REPORT OF RESEARCH FOR CHILDREN WITH DEAFBLIND IN LOW INCOME SOCIETIES

TITLE: VOICES OF HOPE : SUPPORTING EDUCATION FOR DEAF BLIND CHILDREN

DECLARATION

I, Mwanasha Kasha, together with my co-researcher, Asha Amani, declare that this research titled "Voices of Hope: Empowering Deafblind Children to Access Education" is our original work. We affirm that this study has not been submitted elsewhere for any award, publication, or examination.

We further declare that all sources of information and assistance, whether individuals or organizations, have been duly acknowledged and referenced in the research. We have adhered to ethical standards in collecting, analyzing, and presenting the findings of this study.

We also confirm that the data presented in this report is accurate and truthful to the best of our knowledge, and that no false or misleading information has been included.

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2024/2025

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ABSTRACT

This research titled "Voices of Hope: Empowering Deafblind Children to Access Education" explores the challenges and opportunities faced by deafblind children in accessing education in Tanzania at Uhuru Mchanganyiko Primary school. Uhuru Mchanganyiko primary school is one of the oldest educational institutions in Tanzania. It was established in the city of Dar es Salaam in 1921, and was the first to accept students with disabilities to learn alongside other children in the classroom. Some of the school's male and female students are blind, some are deaf-blind, and some have learning disabilities. Many board at the school because of a lack of facilities in their local area. So we based on conducting research to children with deafblind at this area. The study was conducted using qualitative methods, including interviews with parents, teachers, and children, as well as focus group discussions with caregivers and professionals. The findings of the research reveal significant barriers such as communication difficulties, lack of specialized resources, and social isolation. The report concludes with recommendations for inclusive education, teacher training, the provision of assistive technologies, and increasing community awareness to improve access to education for deafblind children. The goal is to create an inclusive and supportive educational environment for deafblind children in Tanzania.

ACKNOWLEDGEMENT

ABBREVIATIONS

KISE: Kenya Institute of Special Education

TESP: Tanzania Education Support Programme

NGO's: Non Government Organisations

NUDIPU: National Union of Disabled Persons of Uganda

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CHAPTER ONE

INTRODUCTION

This chapter introduces the topic, outlines the objectives and profound challenges of the research, the research questions, and provides background information about the context in which the research is conducted.

1.1 BACKGROUND OF THIS STUDY

In many parts of the world, including Africa, access to education remains a significant challenge for children with disabilities, especially for those with dual sensory impairments, such as deaf blindness. Deafblind children who experience both hearing and vision loss—face unique barriers to education that include communication difficulties, lack of appropriate teaching methods, and social isolation. For children in low-income communities, such as those attending Uhuru Mchanganyiko Primary School in Dar es Salaam, Tanzania, these challenges are further compounded by the lack of resources, insufficient trained staff, and limited community support.

Uhuru Mchanganyiko Primary School is one of the oldest educational institutions in Tanzania, established in 1921, and is among the few schools in the country that accepts children with disabilities, including those who are deafblind. However, it is also a low-income society, which means that the resources available for supporting students with special needs, particularly those with dual sensory impairments, are scarce. While the school has made significant strides in promoting inclusive education, deafblind children still face many obstacles in their educational journey due to the lack of specialized facilities and materials, as well as limited access to trained professionals who can support their unique learning needs.

This study, titled "Voices of Hope: Empowering Deafblind Children to Access Education," aims to explore the challenges faced by deafblind children in low-income societies, with a focus on the experiences of children at *Uhuru Mchanganyiko Primary School. The research seeks to identify the specific barriers that prevent these children from accessing education in such settings, as well as the strategies and resources that may help to alleviate these challenges.

1.2 KEY OBJECTIVES OF THIS RESEARCH

The key objectives of this study are as follows:

1.2.1 To investigate the challenges faced by deafblind children* in low-income schools, particularly at Uhuru Mchanganyiko Primary School, in accessing quality education.

1.2.2. To assess the availability of specialized educational resources, such as assistive technologies and teaching aids, and their effectiveness in supporting deafblind students in a low-income society.

1.2.3. To understand the role of caregivers, teachers, and school administrators in addressing the needs of deafblind children in underfunded educational environments.

1.2.4. To propose practical solutions that can help improve the educational experience and outcomes for deafblind children in low-income communities.

1.2.5. Also, this study aims to inspire local communities, policymakers, and international organizations to invest in the empowerment of children with disabilities, particularly those with deafblindness, to ensure that they have equal access to education and opportunities to thrive.

1.3 PROFOUND CHALLENGES OR PROBLEMS

In Tanzania, as in many parts of Africa, children with dual sensory impairments, such as deafblindness, face numerous challenges that hinder their ability to access education. These challenges are even more pronounced in low-income schools, where resources are limited, and specialized support is scarce. Uhuru Mchanganyiko Primary School in Tanzania, despite being a pioneer in inclusive education, accepting students with disabilities to learn alongside their peers, its commitment to inclusivity, the school faces challenges in providing appropriate education for deafblind children as follows;

1.3.1. The lack of technological learning tools, such as assistive devices for students or children with deafblind especially for students with hand disabilities and lack of entrepreneurship equipments. For example, a 6-year-old boy at the school, who is both deafblind and has a hand disability, struggles to participate in classroom activities due to the absence of specialized learning devices. While braille books and tactile sign language resources may be available to

some extent, there is a severe shortage of devices that could help him learn in a way that accommodates his physical limitations. This boy, like many others, faces difficulties in accessing reading materials and interacting with digital learning tools, which are critical for building foundational skills such as literacy and numeracy.

1.3.2. The lack of support and recognition from their parents regarding the importance of education. For example, we reacheda household of 9-year-old boy's parents, who, despite being enrolled in the school, stays at home regularly because his parents believe that his disability prevents him from benefiting from formal education. We struggled to understand them the long-term benefits that education can offer, both for his personal development and his integration into society. His parents feel uncertain about how to support his learning needs and are not fully aware of the resources available to help him succeed, such as specialized teachers, assistive technologies, and other educational accommodations. This challenge is widespread this can be caused due to cultural misconception.

1.3.3. The lack of health insurance coverage is leading to frequently medical absences for deafblind children disrupting their education. For instance, a 7-year-old boy, who is both deafblind and has chronic respiratory issues, often has to leave school to seek medical care. Due to the absence of health insurance, his family cannot afford the medical costs, forcing him to miss school frequently. As a result, his academic progress is hindered, and he struggles to catch up with his classmates. The interruptions in his education also affect his social interaction with peers and his overall development. So many families on low-income communities or countries cannot afford health insurance or are unaware about the availability option.

1.3.4. The lack of ongoing professional development and training for teachers especially in the use of technologies for deafblind students affect the quality of education. This challenge investigates how the absence of regular seminars, workshops, and training programs in assistive technologies and inclusive education methodologies negatively affects both the teachers' ability to teach effectively and the children's overall learning experience.

1.3.5. Inability to afford transportation costs especially during school holidays, Example Anna is a 5-year-old girl, who is both deaf and blind, lives in a rural village far from Dar es Salaam. Her

parents, who are farmers with limited income, are unable to afford the transportation fees for her to return home during school holidays. As a result, the girl is forced to stay at the school for much longer than intended, missing valuable time spent with her family. The isolation and lack of emotional connection with her parents can affect her psychological development, making her feel disconnected from her home life and community. Furthermore, when the holidays end, the girl's parents face the same financial challenge in sending her back to school. The lack of transportation resources causes delays in her return to school, leading to absenteeism. This disrupts her educational routine, making it difficult for her to catch up with her peers. The extended absence also contributes to the loss of learning momentum, which can hinder her academic progress and integration with the rest of the class.

CHAPTER TWO

METHODOLOGIES

This chapter outlines the research methodology used to explore the challenges faced by deafblind children, particularly focusing on those attending Uhuru Mchanganyiko Primary School in Dar es Salaam. The study aimed to examine the obstacles these children face in accessing education, with a special focus on factors such as transportation issues, lack of resources, and social integration challenges. A combination of data collection methods, including surveys, interviews, focus group discussions, and observations, was employed to gather comprehensive data from various stakeholders.

2.1 RESEARCH DESIGN

The research used a qualitative research design, which is ideal for exploring the lived experiences and perspectives of individuals facing specific challenges. A descriptive approach was chosen to understand the social, emotional, and educational experiences of deafblind children, their parents, caregivers, and teachers.

This research design allowed for a thorough examination of the challenges faced by deafblind children, and it was based on non-experimental methods of data collection, enabling an in-depth exploration of the experiences and perspectives of participants in their natural settings.

2.2 PARTICIPANTS

The study's participants included a range of stakeholders directly involved in the education and well-being of deafblind children. The selection of participants was based on their relevance to the research objectives, ensuring that diverse perspectives were captured. The participants were categorized as follows:

2.2.1 Parents and caregivers of deafblind children. A sample of four families was selected, with a focus on families residing in Dar es Salaam. These participants provided firsthand information about the daily challenges they face, especially in relation to transportation, educational support, and family dynamics.

2.2.3. Teachers and school administrators, including the headmistress of Uhuru Mchanganyiko Primary School, were interviewed to gather insights into institutional challenges and the support systems in place for deafblind students.

2.2.4. Community members and other children at the school, who are not deafblind, were included in the study. These participants helped to provide a comparative understanding of how children with disabilities are perceived and integrated into the community.

2.2.5 Deafblind children (aged 5 to 10 years) attending Uhuru Mchanganyiko Primary School. These children were observed in classroom settings and participated in non-verbal communication activities where possible.

A total of four families, consisting of parents and their deafblind children, were specifically selected from Dar es Salaam for in-depth interviews. Additionally, the research involved *focus group discussions* with caregivers and community members, and classroom observations* of the deafblind children's interactions with teachers and peers.

A figure which shows deafblind children at low income societies

2.3 DATA COLLECTION METHODS

To gather comprehensive data on the challenges faced by deafblind children in accessing education, a variety of data collection methods were employed. These methods included interviews, Survey, observations, and focus group discussions, involving key stakeholders such as caregivers, parents, teachers, school administrators, non-deafblind children, and community members. These methods helped to provide a well-rounded understanding of the educational barriers and social challenges faced by deafblind children.

The following data collection methods were used:

2.3.1 INTERVIEW
A. Interviews with Caregivers

Two caregivers working directly with deafblind children at Uhuru Mchanganyiko Primary School were interviewed. The caregivers provided valuable insights into their daily experiences and challenges.

Example of questions asked:

-How do you communicate with children like John (6 years old, deafblind)? What methods or tools do you use to help him understand the lessons?

- Can you share some of the challenges you face in caring for deafblind children like Maria (7 years old, deafblind)?

- What kind of support do you need to provide better care for these children in school?

These interviews helped the researchers understand the specific challenges caregivers face in communicating and assisting the children with daily tasks, learning, and personal care.

B. Interviews with Parents

Interviews were conducted with four parents of deafblind children from Dar es Salaam. The goal was to understand their challenges in raising and educating their children.

- How do you feel about the education your child, Ahmed (5 years old, deafblind), is receiving at school? Do you think it meets his needs?

- What challenges do you face in transporting your child to school every day? Do you think the financial costs of transportation impact Ahmed's school attendance?

- What additional resources or support would you like to see from the school to help your child succeed?

For example, Ahmed's mother explained that transporting him to school was a significant financial burden as they had to rely on public transport, which was often unreliable. This issue frequently caused interruptions in Ahmed's education.

C. Interviews with Teachers

Interviews with teachers focused on their experiences teaching deafblind children, specifically how they adapt their teaching methods.

Example of questions asked:

- How do you teach children like Peter (8 years old, deafblind) who cannot hear or see? What specific tools or strategies do you use in the classroom?

- Do you feel equipped to teach deafblind children? What training or resources would help you in your work with them?

- How do you ensure that children like Peter are included in group activities and are able to interact with their peers?

Peter's teacher described using tactile methods such as hand-over-hand instruction and the use of textured materials to help Peter participate in class activities. However, they noted a lack of specialized training in working with deafblind children.

D. Interviews with School Administrators

The school administrators, including the headmistress, were interviewed to explore the institutional support and resources available to deafblind children.

-What support does the school provide for children with disabilities, specifically those who are both deaf and blind, like Sara (9 years old, deafblind)?

- Are there any challenges in providing specialized education to these students?

- How do you collaborate with parents and caregivers to ensure that children like Sara receive the education they need?

The school administrators discussed the challenges of providing specialized resources, noting that there were no specific assistive devices available, and teachers often had to improvise. They also highlighted the limited availability of sign language interpreters for the deafblind students.

E. Interviews with Non-Deafblind Children

Interviews were conducted with non-deafblind children to understand their perceptions and interactions with their deafblind peers.

- How do you interact with your classmate, John, who is deafblind? Do you help him in class?

- Do you think children like John participate in the same activities as other students? Why or why not?

For instance, Mark (10 years old, non-deafblind) shared that he tries to help John during playtime, but sometimes he doesn't know how to communicate with him effectively. This reflects the need for more education among peers about how to interact inclusively with deafblind children.

F. Interviews with Community Members

Interviews with community members aimed to gauge the broader societal attitudes towards deafblind children and to understand the challenges families face in accessing support.

Example of questions asked:

- What do you think about the education of deafblind children in your community?

- Are there any support services or organizations that assist children with disabilities, especially those who are both deaf and blind?

A local community member, Fatima, shared that while there were some charitable organizations helping children with disabilities, the focus was often on mobility aids rather than educational resources, which made it difficult for children like Sara to receive the full education they need.

2.3.2 SURVEY AS A METHOD OF DATA COLLECTION

In addition to interviews, a survey was conducted to gather data from a larger sample of families with deafblind children. This method allowed for a broader collection of data and helped to capture the experiences and challenges faced by families in different contexts. The survey was designed to explore the various challenges these families encounter, such as financial constraints, access to medical care, and educational opportunities for their deafblind children.

The survey was conducted with four sampled households located in different parts of Dar es Salaam in Tanzania each with a child who is deafblind. By including families from diverse backgrounds, the study aimed to identify common challenges, as well as any differences in the experiences of families living in different areas of the city.

I. Family 1: Kariakoo, Dar es Salaam

In Kariakoo, a densely populated area in Dar es Salaam, we interviewed a family with a deafblind child named Anna (6 years old). Anna is both deaf and blind, which makes it especially difficult for her to access education and interact with her peers. Her family faces financial struggles, and transportation to and from the school is a significant challenge.

- How often does Anna attend school? What challenges prevent her from attending regularly?

-What resources are available to you as a family to support Anna's education and communication needs?

- What is the biggest challenge you face in providing care for Anna? Is it financial, medical, or related to school attendance?

Anna's parents explained that, due to financial constraints, they often struggle to afford transportation costs, which means that Anna's attendance at school is inconsistent. Additionally, her family lacks access to specialized assistive devices, making it harder for Anna to learn effectively.

II. Family 2: Kinondoni Municipal, Dar es Salaam (Single Mother)

In Kinondoni Municipal, we surveyed a *single mother* whose child, *Ahmed* (5 years old), is a deafblind student at *Uhuru Mchanganyiko Primary School*. Ahmed's mother, who lives alone with him, faces significant challenges in supporting her son's education.

Example of survey questions:

- As a single mother, how do you balance work and caring for Ahmed?

- What barriers have you encountered in accessing education for Ahmed? (e.g., lack of transportation, lack of special educational resources, etc.)

- How do you manage medical needs for Ahmed, such as regular checkups or treatment?

Ahmed's mother explained that her biggest challenge was finding transportation to take Ahmed to school and medical appointments. Being a single mother, she does not always have the financial resources or time to meet these needs. Moreover, Ahmed's mother reported feeling isolated and sometimes unsure of how to advocate for her child's rights and education.

III. Family 3: Mbagala, Dar es Salaam (Father and Mother)

The third family we surveyed is based in Mbagala, a lower-income neighborhood in Dar es Salaam. This family has a daughter named Mariam (8 years old), who is also deafblind. Mariam's parents, although both employed, struggle to access specialized education for her due to financial constraints and the limited availability of appropriate learning tools.

Example of survey questions:

- How do you communicate with Mariam and support her in her learning?

- What financial challenges do you face when trying to support Mariam's education?

- Do you feel that the community supports you in raising a deafblind child?

Mariam's parents shared that they often have to rely on informal teaching methods at home, as the school lacks the resources to support Mariam effectively. They also mentioned that the community is not very supportive, and they face stigma when they try to access services for Mariam.

IV. Family 4: Temeke, Dar es Salaam (Extended Family)

The fourth family is located in *Temeke*, another area in Dar es Salaam, and they have a deafblind son named *Juma* (7 years old). Juma's family consists of extended family members, including his grandmother, uncle, and cousins. Juma's parents live outside the city, and he is primarily cared for by his grandmother, who has limited knowledge of how to care for a deafblind child.

Example of survey questions:

- How does Juma's grandmother manage his daily needs, and what support does she receive from the rest of the family?

- What challenges has Juma faced in trying to access education and healthcare?

- What are your biggest concerns about Juma's future education and social integration?

Juma's grandmother expressed that she finds it difficult to communicate with him due to a lack of knowledge about the specific needs of deafblind children. She noted that there is a lack of community awareness, and they often face challenges accessing educational resources for Juma, such as specialized teachers or adaptive learning materials.

2.3.3 FOCUS GROUP DISCUSSIONS

Focus Group Discussions (FGDs) are a widely used qualitative research method that involves guided discussions with a small group of participants, typically ranging from 6 to 12 people. This method provides rich, in-depth data about people's attitudes, beliefs, experiences, and perceptions. In the context of this research, FGDs were used to gather detailed insights from various stakeholders about the challenges and opportunities in educating deafblind children in low-income communities, particularly at Uhuru Mchanganyiko Primary School and other local areas in Dar es Salaam.

FGDs are especially useful for:

- Exploring group dynamics and shared experiences.

- Understanding social norms and collective opinions.

- Encouraging participants to discuss and reflect on each other's viewpoints.

Objectives of Focus Group Discussions in This Study

The key objectives of using FGDs for this research were:

1. To explore the experiences and challenges faced by parents, caregivers, teachers, and community members in supporting the education of deafblind children.

2. To gather opinions and suggestions on potential solutions for improving educational access and the quality of life for deafblind children in low-income areas.

3. To foster collaboration among different stakeholders in the education system, to create a shared understanding of the challenges and opportunities for supporting deafblind children.

The FGDs were conducted with a carefully selected group of participants, including individuals who are directly involved with or have insight into the education and well-being of deafblind children. Participants were divided into different groups based on their roles and experience. The groups included:

I. Parents and Caregivers of Deafblind Children: This group consisted of parents or family members who are responsible for the daily care and education of deafblind children. Their firsthand experiences provided valuable insights into the challenges families face.

Ii. Teachers and School Administrators: A separate group discussion was held with teachers and administrators from *Uhuru Mchanganyiko Primary School*, a school that includes deafblind children in its classrooms. This group helped explore the educational challenges from the perspective of those directly involved in teaching and school management.

III. Community Members and Non-Disabled Children: Another group of participants was made up of community members, including children who are not deafblind, and other stakeholders from the local community. This helped understand how deafblind children are perceived by their peers and community members.

IV. Health Care Providers: A group discussion was also conducted with local health care professionals to understand the health challenges faced by deafblind children and their families, especially in terms of access to medical services and assistive technologies.

Structure and Process of Focus Group Discussions

The FGDs followed a structured format, with a trained facilitator guiding the conversation. The discussions were designed to allow participants to share their thoughts freely while still focusing on specific topics relevant to the study. Each session was recorded and transcribed for analysis. The facilitator ensured that all participants had the opportunity to speak and that the discussions remained respectful and productive.

Key Topics Discussed in the Focus Group Discussions

1. Challenges in Accessing Education for Deafblind Children:

   - What are the main challenges that you face in providing education to deafblind children?

   - How do you overcome barriers to education, such as lack of transportation, financial constraints, or lack of appropriate educational resources?

Example: During a discussion with parents, *Ahmed's mother*, a single mother, shared that transportation costs were a major barrier. She explained, "I often cannot afford the bus fare to take Ahmed to school or to the doctor, so he stays home more often than I would like."

2. Communication Methods and Teaching Strategies:

   -What communication methods do you use to interact with deafblind children, and how effective are they?

- How do teachers adapt their teaching methods for deafblind students, and what support do they need to improve?

 Example: One of the teachers, Fatima, shared how she uses tactile communication (touch-based methods) to help deafblind students, but acknowledged the need for more training. "We use touch signals to communicate with students, but it's not always enough. We need better resources and support," she stated.

3. Community Perception and Social Inclusion:

   - How do you perceive deafblind children within the community? Are they included in social and recreational activities?

   - What role can the community play in supporting the education and inclusion of deafblind children?

Example: In a group with community members, *Mariam's father* shared that the community often feels uncomfortable interacting with deafblind children, and this contributes to social

isolation. He said, "People don't know how to engage with children like Mariam, so they avoid her, and that makes her feel excluded."

4. Medical and Health Care Needs:

- What are the common medical needs of deafblind children, and how are these needs met?

- What improvements in health care are necessary to better support deafblind children?

Example: A healthcare worker mentioned that regular checkups are important for deafblind children but that many families cannot afford medical treatment. "Children need regular checkups, but many parents can't afford the costs, so children often go without the care they need."

5. Technological Tools and Assistive Devices:

- What technologies or assistive devices are being used to support the learning and development of deafblind children?

- What additional tools or resources are needed to improve education and care for deafblind children?

Example: One of the teachers noted the absence of specialized devices for deafblind students. "We need more assistive devices such as Braille materials and audio technology, but they are too expensive for many families," she explained.

2.3.4 OBSERVATIONS

Observation was an essential method used in this study to collect data on the behaviors, interactions, and challenges faced by deafblind children in their educational environment. Through direct observation in the classroom and community settings, the research team was able to gain a firsthand understanding of how deafblind children interact with their peers, teachers, and caregivers. For example, during classroom sessions at *Uhuru Mchanganyiko Primary School*, the researcher observed how a six-year-old boy named *Hassan*, who is both deaf and blind, relies on tactile communication methods like touch signals and hand-over-hand guidance to participate in class activities. These observations revealed the gaps in communication methods

and the limited resources available to support effective learning for deafblind students. Additionally, the research team observed the interaction between non-deafblind children and their deafblind peers, noting how social inclusion and exclusion patterns occurred, which contributed to a deeper understanding of the social dynamics at play. Through this method, the research team was able to collect data that might not have been captured through interviews or focus groups, providing richer insights into the real-life challenges of deafblind children in low-income educational settings.

2.4 GENERAL SOLUTIONS TO ADDRESS THE CHALLENGES FACED BY DEAFBLIND CHILDREN

Based on the findings from the data collection methods — including interviews, surveys, focus group discussions, and observations — the following five solutions are recommended to reduce or eliminate the challenges faced by deafblind children in low-income communities like Dar es Salaam:

1. Enhancing Access to Assistive Technology and Learning Tools:

   - Solution: Provide schools, caregivers, and families with access to affordable assistive devices such as Braille readers, tactile communication tools, and audio support systems.

   - Example: Schools should be equipped with technology like screen readers and tactile graphics, which will allow deafblind students, such as Ahmed, to access educational content and communicate more effectively. This will not only improve learning outcomes but also provide greater independence for the children.

2. Community Awareness and Inclusion Programs:

   - Solution: Conduct regular community sensitization programs to raise awareness about the needs and capabilities of deafblind children, aiming to reduce stigma and promote social inclusion.

Example: Workshops should be held for parents, community leaders, and peers (such as students from the general population) to foster understanding and inclusion. *Mariam's* classmates, for

instance, could benefit from training on how to better interact with their deafblind peers, creating a more inclusive social environment.

3. Improved Teacher Training and Professional Development:

   - Solution: Provide specialized training for teachers on the needs of deafblind students, including strategies for effective teaching, communication techniques, and the use of assistive technologies.

   - Example: Teachers at *Uhuru Mchanganyiko Primary School* should be trained in sign language and tactile communication methods to better support students like *Ahmed*, who faces challenges due to his dual disabilities. In addition, regular seminars should be organized to keep teachers up-to-date on current trends in special education for deafblind children.

4. Government and Institutional Support for Financial Assistance:

   - Solution: Advocate for policies that provide financial support for families with deafblind children, including transportation subsidies, school fees waivers, and access to health care.

- Example: Government programs should be introduced to subsidize transportation costs for children like Anna, who lives in Kariakoo and struggles with the expense of commuting to school. This would allow more children to attend school regularly and receive the necessary medical care.

5. Collaboration Between Schools, Families, and Health Services:

   - Solution: Establish strong partnerships between schools, families, and healthcare providers to ensure that deafblind children receive holistic support, including educational, social, and medical assistance.

   - Example: Schools should collaborate with local health facilities to provide regular health check-ups and offer physical and occupational therapy for children like *Hassan*, who may have additional health challenges. Additionally, caregivers and parents should be regularly consulted to ensure that the needs of the children are met both inside and outside the classroom.

2.5 LIMITATIONS OF THIS RESEARCH

These are some limitations that we face from conducting this research

Titled"Voices of Hope: Empowering Deafblind Children to Access Education"

A. Limited Access to Participants:

   - Limitation: Due to the sensitive nature of the topic, gaining access to families with deafblind children proved difficult. Many parents were initially hesitant to participate in interviews or focus group discussions, particularly in rural and low-income areas, where there may be a lack of awareness about the importance of research.

   - Impact: This resulted in a smaller sample size than originally planned, and there were some delays in recruitment. As a result, the findings may not be as comprehensive as desired, limiting the generalizability of the conclusions.

B. Financial Constraints and Lack of enough Resources:

- Limitation: Conducting research in low-income communities comes with significant financial challenges, including the cost of travel, accommodation, and materials for data collection. For example, reaching families living in remote or underserved areas required additional resources for transportation and logistics.

   - Impact: These financial constraints limited the scope of the research and prevented the inclusion of a wider geographic area. This may have impacted the depth of data collected, as not all regions were accessible.

C.Language and Communication Barriers:

   - Limitation: In low-income societies, many caregivers, parents, and community members had limited literacy or struggled with fluency in the language used for the research. Communication barriers were especially noticeable when working with children who are deafblind, as their primary means of communication (such as tactile signing) might not have been fully understood by all involved in the research process.

- Impact: Miscommunication or incomplete understanding during interviews and focus groups may have affected the quality of data collected. Researchers also had to rely on interpreters for some interviews, which added an extra layer of complexity to the process.

D. Limited Availability of Assistive Devices for Observation:

  - Limitation: While the researchers were able to observe children's interactions and learning environments, many of the deafblind children lacked the necessary assistive devices that could have enhanced their learning experiences. For example, some children were unable to use Braille readers, tactile books, or communication boards, which made it difficult for researchers to observe full learning potential.

Impact: The absence of these tools meant that observations were limited to more basic methods, and researchers were unable to assess the effectiveness of certain assistive technologies or educational techniques in depth.

E. Cultural and Social Stigma:

  - Limitation: In some communities, there is significant stigma surrounding disability, especially when it comes to children who are both deaf and blind. As researchers, we faced challenges in approaching families who were reluctant to discuss the disabilities of their children, due to fear of judgment or social isolation.

2.6 RECOMMENDATIONS
To improve the education and well-being of deafblind children in low-income countries, several key recommendations can be implemented, tailored to the specific challenges these communities face. Here are some recommendations with vivid examples:

1. Conduct awareness campaigns to educate communities, parents, and educators about deafblindness and the capabilities of children with this condition. This will help reduce stigma and promote social inclusion.

  - Example: In Tanzania, community-based organizations like VIWATA (Viziwi Wasioona Tanzania) have been conducting awareness campaigns to inform the public about the challenges

and needs of the deafblind community. These campaigns have helped reduce social isolation by educating families on how to better support their deafblind children.

2. Governments and NGOs should work together to provide affordable assistive devices, such as Braille books, tactile communication boards, and hearing aids, for schools and families.

- Example: A school like Uhuru Mchanganyiko Primary School in Dar es Salaam could benefit from a partnership with international organizations to provide subsidized assistive technologies. For example, The Perkins School for the Blind has been involved in providing accessible materials and equipment to schools in low-income countries, improving educational access for children with disabilities.

3. Teachers should receive specialized training to work with deafblind children, focusing on alternative communication methods (like tactile sign language), assistive technology usage, and inclusive teaching strategies.

- Example: In Kenya, the Kenya Institute of Special Education (KISE) has been training teachers on how to support children with various disabilities, including deafblindness. These efforts have resulted in more inclusive classrooms where teachers are better equipped to meet the diverse needs of students with disabilities.

4. Provide financial support, such as transportation subsidies or medical assistance, to families of deafblind children who struggle with the high costs of education and healthcare.

- Example: In Uganda, organizations like The National Union of Disabled Persons of Uganda (NUDIPU) offer small grants to families to help cover the costs of sending their children with disabilities to school. Additionally, programs could provide free or subsidized transportation for families living in remote areas, similar to what is offered to children like Anna, whose family in Kariakoo struggles with transportation costs.

5.Encourage schools to foster inclusive environments by creating opportunities for deafblind children to interact with their peers, whether through collaborative learning activities, sports, or artistic programs.

- Example: In South Africa, schools such as The Deafblind Centre in Cape Town have organized activities where deafblind children and non-disabled children work together on community projects. These activities not only improve the learning experience but also help both groups develop empathy and social skills.

6. Create long-term educational programs that follow deafblind children through their academic journey, ensuring they have the resources they need at each stage. Additionally, vocational training programs should be available for older students to help them gain independence.

- Example: In India, organizations like Sense International India provide vocational training programs for young adults with deafblindness, helping them learn skills such as weaving, embroidery, or computer skills, which allow them to become financially independent after completing their education.

By implementing these recommendations, low-income countries can help provide deafblind children with the education, support, and opportunities they need to thrive. With the right infrastructure, training, and community engagement, these children can be empowered to lead fulfilling lives and participate fully in society.

2.7 CONCLUSION

The research titled "Voices of Hope: Empowering Deafblind Children to Access Education" highlights the significant challenges faced by deafblind children in low-income societies, particularly in terms of access to education, social inclusion, and necessary resources. Through interviews, surveys, group discussions, and observations, this study has explored the barriers these children encounter in their educational journey, such as the lack of specialized teaching methods, assistive technologies, and the financial constraints faced by their families.

However, the research also emphasizes that despite these challenges, there is hope. The children, parents, caregivers, and teachers at schools like Uhuru Mchanganyiko Primary School have shown resilience and determination to overcome the hurdles. For example, children like Anna and Ahmed continue to pursue their education, even in the face of severe financial constraints and limited resources. This resilience underscores the importance of advocacy, proper support,

and inclusivity in the education system to provide deafblind children with the tools they need to succeed.

The title, "Voices of Hope," aptly reflects the core message of this research: that despite the numerous challenges these children face, their voices, along with those of their caregivers, parents, and teachers, can still bring about change. Through increased awareness, better teacher training, improved access to assistive technologies, and greater community support, there is a clear pathway to creating a more inclusive education system. As a result, deafblind children can be empowered to achieve their full potential, breaking down the barriers that currently hinder their education and social participation.

In conclusion, this study calls for collective efforts from governments, educators, families, and communities to ensure that deafblind children in low-income societies have access to quality education, resources, and opportunities to lead successful, independent lives. By giving these children, the tools and support they need, we can help turn their voices of hope into a reality.

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