.	1	2	3	4	5
5. General education policies enhance provision of inclusive education for children with disabilities in ECD.	1	2	3	4	5
6. International policies on equalization of opportunities for people with disabilities enhance the inclusion of children with disabilities in ECD Centres in Zimbabwe.	1	2	3	4	5

Comment on how policies influence inclusion of children with disability at ECD in Primary schools-----  
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**SECTION E: TEACHERS’ TRAINING AND INCLUSIVE EARLY CHILDHOOD EDUCATION**

**To what extent do you agree or disagree with the following statements on how teachers’ training influences inclusive education in ECD? Tick the appropriate box**

Statement	SA	A	U	DA	SDA
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1. Trained teachers are important to the success of inclusive education at ECD level.	1	2	3	4	5
2. The success of early childhood inclusion depends on teachers' continued professional development.	1	2	3	4	5
3. Teacher's training in ECD determines the quality of inclusive education.	1	2	3	4	5
4. Lack of training in Early Childhood Development is a barrier to the success of inclusive education in ECD.	1	2	3	4	5
5. Adequate training of teachers in Special Needs Education equips teachers with knowledge and skills for effective inclusion at ECD level.	1	2	3	4	5
6. Inadequate teachers' training is a barrier to the success of inclusion of children with disabilities in ECD.	1	2	3	4	5

Comment on how teacher's training influences the inclusion of children with disabilities in ECD centres. -----  
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**SECTION F: TYPE AND SEVERITY OF DISABILITY AND INCLUSIVE EARLY CHILDHOOD EDUCATION**

**To what extent do you agree or disagree with the following statements on how the type and severity of disability affect inclusive early childhood education? Tick the appropriate box**

Statement	SA	A	U	DA	SDA
1. The type of disability influences inclusion of children with disability in Early Childhood Education.	1	2	3	4	5
2. Most teachers are positive about including children with physical disabilities in Early Childhood Education.	1	2	3	4	5
3. Teachers are willing to include children with mild disability in Early Childhood Education.	1	2	3	4	5
4. The more severe the child’s disability the more challenges it poses to inclusion.	1	2	3	4	5
5. The severity of disability influences the successful inclusion of children with disabilities at ECD level.	1	2	3	4	5
6. The type of disability influences teachers’ willingness to include children with disabilities in their classes.	1	2	3	4	5

Comment on how the type and severity of disability affect the inclusion of children with disabilities in ECD Centres. -----  
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**SECTION G: STRATEGIES FOR IMPROVING THE INCLUSION OF EARLY CHILDHOOD EDUCATION LEARNERS**

**To what extent do you agree or disagree with the following statements on the strategies that can be employed to improve inclusion requirements of children with disability? Tick the appropriate box**

Statement	SA	A	U	DA	SDA
1. Strategies for making the learning environment accessible are important for the inclusion of children with disabilities in ECD.	1	2	3	4	5
2. The success of inclusion depends on strategies for adapting the learning environment.	1	2	3	4	5
3. Play-way strategies of teaching improve the inclusion of children with disabilities in ECD.	1	2	3	4	5
4. Multi-disciplinary strategies enhance the inclusion of children with disabilities in ECD.	1	2	3	4	5
5. Teaching functional skills to children with disabilities is a strategy that enables the children's inclusion in ECD.	1	2	3	4	5
6. Early intervention is a strategy that would improve the inclusion of children with disabilities in ECD.	1	2	3	4	5

Comment on the strategies that can be employed to improve the inclusion of children with disability in early childhood education. -----  
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Thank you for taking time to complete the questionnaire.



#### **APPENDIX D: INTERVIEW GUIDE FOR PARENTS OF ECD A & B LEARNERS WITH DISABILITIES**

This interview seeks your opinion on factors affecting the inclusion of children with disabilities in Early Childhood Development Centres. The interview is being used in a research study as part of the researcher's Doctor of Education Degree studies at the University of South Africa (UNISA). This study intends to improve the inclusion of children with disabilities in regular primary schools at ECD level. You were selected to participate in this study because you have a child with a disability in an inclusive environment at ECD level. Please be assured that no one will be able to identify your individual responses. All the information you provide will be treated as strictly confidential. There are no right or wrong answers. The researcher is only interested in your opinions. You are therefore kindly requested to be as honest as you can. Thank you for taking time to participate in this interview.

#### **SECTION A: DEMOGRAPHIC DATA**

- 1. Marital Status** (Married / Widowed / Single – understand circumstances)
- 2. Relationship to child** (Father / Mother / Guardian – understand circumstances)
- 3. Nature and severity of child's disability**

#### **SECTION B: RESOURCES AND INCLUSIVE EARLY CHILDHOOD DEVELOPMENT**

1. Explain how the resources you avail for your child with a disability influence the inclusion of the child in ECD.
2. How do the resources availed by the school for your child with a disability affect the inclusion of the child in ECD?
3. How does non-availability of equipment, school fees, assistive aids and books influence the inclusion of children with disability in ECD?
4. How do age-appropriate resource materials affect the inclusion of children with disabilities in ECD?

5. How does the availability of play centres at schools influence the inclusion of children with disabilities in ECD?

### **C. STAKEHOLDERS' ATTITUDES TOWARDS INCLUSIVE EARLY CHILDHOOD DEVELOPMENT**

1. Explain how your feelings about the inclusion of your child with disability in the ECD Centre may affect the child's learning.

2. How do teachers' attitudes towards your child with disability affect the child's inclusion in ECD classes?

3. Explain how the attitude of the head-teacher towards the inclusion of your child with a disability affects the child's inclusion in the ECD Centre.

4. How do negative attitudes by teachers and head-teachers affect the inclusion of your child with disabilities in ECD?

5. How do positive attitudes by parents, teachers and head-teachers affect the inclusion of your child with disability in ECD?

### **D. POLICIES AND INCLUSIVE EARLY CHILDHOOD DEVELOPMENT**

1 How do government policies enable the inclusion of children with disabilities in ECD Centres?

2. How have school policies influenced the inclusion of children with disabilities in ECD Centres?

3. Explain how any laws influence the inclusion of children with disabilities in ECD Centres?

4. How do specific policies on disability influence the inclusion of children with disabilities in ECD centres?

5. How does lack of policies on inclusive education affect the inclusion of children with disabilities in ECD centres?

### **E. TEACHERS TRAINING AND INCLUSIVE EARLY CHILDHOOD EDUCATION**

1. How do teachers use their knowledge to enable the inclusion of children with disabilities in ECD Centres?

2. How can continuous staff development for teachers facilitate successful inclusion of children with disabilities in ECD Centres?

3. How does level of teachers' training on disability issues influence the inclusion of children with disabilities in ECD Centres?
4. How does lack of teachers' training on disability issues influence the inclusion of children with disabilities in ECD centres?
5. How does lack of knowledge on disability issues affect the inclusion of children with disabilities in ECD?

## **F. TYPE AND SEVERITY OF DISABILITY AND EARLY CHILDHOOD EDUCATION**

1. How does the type of disability affect the success of inclusion of children with disabilities in ECD?
2. How does the type of disability influence teachers' willingness to include children with disabilities in their classes?
3. How does the severity of disability affect the inclusion of children with disabilities in ECD?
4. How does the severity of disability influences teachers' willingness to include children with disabilities in their classes?
5. Explain how the severity of disability influences head-teachers' willingness to include children with disabilities in their ECD centres.

## **G. STRATEGIES FOR IMPROVING THE INCLUSION OF EARLY CHILDHOODLEARNERS**

1. Explain how the success of inclusion of children with disabilities depends on environmental adaptations made in the ECD Centres?
2. How can functional skills strategies enable the success of inclusion of children with disabilities in ECD Centres?
3. How does early intervention improve the inclusion of children with disabilities in ECD Centres?
4. How can a multidisciplinary approach enable the success of inclusion of children with disabilities in ECD centres?
5. How does play improve the inclusion of children with disabilities in ECD centres?

Thank you for participating in this research.

## **APPENDIX E: MINISTRY OF EDUCATION, ARTS, SPORTS AND CULTURE PERMISSION LETTER**

All communications should be addressed to  
The Secretary for Primary and Secondary  
Education  
Telephone: 796211, 794995  
Telegraphic address: "EDUCATION"  
Fax: 794903



Reference: C/426/3 MASVINGO  
Ministry of Primary and  
Secondary Education  
P.O Box CY 121  
Causeway  
Harare

22 May 2019

Muzengi Esther  
Henry Murray School for the Deaf  
P. O. Morgenster  
Masvingo


**Re: PERMISSION TO COLLECT DATA FOR RESEARCH PURPOSES IN  
MASVINGO PROVINCE: MASVINGO DISTRICT: RUJEKO, MORGENSTER  
AND MANDERE PRIMARY SCHOOLS. BIKITA DISTRICT: PAMUSHANA,  
GUMUNYU, MUTENDI AND USHE PRIMARY SCHOOLS. ZAKA DISTRICT:  
ST ANTHONY, ZAKA, MUNJANJA AND MASHINGAIDZE PRIMARY  
SCHOOLS:**

Reference is made to your application to collect data for research purposes at the above-mentioned schools in Masvingo Province on the title:

**"FACTORS AFFECTING THE INCLUSION OF CHILDREN WITH DISABILITIES  
IN EARLY CHILDHOOD DEVELOPMENT CENTRES IN BIKITA, MASVINGO  
AND ZAKA PRIMARY SCHOOLS."**

Permission is hereby granted. However, you are required to liaise with the Provincial Education Director Masvingo Province, who is responsible for the schools which you want to involve in your data collection. You should ensure that your data collection does not disrupt the normal operations of the schools. Where students are involved, parental consent is required.

You are also required to provide a copy of your final report to the Secretary for Primary and Secondary Education.

  
T. Thabela  
**SECRETARY FOR PRIMARY AND SECONDARY EDUCATION**  
cc: PED – Masvingo Province



ALL communications should be addressed to  
"The Provincial Education Director for Primary and Secondary Education"  
Telephone: 263585/264331  
Fax: 039-263261



Ministry of Primary and Secondary Education  
P. O Box 89  
Masvingo

10 June 2019

Musengi Esther  
Henry Murray School for the Deaf  
P.O Morgenster  
Masvingo

TEACHER - IN - CHARGE  
RUJEKO PRIMARY SCHOOL  
02 JUL 2019  
SIGNATURE

**RE: PERMISSION TO CARRY OUT RESEARCH AT RUJEKO, MORGENSTER, MANDERE PRIMARY SCHOOLS IN MASVINGO DISTRICT: PAMUSHANA, GUMUNYU, MUTENDI, USHE PRIMARY SCHOOLS IN BIKITA DISTRICT: ST ANTHONY, ZAKA, MUNJANJA, MASHINGAIDZE PRIMARY SCHOOLS IN ZAKA DISTRICT: MASVINGO PROVINCE.**

Reference is made to your application to carry out a research at the above mentioned school in Zaka District on the research title:

**"FACTORS AFFECTING THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD DEVELOPMENT CENTRES IN BIKITA, MASVINGO AND ZAKA PRIMARY SCHOOLS: MASVINGO PROVINCE"**

Please be advised that the Secretary for Primary and Secondary Education has granted permission to carry out your research.

You are also advised to liaise with the District Schools Inspector who is responsible for the schools which are part of the sample for your research.

MIN. OF PRY. & SEC. EDUCATION  
PROVINCIAL EDUCATION DIRECTOR  
MASVINGO PROVINCIAL OFFICE  
10 JUN 2019  
P.O. BOX 89, MASVINGO  
ZIM. TEL: 0392 264331  
FAX: 039-263261  
Z. M. Chitiga  
Provincial Education Director


THE DEPUTY HEAD  
MWA PRIMARY SCHOOL  
03 JUL 2019  
P.O. BOX MORGENSTER  
MASVINGO  
TEL: 039 261139

AHEAD  
MORGENSTER SCHOOL  
P.O. MORGENSTER  
MASVINGO  
DATE 19/06/19

THE HEAD  
MANDERE PRI. SCHOOL  
BOX 717 MASVINGO  
DATE 21-06-19  
MINISTRY OF EDUCATION  
DISTRICT EDUCATION OFFICER  
10 JUN 2019  
MASVINGO DISTRICT  
P.O. BOX 89  
MASVINGO

**APPENDIX G: ZAKA DISTRICT AUTHORIZATION**

ALL communications should be addressed to  
"The Provincial Education Director for Primary and Secondary Education"  
Telephone: 263585/264331  
Fax: 039-263261

  
ZIMBABWE

Ministry of Primary and Secondary Education  
P. O Box 89  
Masvingo

10 June 2019

THE HEAD  
ST ANTHONY'S GPS  
CATHOLIC DIOCESE OF MASVINGO  
2019-06-27  
JERERA

Musengi Esther  
Henry Murray School for the Deaf  
P.O Morgenster  
Masvingo

RE: PERMISSION TO CARRY OUT RESEARCH AT RUJEKO, MORGENSTER, MANDERE PRIMARY SCHOOLS IN MASVINGO DISTRICT: PAMUSHANA, GUMUNYU, MUTENDI, USHE PRIMARY SCHOOLS IN BIKITA DISTRICT: ST ANTHONY, ZAKA, MUNJANJA, MASHINGAIDZE PRIMARY SCHOOLS IN ZAKA DISTRICT MASVINGO PROVINCE.

Reference is made to your application to carry out a research at the above-mentioned school in Zaka District on the research title:

**"FACTORS AFFECTING THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD DEVELOPMENT CENTRES IN BIKITA, MASVINGO AND ZAKA PRIMARY SCHOOLS: MASVINGO PROVINCE"**

Please be advised that the Secretary for Primary and Secondary Education has granted permission to carry out your research.

You are also advised to liaise with the District Schools Inspector who is responsible for the schools which are part of the sample for your research.


Z. M. Chitiga  
Provincial Education Director  
MASVINGO PROVINCE

THE HEAD  
JERERA PRIMARY SCHOOL  
27 JUN 2019  
P. O. BOX 302  
JERERA

MINISTRY OF EDUCATION  
DISTRICT EDUCATION OFFICE  
10 JUN 2019  
MASVINGO DISTRICT  
P. O. BOX 89  
MASVINGO

**APPENDIX H: BIKITA DISTRICT AUTHORIZATION**

ALL communications should be addressed to:  
 "The Provincial Education Director for Primary and Secondary Education"  
 Telephone: 263585/264331  
 Fax: 039-263261



ZIMBABWE

Ministry of Primary and Secondary Education  
 P. O Box 89  
 Masvingo

10 June 2019

THE HEAD  
 DUMA PRIMARY SCHOOL  
 BIKITA-R.D.C

25 JUN 2019

CELL: 0777 709-080  
 P.O. BOX 350, NYIKA

Musengi Esther  
 Henry Murray School for the Deaf  
 P.O Morgenster  
 Masvingo

**RE: PERMISSION TO CARRY OUT RESEARCH AT RUJEKO, MORGENSTER, MANDERE PRIMARY SCHOOLS IN MASVINGO DISTRICT: PAMUSHANA, GUMUNYU, MUTENDI, USHE PRIMARY SCHOOLS IN BIKITA DISTRICT: ST ANTHONY, ZAKA, MUNJANJA, MASHINGAIDZE PRIMARY SCHOOLS IN ZAKA DISTRICT: MASVINGO PROVINCE.**

Reference is made to your application to carry out a research at the above mentioned school in Zaka District on the research title:

**"FACTORS AFFECTING THE INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD DEVELOPMENT CENTRES IN BIKITA, MASVINGO AND ZAKA PRIMARY SCHOOLS: MASVINGO PROVINCE"**

Please be advised that the Secretary for Primary and Secondary Education has granted permission to carry out your research.

You are also advised to liaise with the District Schools Inspector who is responsible for the schools which are part of the sample for your research.

*Z. M. Chitiga*  
 Z. M. Chitiga  
 Provincial Education Director  
**MASVINGO PROVINCE**

THE HEAD  
 MARGOZA PR. SCHOOL  
 25 JUN 2019  
 BAG 599  
 NYIKA

MINISTRY OF EDUCATION  
 DISTRICT EDUCATION  
 18 JUN 2019  
 MASVINGO DISTRICT  
 P.O BOX 89  
 MASVINGO

THE SCHOOL  
 USHE SCH  
 24 06 19  
 Et  
 m makes  
 P.246 350

THE HEAD  
 GUMUNYU PRIMARY SCHOOL  
 25 JUN 2019  
 P.O. BOX 120, NYIKA  
 CELL : .....

MINISTRY OF PRIMARY & SECONDARY  
 EDUCATION  
 BIKITA DISTRICT  
 24 JUN 2019  
 DISTRICT SCHOOLS INSPECTOR  
 P.O. BOX 250  
 NYIKA



**APPENDIX I: REQUESTING PERMISSION FROM MINISTRY OF PRIMARY AND SECONDARY EDUCATION  
TO CONDUCT RESEARCH IN MASVINGO PRIMARY SCHOOLS**

**Request for permission to conduct research at primary schools in Masvingo province, Zimbabwe**

**TITLE OF THE RESEARCH: Factors Affecting the Inclusion of Children with Disabilities in Early Childhood Development Centres in Masvingo Primary Schools, Zimbabwe**

**Date:** 12 May 2019

**Department of the person:** Ministry of Primary and Secondary Education

**Contact details of the person:** P. O. Box CY 121, Causeway, Harare, Zimbabwe

Email: [admin@mopse.gov.zw](mailto:admin@mopse.gov.zw) Tel.: +263-4-705281 / 705153

Dear Permanent Secretary

I, **Esther Musengi**, am doing research under the supervision of **Regis Chireshe a Professor** in the Department of Special Needs Education (Great Zimbabwe University) towards a **Doctor of Education** at the University of South Africa.

This is a self-funded research. I write to ask you for permission to conduct a study entitled: ***Factors Affecting the Inclusion of Children with Disabilities in Early Childhood Development Centres in Masvingo Primary Schools, Zimbabwe***. The aim of the study is to analyze the factors that affect the inclusion of learners with various disabilities in ECD A and ECD classes in primary schools. The aim of the study is to establish factors affecting the inclusion of children with disabilities in early childhood development centres in Masvingo primary schools, Zimbabwe.

I am requesting permission from your ministry because you are the regulatory authority for the primary schools I intend to collect data from. The study will entail administering questionnaires to school-heads and teachers of ECD classes that have children with disabilities. Parents of these children will also be interviewed.

The benefits of this study are that your ministry will get documented evidence of how disability-related factors interact to include or exclude these learners in Early Childhood Development Centres in primary schools. Such evidence can be used to improve teaching and learning processes for these learners at this level and become a good foundation for learning in the higher grades.

This study poses no foreseeable, potential risks. There will be no reimbursement or any incentives for participation in the research. Feedback procedure will entail publication of the thesis as per University of South Africa (UNISA) regulations.

Yours sincerely



ESTHER MUSENGI  
RESEARCHER

My contact details are: **+263772247640** e-mail: [musengie@yahoo.com](mailto:musengie@yahoo.com) and my supervisor can be reached at the Department of Special Needs Education (Great Zimbabwe University) **+263777308244**, e-mail: [chireshe@yahoo.co.uk](mailto:chireshe@yahoo.co.uk)



## **APPENDIX J: PARTICIPANT INFORMATION SHEET / PRINCIPALS' LETTER FOR CONSENT**

REFERENCE: 2019/04/17/58561242/13/MC

**Date:** 12 May 2019

**Title:** Factors Affecting the Inclusion of Children with Disabilities in Early Childhood Development Centres in Masvingo Primary Schools, Zimbabwe

### **DEAR PROSPECTIVE PARTICIPANT**

My name is **ESTHER MUSENGI** and I am doing research under the supervision of **Professor Regis Chireshe**, a professor in the Department of Special Needs Education towards a **Doctor of Education (D. Ed)** at the University of South Africa. The research is self-funded. I am inviting you to participate in a study entitled ***Factors Affecting the Inclusion of Children with Disabilities in Early Childhood Development Centres in Masvingo Primary Schools, Zimbabwe.***

### **WHAT IS THE PURPOSE OF THE STUDY?**

The purpose of this study is to analyze the factors that affect the inclusion of learners with various disabilities in ECD (A) and (B) classes in primary schools. This study is expected to collect important information that documents evidence of how disability-related factors interact to include or exclude these learners in Early Childhood Development Centres in the primary schools. Such evidence can be used to improve teaching and learning processes for these learners at this level and eventually become a good foundation for learning in the higher grades.

### **WHY AM I BEING INVITED TO PARTICIPATE?**

As the head of the school, you are being invited to participate in this study because you have valuable, administrative insights into factors affecting the inclusion of children with disabilities at ECD level in your school. I obtained your contact details from the Ministry of Primary and Secondary Education's Regional and District offices. You will form part of my sample of 10 school-heads, 30 teachers and 20 parents of children with disabilities from throughout Masvingo Province.

### **WHAT IS THE NATURE OF MY PARTICIPATION IN THIS STUDY?**

You will participate in the study by anonymously completing a questionnaire. The teachers participating in the study will also complete a questionnaire. Parents of children with disabilities will be individually

interviewed. The questions in your questionnaire will be mostly closed-ended, Likert-scale type (ranging from Strongly Agree to Strongly Disagree). The questions will focus on the following issues: How resources, stakeholder attitudes and policies affect inclusive childhood development; How teachers' training, as well as type and severity of disability affect inclusive early childhood development; Strategies that can be employed to improve the inclusion of children with disabilities at early childhood development level. The closed-ended questions dealing with each aspect will be complemented by an open-ended question to allow you to express yourself freely on each aspect. Completion of the questionnaire is expected to take about 60 minutes of your time.

#### **CAN I WITHDRAW FROM THIS STUDY EVEN AFTER HAVING AGREED TO PARTICIPATE?**

Participating in this study is voluntary and you are under no obligation to consent to participation. If you do decide to take part, you will be given this information sheet to keep and be asked to sign a written consent form. You are free to withdraw at any time and without giving a reason. However, once you have submitted your completed questionnaire, it will not be possible to withdraw because the questionnaire will not have your name and so cannot be easily identified.

#### **WHAT ARE THE POTENTIAL BENEFITS OF TAKING PART IN THIS STUDY?**

The benefits of this study are that the Ministry of Primary and Secondary Education and your school will get clearly documented evidence of how disability-related factors interact to include or exclude learners with disabilities in Early Childhood Development Centres in primary schools. Such evidence can be used to improve teaching and learning processes for these learners at this level so that the learners get a good foundation for learning in the higher grades. The study therefore has potential to improve the pass rate at your school and enhance the chances of learners with disabilities to participate and contribute in society in the medium to long term.

#### **ARE THERE ANY NEGATIVE CONSEQUENCES FOR ME IF I PARTICIPATE IN THE RESEARCH PROJECT?**

The most serious negative consequence of participating in this study that I can foresee relates to the inconvenience of taking time to complete the questionnaire. There is very little risk that anyone, besides my supervisor and I, will be able to identify you as an individual participant in the study. This is because your identity and your school's identity are not required on the questionnaire as these will not be used in the final report. In any case, the information required in the questionnaire is of a non-sensitive nature.

**WILL THE INFORMATION THAT I CONVEY TO THE RESEARCHER AND MY IDENTITY BE KEPT CONFIDENTIAL?**

You have the right to insist that your name will not be recorded anywhere and that no one, apart from the researcher and her supervisor, will know about your involvement in this research. To be sure of this, your name will not be recorded anywhere and no one will be able to connect you to the answers you give. Your answers will be given a code number or a pseudonym and you will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings. Your privacy will therefore be protected in any publication of the information you provide as this will be reported anonymously.

Your answers may be reviewed by people responsible for making sure that research is done properly, including my supervisor and members of the Research Ethics Review Committee at UNISA. Otherwise, records that identify you will be available only to my supervisor and me unless you give permission for other people to see the records.

**HOW WILL THE RESEARCHER(S) PROTECT THE SECURITY OF DATA?**

Hard copies of your answers will be stored by the researcher for a period of five years in a locked cupboard/filing cabinet in her study-room in Masvingo City for future research or academic purposes. Electronic information will be stored on a password protected computer. Future use of the stored data will be subject to further Research Ethics Review and approval if applicable. After five years, hard copies will be shredded and any electronic copies generated during data analysis will be permanently deleted from the hard drive of the computer through use of a relevant software programme.

**WILL I RECEIVE PAYMENT OR ANY INCENTIVES FOR PARTICIPATING IN THIS STUDY?**

You will not receive any payment or reward for this important social service. You are not expected to incur any direct financial costs as a result of this study.

**HAS THE STUDY RECEIVED ETHICS APPROVAL**

This study has received written approval from the Research Ethics Review Committee of the CEDU ERC, Unisa. A copy of the approval letter can be obtained from the researcher if you so wish.



### **HOW WILL I BE INFORMED OF THE FINDINGS/RESULTS OF THE RESEARCH?**

If you would like to be informed of the final research findings, please contact ESTHER MUSENGI on +263 772 247 640 or email [musengie@yahoo.com](mailto:musengie@yahoo.com) . The findings are accessible for five years after publication of the thesis. Should you require any further information or want to contact the researcher about any aspect of this study, please contact [mandd@unisa.ac.za](mailto:mandd@unisa.ac.za) Should you have concerns about the way in which the research has been conducted, you may contact Professor Regis Chireshe, +263 77308244, email [chireshe@yahoo.co.uk](mailto:chireshe@yahoo.co.uk)

Thank you for taking time to read this information sheet and for participating in this study.

Thank you.



ESTHER MUSENGI

My contact details are: **+263772247640** e-mail: [musengie@yahoo.com](mailto:musengie@yahoo.com) and my supervisor can be reached at the Department of Special Needs Education (Great Zimbabwe University) **+263777308244**, e-mail: [chireshe@yahoo.co.uk](mailto:chireshe@yahoo.co.uk)



## **APPENDIX K: PARTICIPANT INFORMATION SHEET / TEACHERS' LETTER FOR CONSENT**

REFERENCE: 2019/04/17/58561242/13/MC

**Date:** 12 May 2019

**Title:** Factors Affecting the Inclusion of Children with Disabilities in Early Childhood Development Centres in Masvingo Primary Schools, Zimbabwe

### **DEAR PROSPECTIVE PARTICIPANT**

My name is **ESTHER MUSENGI** and I am doing research under the supervision of **Professor Regis Chireshe**, a professor in the Department of Special Needs Education towards a **Doctor of Education (D. Ed)** at the University of South Africa. The research is self-funded. I am inviting you to participate in a study entitled ***Factors Affecting the Inclusion of Children with Disabilities in Early Childhood Development Centres in Masvingo Primary Schools, Zimbabwe.***

### **WHAT IS THE PURPOSE OF THE STUDY?**

The purpose of this study is to analyze the factors that affect the inclusion of learners with various disabilities in ECD (A) and (B) classes in primary schools. This study is expected to collect important information that documents evidence of how disability-related factors interact to include or exclude these learners in Early Childhood Development Centres in the primary schools. Such evidence can be used to improve teaching and learning processes for these learners at this level and eventually become a good foundation for learning in the higher grades.

### **WHY AM I BEING INVITED TO PARTICIPATE?**

As a teacher of ECD learners with disabilities, you are invited to participate in this study because you have valuable, hands-on insights into factors affecting the inclusion of children with disabilities at ECD level in your class. I obtained your contact details from your school-head. You will form part of my sample of 10 school-heads, 30 teachers and 20 parents of children with disabilities from throughout Masvingo Province.

### **WHAT IS THE NATURE OF MY PARTICIPATION IN THIS STUDY?**

You will participate in the study by anonymously completing a questionnaire. Other teachers participating in the study will also complete an identical questionnaire. The school-heads will complete a different questionnaire. Parents of children with disabilities will be individually interviewed. The questions in your questionnaire will be mostly closed-ended, Likert-scale type (ranging from Strongly Agree to Strongly

Disagree). The questions will focus on the following issues: How resources, stakeholder attitudes and policies affect inclusive childhood development; How teachers' training, as well as type and severity of disability affect inclusive early childhood development; Strategies that can be employed to improve the inclusion of children with disabilities at early childhood development level. The closed-ended questions dealing with each aspect will be complemented by an open-ended question to allow you to express yourself freely on each aspect. Completion of the questionnaire is expected to take about 60 minutes of your time.

#### **CAN I WITHDRAW FROM THIS STUDY EVEN AFTER HAVING AGREED TO PARTICIPATE?**

Participating in this study is voluntary and you are under no obligation to consent to participation. If you do decide to take part, you will be given this information sheet to keep and be asked to sign a written consent form. You are free to withdraw at any time and without giving a reason. However, once you have submitted your completed questionnaire, it will not be possible to withdraw because the questionnaire will not have your name and so cannot be easily identified.

#### **WHAT ARE THE POTENTIAL BENEFITS OF TAKING PART IN THIS STUDY?**

The benefits of this study are that the Ministry of Primary and Secondary Education and your school will get clearly documented evidence of how disability-related factors interact to include or exclude learners with disabilities in Early Childhood Development Centres in primary schools. Such evidence can be used to improve teaching and learning processes for these learners at this level so that the learners get a good foundation for learning in the higher grades. The study therefore has potential to improve the pass rate at your school and enhance the chances of learners with disabilities to participate and contribute in society in the medium to long term.

#### **ARE THERE ANY NEGATIVE CONSEQUENCES FOR ME IF I PARTICIPATE IN THE RESEARCH PROJECT?**

The most serious negative consequence of participating in this study that I can foresee relates to the inconvenience of taking time to complete the questionnaire. There is very little risk that anyone, besides my supervisor and I, will be able to identify you as an individual participant in the study. This is because your identity and your school's identity are not required on the questionnaire as these will not be used in the final report. In any case, the information required in the questionnaire is of a non-sensitive nature.

**WILL THE INFORMATION THAT I CONVEY TO THE RESEARCHER AND MY IDENTITY BE KEPT CONFIDENTIAL?**

You have the right to insist that your name will not be recorded anywhere and that no one, apart from the researcher and her supervisor, will know about your involvement in this research. To be sure of this, your name will not be recorded anywhere and no one will be able to connect you to the answers you give. Your answers will be given a code number or a pseudonym and you will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings. Your privacy will therefore be protected in any publication of the information you provide as this will be reported anonymously.

Your answers may be reviewed by people responsible for making sure that research is done properly, including my supervisor and members of the Research Ethics Review Committee at UNISA. Otherwise, records that identify you will be available only to my supervisor and me unless you give permission for other people to see the records.

**HOW WILL THE RESEARCHER(S) PROTECT THE SECURITY OF DATA?**

Hard copies of your answers will be stored by the researcher for a period of five years in a locked cupboard/filing cabinet in her study-room in Masvingo City for future research or academic purposes. Electronic information will be stored on a password protected computer. Future use of the stored data will be subject to further Research Ethics Review and approval if applicable. After five years, hard copies will be shredded and any electronic copies generated during data analysis will be permanently deleted from the hard drive of the computer through use of a relevant software programme.

**WILL I RECEIVE PAYMENT OR ANY INCENTIVES FOR PARTICIPATING IN THIS STUDY?**

You will not receive any payment or reward for this important social service. You are not expected to incur any direct financial costs as a result of this study.

**HAS THE STUDY RECEIVED ETHICS APPROVAL**

This study has received written approval from the Research Ethics Review Committee of the CEDU ERC, Unisa. A copy of the approval letter can be obtained from the researcher if you so wish.

### HOW WILL I BE INFORMED OF THE FINDINGS/RESULTS OF THE RESEARCH?

If you would like to be informed of the final research findings, please contact ESTHER MUSENGI on +263 772 247 640 or email [musengie@yahoo.com](mailto:musengie@yahoo.com) . The findings are accessible for five years after publication of the thesis. Should you require any further information or want to contact the researcher about any aspect of this study, please contact [mandd@unisa.ac.za](mailto:mandd@unisa.ac.za) Should you have concerns about the way in which the research has been conducted, you may contact Professor Regis Chireshe, +263 77308244, email [chireshe@yahoo.co.uk](mailto:chireshe@yahoo.co.uk) .

Thank you for taking time to read this information sheet and for participating in this study.

Thank you.



ESTHER MUSENGI

My contact details are: **+263772247640** e-mail: [musengie@yahoo.com](mailto:musengie@yahoo.com) and my supervisor can be reached at the Department of Special Needs Education (Great Zimbabwe University) **+263777308244**, e-mail: [chireshe@yahoo.co.uk](mailto:chireshe@yahoo.co.uk)



## **APPENDIX L: PARTICIPANT INFORMATION SHEET / PARENTS' LETTER FOR CONSENT**

REFERENCE: 2019/04/17/58561242/13/MC

**Date:** 21 March 2019

**Title:** Factors Affecting the Inclusion of Children with Disabilities in Early Childhood Development Centres in Masvingo Primary Schools, Zimbabwe

### **DEAR PROSPECTIVE PARTICIPANT**

My name is **ESTHER MUSENGI** and I am doing research under the supervision of **Professor Regis Chireshe**, a professor in the Department of Special Needs Education towards a **Doctor of Education (D. Ed)** at the University of South Africa. The research is self-funded. I am inviting you to participate in a study entitled ***Factors Affecting the Inclusion of Children with Disabilities in Early Childhood Development Centres in Masvingo Primary Schools, Zimbabwe.***

### **WHAT IS THE PURPOSE OF THE STUDY?**

The purpose of this study is to analyze the factors that affect the inclusion of learners with various disabilities in ECD A and ECD classes in primary schools. This study is expected to collect important information that documents evidence of how disability-related factors interact to include or exclude these learners in Early Childhood Development Centres in the primary schools. Such evidence can be used to improve teaching and learning processes for these learners at this level and eventually become a good foundation for learning in the higher grades.

### **WHY AM I BEING INVITED TO PARTICIPATE?**

As a parent of a child with a disability, you are invited to participate in this study because you have valuable, hands-on insights into factors affecting the inclusion of children with disabilities at ECD level because you live with your child. I obtained your contact details from your child's teacher and school-head. You will form part of my sample of 10 school-heads, 30 teachers and 20 parents of children with disabilities from throughout Masvingo Province.

### **WHAT IS THE NATURE OF MY PARTICIPATION IN THIS STUDY?**

You will participate in the study by individually answering interview questions. The interview will have a preliminary section with demographic questions concerning your marital status, relationship to the child

with disability and the nature and severity of the child's disability. The main part of the interview will consist of three open-ended questions on each of the following six issues: How resources, stakeholder attitudes and policies affect inclusive childhood development; How teachers' training, as well as type and severity of disability affect inclusive early childhood development; Strategies that can be employed to improve the inclusion of children with disabilities at early childhood development level. The interview should take 50 to 60 minutes of your time.

#### **CAN I WITHDRAW FROM THIS STUDY EVEN AFTER HAVING AGREED TO PARTICIPATE?**

Participating in this study is voluntary and you are under no obligation to consent to participation. If you do decide to take part, you will be given this information sheet to keep and be asked to sign a written consent form. You are free to withdraw at any time and without giving a reason. However, once you have submitted your completed questionnaire, it will not be possible to withdraw because the questionnaire will not have your name and so cannot be easily identified.

#### **WHAT ARE THE POTENTIAL BENEFITS OF TAKING PART IN THIS STUDY?**

The benefits of this study are that the Ministry of Primary and Secondary Education and your child's school will get clearly documented evidence of how disability-related factors interact to include or exclude learners with disabilities in Early Childhood Development Centres in primary schools. Such evidence can be used to improve teaching and learning processes for these learners at this level so that the learners get a good foundation for learning in the higher grades. The study therefore has potential to improve the pass rate at your child's school and enhance the chances of your child to participate and contribute in society in the medium to long term.

#### **ARE THERE ANY NEGATIVE CONSEQUENCES FOR ME IF I PARTICIPATE IN THE RESEARCH PROJECT?**

The most serious negative consequence of participating in this study that I can foresee relates to the inconvenience of taking time to answer the interview questions. There is very little risk that anyone, besides my supervisor and I, will be able to identify you as an individual participant in the study. This is because your identity and your child's identity are not required in the interview as these will not be used in the final report. In any case, the information required from you is of a non-sensitive nature.

#### **WILL THE INFORMATION THAT I CONVEY TO THE RESEARCHER AND MY IDENTITY BE KEPT CONFIDENTIAL?**

You have the right to insist that your name will not be recorded anywhere and that no one, apart from the researcher and her supervisor, will know about your involvement in this research. To be sure of this,

your name will not be recorded anywhere and no one will be able to connect you to the answers you give. Your answers will be given a code number or a pseudonym and you will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings. Your privacy will therefore be protected in any publication of the information you provide as this will be reported anonymously.

Your answers may be reviewed by people responsible for making sure that research is done properly, including my supervisor and members of the Research Ethics Review Committee at UNISA. Otherwise, records that identify you will be available only to my supervisor and me unless you give permission for other people to see the records.

#### **HOW WILL THE RESEARCHER(S) PROTECT THE SECURITY OF DATA?**

Hard copies of your answers will be stored by the researcher for a period of five years in a locked cupboard/filing cabinet in her study-room in Masvingo City for future research or academic purposes. Electronic information will be stored on a password protected computer. Future use of the stored data will be subject to further Research Ethics Review and approval if applicable. After five years, hard copies will be shredded and any electronic copies generated during data analysis will be permanently deleted from the hard drive of the computer through use of a relevant software programme.

#### **WILL I RECEIVE PAYMENT OR ANY INCENTIVES FOR PARTICIPATING IN THIS STUDY?**

You will not receive any payment or reward for this important social service. You are not expected to incur any direct financial costs as a result of this study.

#### **HAS THE STUDY RECEIVED ETHICS APPROVAL**

This study has received written approval from the Research Ethics Review Committee of the CEDU ERC, Unisa. A copy of the approval letter can be obtained from the researcher if you so wish.

#### **HOW WILL I BE INFORMED OF THE FINDINGS/RESULTS OF THE RESEARCH?**

If you would like to be informed of the final research findings, please contact ESTHER MUSENGI on +263 772 247 640 or email [musengie@yahoo.com](mailto:musengie@yahoo.com) . The findings are accessible for five years after publication of the thesis. Should you require any further information or want to contact the researcher about any



aspect of this study, please contact [mandd@unisa.ac.za](mailto:mandd@unisa.ac.za) Should you have concerns about the way in which the research has been conducted, you may contact Professor Regis Chireshe, +263 77308244, email [chireshe@yahoo.co.uk](mailto:chireshe@yahoo.co.uk) .

Thank you for taking time to read this information sheet and for participating in this study.

Thank you.



ESTHER MUSENGI

My contact details are: **+263772247640** e-mail: [musengie@yahoo.com](mailto:musengie@yahoo.com) and my supervisor can be reached at the Department of Special Needs Education (Great Zimbabwe University) **+263777308244**, e-mail: [chireshe@yahoo.co.uk](mailto:chireshe@yahoo.co.uk)

**APPENDIX M: CONFIRMATION OF EDITING**



Great Zimbabwe University

Department of Curriculum Studies

PO Box 1235

Masvingo

Zimbabwe

17 JANUARY 2021

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TO WHOM IT MAY CONCERN

**Re: Confirmation of Editing of Esther Musengi's Doctor of Education Thesis**

This is to certify that I, **Prof. Rugare Mareva** (National Identity Number 22-101 400 K 22), have edited **Esther Musengi's** Doctoral thesis titled: '**Factors affecting the inclusion of children with disabilities in Early Childhood Development centres in Masvingo primary schools, Zimbabwe**', to be submitted to the University of South Africa (UNISA). I am a holder of a PhD (English) (University of Venda), M.Ed (English) (University of Zimbabwe), B.Ed (English) (University of Zimbabwe), and a Certificate in Education (English Major) (Gweru Teachers' College).

Thank you.



**Prof. Rugare Mareva (PhD)**

