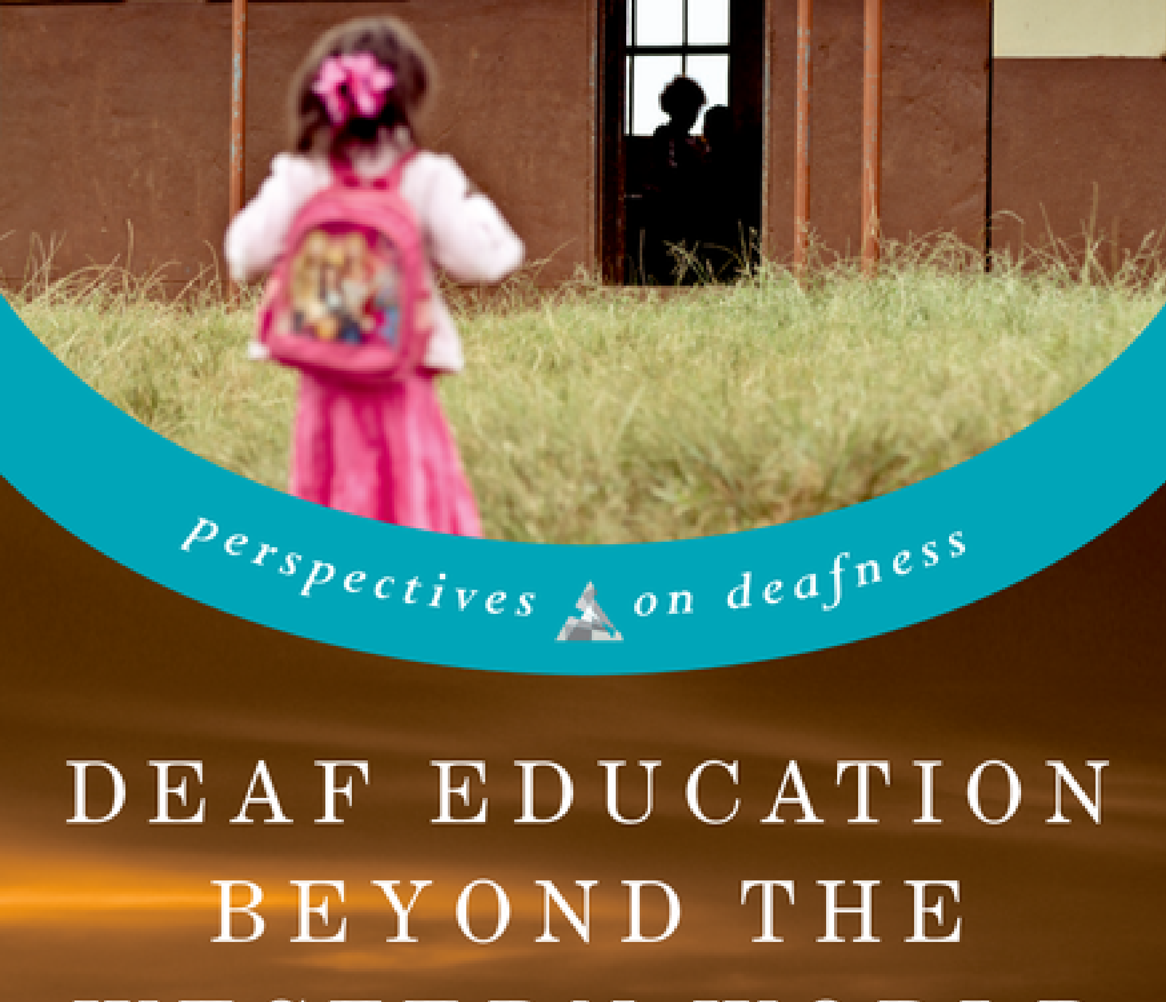

DEAF EDUCATION BEYOND THE WESTERN WORLD

Edited by Harry Knoors,
Maria Brons, and Marc Marschark

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Preface

In 2014, Oxford University Press published *Teaching Deaf Learners: Psychological and Developmental Foundations* (Knoors & Marschark, 2014). That book explored how deaf students (children and adolescents) learn, and what kind of conditions support them in reaching their full cognitive potential—or not. Beginning with an introduction to teaching and learning of both deaf and hearing students, the book reflected an ecological approach to deaf education, emphasizing the need to take into account characteristics of learners and of their educational contexts.

Reflecting back on the 2014 book recently, we recognized that the ecological approach described—and the research cited to support it—was based only on research and practices in Western countries, since over 95% of the research related to the education of deaf children has been either carried out and/or published in Western countries. These are countries in which the prevalence of congenital or early acquired hearing loss is typically very low (0.1–0.5% of all children)—that is, what is considered a low-incidence disability. Meanwhile, there is a dearth of academic publications about the education of deaf learners and its effects in countries in the Global South as well as in other countries "beyond the Western world." In those countries, the prevalence of hearing loss in children is considerably higher than in high-income countries in the West.

The recently adopted Sustainable Development Goals, or Agenda 2030, and the international legal framework of the United Nations Convention on the Rights of Persons with Disabilities that was ratified by more than 170 countries from all over the world encourage and enable those working in the field of deaf education to place their interventions into a legal, rights-based context as well as into the inclusive development paradigm summarized by the slogan "leave no one behind." This position opens opportunities to improve educational conditions of deaf learners in countries not only in but definitely also beyond the Western world, conditions that need to be provided by policymakers, by the international donor community, and, first and foremost, by professionals from those countries who are directly involved in deaf education.

Instead of simply trying to implement the insights of *Teaching Deaf Learners* and "Western research" in contexts rather different from those in the West, this volume is aimed at something different. Our goal in

creating this collection of chapters is to disseminate academically informed knowledge about deaf education constructed by scholars and practitioners in countries in Central and Eastern Europe, Africa, Asia, and Latin America in order to identify the strengths and needs of deaf learners and deaf educators in those countries and to help move deaf education forward. This initiative was applauded in a meeting with many attendees from countries beyond the Western world at the 22nd International Conference on the Education of the Deaf in Athens, Greece, in 2015. We are grateful to the international colleagues who indicated their willingness to take up the initiative of the ad hoc gathering with us. We are also grateful to critical thinkers in our own working environments who provided us with helpful comments in the process.

In planning this volume, we identified scholars from various countries who might contribute chapters through personal contact, literature searches, and searches on the Internet. We did our best to include a broad geographical and cultural sampling, although we recognize that some scholars reading this book will think they or their countries should have been included. For any such omissions and shortcomings, we offer our sincere apologies. Nevertheless, upon invitation, reactions from our contributors were overwhelmingly enthusiastic, and we are proud of the collection that is presented in this volume.

As a result of our international initiative, this volume includes chapters about best practices and challenges from nineteen countries across the world, countries in Africa, Asia, Latin America, and Central and Eastern Europe. The chapters are written by scholars and practitioners who live and work in these countries, sometimes coauthored by colleagues from "the West." The volume thus offers a picture of deaf education beyond the Western world from the perspective of local scholars associated with educating deaf and hard-of-hearing learners, the people who live it and know it best. The picture that emerges about deaf education in mostly vast countries is one that often reflects considerable regional and local variation. Thus, it is certainly possible—indeed likely—that not each and every regional or local program or practice within a country is accounted for in the relevant chapter. But, in general, our colleagues have succeeded in providing a valuable insight into deaf education in their respective countries, and we all recognize that presented facts and figures are the sole responsibility of chapter contributors. Their efforts have enabled us to bring together practice-based evidence (and whenever possible research-based evidence) about deaf education in countries that largely have been left out of the international discussion thus far, and we are very grateful to them!

We hope this volume encourages more researchers in more countries to continue investigating the learning environment of deaf learners and develop evidence-based foundations for further improvement of

deaf education for all deaf children, leaving no one behind. We also hope to stimulate academic exchange, regionally and globally, among scholars who are fascinated by deaf education. And just maybe this initiative, and whatever might evolve from it in the coming years, can help to get us closer to realizing Goal 4 of the worldwide Sustainable Development Goals of the United Nations: to ensure by 2030 inclusive and equitable education and promote lifelong learning opportunities for all, including deaf and hard-of-hearing children and adults.

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1

Deaf Education Beyond the Western World: An Introduction

Harry Knoors, Maria Brons, and Marc Marschark

THE ISSUE

Educating deaf learners successfully depends on interventions and targeted approaches to teaching and learning, both at home and at school, that take into account the characteristics of deaf children and the physical, economic, cultural, and social contexts in which they grow up. The ways in which children are raised are greatly influenced by the region or country where the family lives. Research into the effectiveness of educational approaches for deaf learners—or any other population of children—thus needs to be ecologically situated, because the geopolitical context in which the research is carried out will influence the results. To ensure that research is ecologically valid, and hence useful, research that has been conducted in a specific country or region with its political, economic, and cultural specifics ideally should be replicated in other regions or countries. Only then can we be sure of the applicability (generalizability) of research results to those differing contexts.

According to UNICEF, over 90% of the research related to developmental disabilities has focused on the situation of children in developed countries. Knowledge about developmental disabilities in developing countries comes mostly from small-scale studies, often focusing on specific, local situations that may not be typical (Bornstein & Hendricks, 2013). The situation concerning the development and education of children with congenital or early-acquired hearing loss is much the same. Most research about the education of deaf and hard-of-hearing children (DHH) has been carried out (and published) in the United States, the United Kingdom, Australia, and Western Europe. There is a dearth of academic publications about the education of DHH learners and its effects in countries in the Global South as well as in other countries "beyond the Western world."

To improve education for DHH children in countries, for example, in Africa, Asia, Middle and Latin America, and Eastern Europe, it is not sufficient simply to apply research results obtained in countries in the West. To do so is to ignore the specific political, economic, and cultural

contexts in a given situation, risking a mismatch between findings and needs or, at worst, the potential to do significant harm, either in the short term or the long term. Rather, we must focus on the specific, local contexts in which deaf education is situated, together with any international obligations that might influence how education is to be conducted in these contexts. Variation can also exist within the same country, determined by differences in language, parents' literacy rates, attitudes and beliefs related to disability, and differences between urban and rural environments. Only by critically reflecting on these differences and taking them into account in research can we build ecologically valid approaches to deaf education that meet the needs (within available resources) for countries beyond the Western world.

BEYOND THE WESTERN WORLD

Using the phrase "beyond the Western world" suggests that some countries are considered to belong to this Western world and other countries are outside or beyond this world. What determines whether you are in, out, or beyond? In reality, the concept of "the Western world" is very loosely described and has changed considerably over time. It might even be considered a rather old-fashioned term, deriving from the East–West divide that started to fall apart in the 1980s. It is a term that, given the globalizing world and the nonlinear developments we are witnessing, can be considered somewhat misplaced.

Using more contemporary notions of Global South versus Global North, a terminology that was introduced in order to get away from the rather normative notion of "developed" and "developing" countries, might seem more appropriate. However, as Friedner (2017, p. 138) correctly notes in relation to deaf studies, "while the categories of global South and global North provide useful framing and a productive way to discuss political economic inequalities, the categories need to be rendered nuanced and specific. Locations, histories, and contexts within the categories of global North and global South must be considered." Indeed, it is important to differentiate and look beyond the surfaces of (and across) conventional categorizations. Therefore, any choice made in categorization can be considered a politically incorrect choice, or a choice leaving room for discontent. The countries represented in this volume, according to our analysis, have a few characteristics in common. Politically, economically, culturally, these countries, societies, or strata within these societies may qualify as being part of the Western world. However, referring to the focus of this volume, they are nevertheless portrayed as countries beyond the Western world, at least as far as deaf education and research related to deaf education are concerned.

In the world of deaf education, Middle Eastern countries such as Jordan; African countries such as Morocco, Ghana, Namibia,

Kenya, Tanzania, and Zimbabwe; Middle and South American countries such as Mexico and Brazil; and Asian countries such as India, Sri Lanka, China, and Viet Nam all can be seen as "developing" even if they are economically, culturally, and/or politically well-developed. And even countries like Chile, Poland, Taiwan, and Croatia are in this context to some extent "developing." That is because we have to take into account the demographics of congenital and early-acquired deafness, which have a much higher incidence in the Global South (Leigh, Newall, & Newall, 2010); the state of affairs in healthcare, such as the maternal mortality rate in Central and Eastern European countries, which is considerably higher than in Western Europe (Miteniece, Pavlova, Rechel, & De Groot, 2017); and the availability of research and research publications (or the lack thereof), even in countries like Taiwan, Poland, Croatia, and Chile. Taken together, these considerations broaden the countries that may be viewed as "beyond the Western world," at least for the present purposes. Clearly, this is not intended in general, geopolitical, or cultural terms but specifically in the context of the focus of this volume: deaf education.

And finally, we acknowledge that colleagues in sparsely populated regions of some Western countries, including northern Canada, central Australia, and rural areas in the United States, including southwestern states and Alaska—places where parents often are less informed of educational needs and alternatives for their deaf children and fewer educational and health services are available—confront many of the same challenges as their colleagues beyond the West.

PREVALENCE OF EARLY CHILDHOOD HEARING LOSS

According to the World Health Organization (WHO), 1.4% of the people in the world have developmental disabilities and 80% of them live in countries in the developing world. Of all children with disabilities, nearly 90% reside in low- and middle-income countries. In 1990, at the World Summit for Children, agreement among 159 countries yielded the World Declaration on the Survival, Protection and Development of Children and its Plan of Action. Subsequently, UNICEF developed a Multiple Indicator Cluster Survey (MICS, see http://www.childinfo.org/ mics3.html), including a "Ten Questions Screen," in order to provide a nationally representative and internationally comparable overview of households with disabled children (Bornstein & Hendricks, 2013). Screening in low- and middle-income countries resulted in percentages of children with at least one disability ranging from 3.1% (Uzbekistan) to 45.2% (Central African Republic). Across all countries, 1.9% of all children tested positive for hearing loss (see Leigh et al., 2010).

The impact of having a disability on the lives of children is considerable, particularly in developing countries. In a study including 8,900 children with disabilities and over 890,000 without disabilities in thirty countries receiving support from Plan International (an organization advancing children's rights), Kuper et al. (2014) showed that children with disabilities were less likely to attend formal education. Those who did attend school were educated at lower levels—for fewer years and with fewer resources—than their nondisabled peers. Children with disabilities also were reported to suffer serious illness more frequently than nondisabled peers in the year before the study. The direct and indirect impact of disability clearly is detrimental to the future prospects of these children.

According to Olusanya, Neumann, and Saunders (2014), in 2011, 360 million people in the world were thought to suffer from a disabling hearing loss (one that interfered significantly with day-to-day life). Among them were 32 million children younger than 15 years of age and 7.5 million children 5 years of age or younger. Of approximately 141 million live births in 2012, most (27 million) occurred in developing countries. Olusanya et al. estimated that in those developing countries, the incidence of congenital or early-acquired hearing loss was six in every 1,000 births, at least three times higher than in developed countries.

A disabling hearing loss in children is defined by the WHO as a hearing loss greater than 40 decibels in the better ear. The prevalence of a disabling hearing loss in children ranges from 2.4% in South Asia and 1.9% in sub-Saharan Africa, to 1.6% in Central and Eastern European countries and 1.6% in Latin America and the Caribbean, to 0.9% in the Middle East and North Africa; the rate is 0.5% in high-income countries (WHO, 2012). The WHO (2017) suggests that 60% of all cases of childhood hearing loss potentially could be prevented. In developing countries, preventable causes constitute 75% of all cases, compared to 49% in developed countries. These preventable causes include infections such as rubella, measles, and mumps; birth complications such as asphyxia; and the use of ototoxic medicines by pregnant mothers.

A 1995 resolution of the WHO emphasized the need for routine childhood vaccinations against infections that cause hearing loss. In addition, genetic counseling with regard to heritable causes of deafness in regions with high rates of consanguineous marriages also was advocated. In countries such as China, India, and Nigeria, this has resulted in the establishment of national hearing care programs or agencies (Olusanya et al., 2014). But there is much more to be done.

With regard to possible interventions for children with hearing loss, the WHO (2017) noted that early intervention and schooling are not provided to many such children who live in developing countries. As chapters in this volume will attest, when there are schools serving deaf

children, they frequently were created by—and still may be run by—missionaries or religious orders. Reports from those countries indicate that, as a result, such schools frequently focus on teaching religious rather than academic content, and indigenous sign languages often are replaced by the languages brought by the missionaries (e.g., American Sign Language or British Sign Language).

With regard to providing DHH children with hearing aids, the global production meets only 10% of world demand and less than 3% of the demand in developing countries. The costs for acquiring devices such as hearing aids and cochlear implants are beyond what most people in low- and middle-income countries can afford. When provided to children through nongovernmental agencies, hearing aids frequently are appropriated by family or community elders with age-related hearing losses. Olusanya et al. (2014) noted that according to the WHO, the target price for affordable hearing aids should not exceed 3% of the per capita income in a country. According to that definition, the affordable cost of hearing aids in Bangladesh, India, Kenya, Malawi, and Nigeria, at the time would have been 26, 46, 26, 10, and 43 U.S. dollars, respectively. While such target prices are small fractions of the prices of hearing aids in developed countries, they clearly are not attainable for many people in low-income countries. Further, beyond the initial cost of the hardware are the costs of ear molds and batteries as well as device maintenance. "The scenario is even more daunting for cochlear implants, which are associated with an estimated lifetime cost of about US$ 90,000 per child with severe to profound hearing impairment" (Olusanya et al., 2014, p. 368). Thus, although the effectiveness of hearing aids and cochlear implants for children with hearing loss has been demonstrated in many studies in the West, in terms of benefits as well as costs, acquiring and maintaining these devices is beyond the scope of many families outside the West, certainly those in developing countries.

DISABILITY AND POVERTY

Poverty is reciprocally related to disability. Poverty may result in health problems, resulting in disabilities, whereas having a disability may result in no, or less effective, education and no, or less well-paid, employment, thus eventually leading to poverty (Bornstein & Hendricks, 2013). This pattern is seen in developed countries in the West as well as developing countries (Gwatkin, Rutstein, Johnson, Suliman, Wagstaff, & Amouzou, 2007). However, the problem is much more pronounced in those low- and middle-income countries beyond the West.

Filmer (2008) analyzed disability, poverty, and schooling in fourteen household surveys, representing thirteen developing countries. He concluded that having a disability from childhood on increased the

chance of adults' falling in the two most extreme categories of poverty by 10%. The primary cause for this is the lack of education. He therefore concluded that

> . . . it is particularly worrisome that children with disabilities are almost always much less likely to participate in schooling than are other children. They are also less likely to start school, and in some countries they have lower transition rates. The school participation disability deficit is typically larger than deficits associated with characteristics such as gender, rural residence, or economic status. (p. 159)

Filmer further suggested that "in developing countries disability is associated with long-run poverty, in the sense that children with disabilities are less likely to acquire the human capital that will allow them to earn higher incomes" (2008, p. 159).

In a related study, Mitra, Posarac, and Vick (2013) addressed the relation between multiple dimensions of poverty (e.g., education, employment, household expenditure, health expenditure, living conditions) and disability in fifteen developing countries. Disability significantly correlated with an increased number of poverty dimensions. Correlations were also found between disability and lower educational attainment, lower employment rates, and increased medical expenditures.

Ingstad and Eide (2011) illustrated convincingly how poverty not only results from disability but actually may create disability. For example, poor people (not necessarily only those living beyond the Western world) may delay seeking help for health problems that would have been curable if treated earlier because they cannot afford the travel costs to a hospital or the costs of medical care itself. Lack of knowledge about whom to ask for medical or health-related help also may play a role. Often, poorer people live in less hygienic conditions, leading to illnesses that, in turn, may result in disabilities, including hearing loss (Olusanya et al., 2014). Less access to nutritious food may contribute to disability, too, and poorer people may be less able to avoid dangers associated with armed conflicts or natural catastrophes. Humanitarian interventions are not inclusive in nature, and food aid programs and rescue missions do not address the needs of persons with disability and therefore are in nature discriminatory, adding to the already existing disadvantages of persons with disability. Finally, poor people, as well as people with disabilities, suffer more from cultural beliefs, prejudices, and stigmatization, some of them related to religion. These can limit their participation in society when they otherwise might be able to participate to some extent, perhaps even fully.

INTERNATIONAL POLICY FRAMEWORKS

In the past three decades, several international policy frameworks have been put in place, most noticeably by the United Nations, aimed at alleviating poor living conditions for all who live on this planet, and for those who live in less favorable conditions in particular. Improving education for all is one of the core priorities in these international frameworks.

An important milestone was the adoption of the Millennium Development Goals (MDGs) by (at the time) all 191 UN member states and over twenty international organizations in 2000 (UN, 2000). These goals were to be accomplished by 2015, and actions that were undertaken were monitored over the ensuing years. Universal primary education was one of the prominent eight goals (Birchler & Michaelowa, 2016). This quantitative goal was supplemented by a more qualitative one, the aim for high education quality for all, in the Dakar Framework of Action, adopted in 2000 by the World Economic Forum. Another important MDG was the eradication of extreme poverty and hunger. Disability, however, was not specifically included in the goals (Ingstad & Eide, 2011). Although at the time there already was rising awareness that disabled people in developing countries are among the poorest of the poor, people with disabilities were excluded from the process that led to the MDGs. According to Yeo and Moore (2003), this omission had negative consequences for putting the situation of people with disabilities (beyond the West) at the top of the international agenda. On the other hand, the issue of disability and poverty was included in the implementation monitoring of the MDGs, at least from 2006 onwards, possibly due to adoption of the UN Convention of the Rights of Persons with Disabilities (UNCRPD) in that year.

The global awareness that people with disabilities should have access to social and economic resources and opportunities already was rising before UNCRPD was adopted. For example, the United Nations proclaimed 1981 as the International Year of Disabled Persons. A major outcome of activities during that year was adoption by the UN General Assembly, in 1982, of the World Program of Action, aiming for disability prevention, rehabilitation, and equality of opportunities. This program advocated an approach to disability from a human rights perspective, focusing on full societal participation of persons with disabilities (UN, 1982).

In 1994, the UN Standard Rules on the equalization of opportunities for persons with disabilities were adopted. These twenty-two rules summarize the message of the World Program of Action. Several of them specifically address the situation of DHH persons (UN, 1994). Rule 5 focuses on accessibility, in part access to information and communication: “States should develop strategies to make information services

and documentation accessible for different groups of persons with disabilities. . . . Appropriate technologies should be used to provide access to spoken information for persons with auditory impairments or comprehension difficulties." Further, "consideration should be given to the use of sign language in the education of deaf children, in their families and communities. Sign language interpretation services should also be provided to facilitate the communication between deaf persons and others." Rule 6 relates to education: "States should recognize the principle of equal primary, secondary and tertiary educational opportunities for children, youth and adults with disabilities, in integrated settings. They should ensure that the education of persons with disabilities is an integral part of the educational system." For DHH and deafblind students, the following exemption is made:

> Owing to the particular communication needs of deaf and deaf/blind persons, their education may be more suitably provided in schools for such persons or special classes and units in mainstream schools. At the initial stage, in particular, special attention needs to be focused on culturally sensitive instruction that will result in effective communication skills and maximum independence for people who are deaf or deaf/blind. (Crowe, 2018)

The adoption of the UN Standard Rules was followed by similar initiatives by the European Union and the World Health Organization, resulting in resolutions on disability in 1997 and 2005, respectively, and culminating in the UNCRPD in 2006. The UNCRPD was the first comprehensive human rights treaty of the twenty-first century. It consists of a convention and an optional protocol. In the words of the UN:

> The Convention is intended as a human rights instrument with an explicit, social development dimension. It adopts a broad categorization of persons with disabilities and reaffirms that all persons with all types of disabilities must enjoy all human rights and fundamental freedoms. It clarifies and qualifies how all categories of rights apply to persons with disabilities and identifies areas where adaptations have to be made for persons with disabilities to effectively exercise their rights and areas where their rights have been violated, and where protection of rights must be reinforced. (www.un.org)

The optional protocol invites state parties to recognize "the competence of the Committee on the Rights of Persons with Disabilities . . . to receive and consider communications from or on behalf of individuals or groups of individuals subject to its jurisdiction who claim to be victims of a violation by that State Party of the provisions of the Convention."

Article 24 of the UNCRPD addresses education, subarticles 3b, 3c, and article 4 specifically mentioning the situation of DHH persons:

> 3. States Parties shall enable persons with disabilities to learn life and social development skills to facilitate their full and equal participation in education and as members of the community. To this end, States Parties shall take appropriate measures, including:
>
> . . .
>
> (b) Facilitating the learning of sign language and the promotion of the linguistic identity of the deaf community;
>
> (c) Ensuring that the education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.
>
> 4. In order to help ensure the realization of this right, States Parties shall take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education. Such training shall incorporate disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities. (http://www.un.org/disabilities/documents/convention/convoptprot-e.pdf)

UNCRPD came into effect in May 2008, following the ratification by the twentieth member state. As of 2017, UNCRPD has 160 signatories and 173 ratifications. One of the major countries that did not ratify UNCRPD is the United States. It was rejected by the U.S. Senate based on the mistaken claim that the nonbinding treaty would compromise U.S. sovereignty.

All countries represented in this volume ratified the Convention, and most of them also ratified the additional protocol. However, this does not imply that all these countries have concise views on what inclusive education is about, or how to implement it successfully for DHH children. As described in several chapters of this volume, when educational programs are targeted at DHH children, teachers of the deaf are often poorly trained (if they receive any training at all). Not unrelatedly, the least qualified teachers frequently are sent to work in special education settings and with deaf children in particular. This parallels the situation in Western countries like the United States, in which the best educational interpreters work in university, legal, or medical settings, leaving the less skilled (with minimal if any training) to work with young deaf children who are most in need of good language models (Sapere, LaRock, Convertino, Gallimore, & Lessard, 2005).

The MDG program came to a conclusion in 2015. In a final report, the UN (2015) concluded that extreme poverty had declined significantly since 1990. Globally, the number of people living in extreme poverty fell

from 1.9 billion in 1990 to 836 million in 2015. Most progress occurred between 2000 and 2015. As for education, according to the UN, the primary school net enrollment rate in developing regions increased from 83% in 2000 to 91% in 2015. The number of out-of-school children of primary school age worldwide dropped from 100 million in 2000 to approximately 57 million in 2015. Improvement in enrollment rates as a result of the MDGs was best in sub-Saharan Africa. Still, the UN acknowledged that despite all success, "Millions of people are being left behind, especially the poorest and those disadvantaged because of their sex, age, disability, ethnicity or geographic location. Targeted efforts will be needed to reach the most vulnerable people" (UN, 2015, p. 8). The UN noted, in particular, that disability still was a major obstacle to accessing education.

Following the 2015 conclusion of the MDGs, the UN officially launched the 2030 Agenda for Sustainable Development. This was adopted by world leaders in September 2015 at the United Nations. Agenda 2030 calls on countries to begin efforts to achieve seventeen Sustainable Development Goals over the next fifteen years. The Agenda came into force January 1, 2016. According to the UN

> . . . the 17 Sustainable Development Goals (SDGs) with 169 targets are broader in scope and go further than the MDGs by addressing the root causes of poverty and the universal need for development that works for all people. The goals cover the three dimensions of sustainable development: economic growth, social inclusion and environmental protection. (http://www.un.org/sustainabledevelopment/development-agenda/)

This time, disability is more specifically addressed. Sustainable Development Goal 4 addresses education and states that by 2030, inclusive and quality education for all should be ensured and lifelong learning should promoted. This goal includes targets such as "By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations" and "Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, nonviolent, inclusive and effective learning environments for all."

International frameworks such as Agenda 2030 and UNCRPD enable those working in the field of deaf education to place their interventions into a legal, rights-based context as well as into the inclusive development paradigm, summarized by the slogan "leave no one behind." This opens opportunities to improve educational conditions of DHH learners in countries beyond the West. These conditions need to be provided by policymakers, by the international donor community, and,

first and foremost, by professionals from those countries who are directly involved in education.

An important step in that regard is educating parents about the needs, strengths, and opportunities for their deaf children. Colleagues in Asia, for example, report that many parents of deaf children are unaware of the needs of deaf children and the value of educational alternatives. Few appropriate school settings are available, even if parents are willing to allow their deaf child to attend school. Wanting to avoid stigma, parents often seek to place their deaf children in "hearing schools," even if the children have no access to instruction in those classrooms. At the same time, families experience "cultural angst" as Westernized education frequently conflicts with family and community traditions and values in rural areas. As a Korean colleague noted, "Many parents, especially those from the countryside, would not like to take the trouble to send their children to school. Therefore, there are few students in the schools for the deaf." Unfortunately, this may give the appearance that there is little need for such programs, when the opposite is the case.

INCLUSIVE EDUCATION

In many national and international policy documents, promotion of inclusive education is a key concept. However, inclusive education is a label that is used often without proper definition. To some, inclusive education is simply a synonym for mainstreaming, advocating the placement of students with disabilities in regular schools. Advocates of this position (see, e.g., Stainback & Stainback, 1992) often criticize special education for its segregative character (by definition), for the (presumed) high financial costs involved, and for the (presumed) lack of quality. Mainstream education is seen as the least restrictive environment for students with disabilities.

Others make a clear distinction between mainstreaming and inclusion, reserving the latter label for practices where students with and without disabilities are not only physically placed together in a school or classroom but actually play and learn together. A class specifically for students with disabilities located at a regular school would in this view certainly be considered an example of mainstreaming, but definitely not of inclusion, since in that school students with and without disabilities would still be segregated.

The promotion of inclusive education has been both applauded and criticized (see, e.g., Fuchs & Fuchs, 1994). Promotion of inclusive education may easily lead to ignoring the specific learning needs of students with disabilities. In practice, inclusive education may come down to simply placing students with disabilities in regular classroom without proper support. In the short run it is definitely cheaper than special

education, but in the long run it often leads to serious underachievement of students with disabilities.

Deaf persons and many professionals involved in deaf education often have challenged the arguments brought forward by the advocates of mainstreaming and inclusive education. In particular the idea that regular schools should be viewed as the least restrictive environment has been criticized (Knoors & Marschark, 2014). Many DHH students require specific adaptations in communication if they are to be engaged in classroom instruction, in collaborative learning, and in peer conversations in and outside the classroom. Many DHH students would profit from the use of sign language or sign-supported speech in these respects. Inclusive education for these students, creating the least restricted and most enabling environment for them (Abbate, in press), would mean inclusion of their sign language, of Deaf culture, and of the Deaf community. Although this might not be entirely impossible in regular schools (e.g., through co-enrollment programs; see Marschark, Antia, & Knoors, in press; Marschark, Tang, & Knoors, 2014), this is often easier to achieve in special schools for the deaf.

Pressure from the Deaf community and from scholars and practitioners involved in deaf education has resulted in exemptions for DHH students in international policy documents promoting inclusive education, such as the Salamanca Statement and the UN Standard Rules. UNCRPD avoids the label "inclusive education" and instead uses the neutral label "environments": "Ensuring that the education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development." UNCRPD does, however, call for universal designs of environments and services such that these "may be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design. 'Universal design' shall not exclude assistive devices for particular groups of persons with disabilities where this is needed."

DEVELOPMENT COOPERATION AND EDUCATION

From the very start of formal deaf education, in Paris in the late eighteenth century, scholars and practitioners have been internationally oriented. School visits within Europe and across the Atlantic between the United States and Europe were already common practice in the nineteenth century, as were international conferences. Most notable among the latter was the International Congress on Education of the Deaf (ICED), first held in Paris in 1878 (Brill, 1984) and still meeting today (see Marschark, Lampropoulou, & Skordilis, 2016). The main objective of the ICED meetings has been knowledge exchange, but

helping other practitioners trying to educate deaf students under less affluent conditions than in the West increasingly became an objective of international collaboration, too (in fact, ICED 2015 led to this volume). These initiatives often were embedded in attempts by Western countries to improve the economic conditions in developing countries by providing development aid. There has been some debate about both the objectives behind these attempts and the results achieved (or not). Does development cooperation really result in sustainable development, or does it lead to countries' becoming dependent on foreign aid? Either way, it is clear that providing effective aid and support is much more difficult than those who start well-meant, small-scale initiatives often envisage. Still, theoretical (economic) models point to the significant role education plays in achieving economic growth, whereas empirical studies show that education facilitates innovation and knowledge creation, thus fueling long-term economic development (Masino & Niño-Zarazúa, 2016).

Between 1995 and 2010, the total amount of official development assistance to education in financial terms increased by 360%, from 2.9 billion US dollars in 1995 to 13.3 billion US dollars in 2010 (Riddell & Niño-Zarazúa, 2016). Much of this aid was provided by development aid agencies that tried to bring the MDGs closer to accomplishment. Interventions focused on curriculum development, reduction of student dropout, and teacher education, as well as to the provision of school meals, scholarships for girls, and classroom construction. International aid for developing countries is now moving from such conventional projects to program support (Birchler & Michaelowa, 2016). Investment in education, so far, has had a greater impact on improving enrollment rates than on educational achievement. An increase of financial support to education by 1% increases the growth rate of enrollment in primary education by 0.06%—a modest effect but still important. However, support to improve the net enrollment rate in primary education does not imply that the children enrolled will learn to read, write, and count. In fact, by increasing enrollment rates, classrooms became overcrowded and teachers overwhelmed, which often led to a decrease in student outcomes, or definitely to a less favorable learning environment. Thus, quantitative objectives are not enough; the quality of education has to be addressed, too. Special education, however, and deaf education in particular, historically has received less funding, per capita, for such efforts than education for the larger population of hearing children. Professionals working in African countries note that there is often less oversight of such small amounts of money, and theft and misuse of the funds are common.

Looking back and reflecting on these interventions, Riddell and Niño-Zarazúa (2016) concluded that providing aid to education that aims to improve learning in sustainable ways is both more complex

and more difficult than aid aimed at increasing numbers of students, textbooks, and teachers. According to Hanushek and Woessman (2007, p. 79), "For educational investments to translate into student learning, all the people involved in the education process have to face the right incentives that make them act in ways that advance student performance." More recently, Yoshida and Van der Walt (2017) pointed out that a combination of the new education goals set by Agenda 2030 and the influential, program-based aid architecture provides a challenging environment for developing countries that strive to achieve their goals in the Education 2030 era, particularly if all aid is provided from the top down. However, if such approaches were to be combined with bottom-up initiatives in countries, regions, or locations, effectiveness would definitely improve. The purpose of this integration of top-down and bottom-up educational interventions supported by foreign aid would be "to establish links between policy, its implementation and the results thereof on the ground, all based on a better understanding of the realities of the children living in developing countries and of those who teach them" (Yoshida & Van der Walt, 2017, p. 2). Empirical research supports the effectiveness of three drivers of change aiming for the advancement of student learning in developing countries (Masino & Niño-Zarazúa, 2016): (1) provision of learning materials and human resources; (2) creating awareness of parents, teachers, and authorities with respect to educational choices; and (3) decentralization of educational reforms while including local communities in school system management.

DEAF EDUCATION BEYOND THE WESTERN WORLD

Deaf education in countries beyond the Western world has been addressed for individual countries in articles found in relevant scientific and applied journals. The actual number of articles is relatively small, though, and most focus on a single topic and/or region. As a result, information is fragmented, and an overview of the situation across countries cannot be extracted. Together, the UN's Sustainable Development Goals of Agenda 2030 and the international legal framework of the UNCRPD enable those working in the field of deaf education to place their interventions into a legal, rights-based context as well as into the inclusive development paradigm, summarized by the slogan "leave no one behind." This placement opens opportunities to improve the educational conditions of deaf learners in countries beyond the Western world, conditions that need to be provided by policymakers, the international donor community, and—first and foremost—by professionals from those countries who are directly involved in education.

Notwithstanding the need for context-specific educational reform, scholars in deaf education continually are asked to inform the choices

and adaptations needed to improve the environmental context of learning of deaf children. Do we as academics have applicable answers derived from Western research on the diverse factors influencing deaf education? Are there (Western) evidence-based teaching methods that would apply to and effectively improve the learning environment of deaf learners in the non-Western world? How do we cope with the lack of comprehensive sign language documentation still existing in many countries, and absent teaching aids, with the lack of (educational) audiological services, and cultural and social contexts that are not supportive of deaf children? We are witnessing the "leapfrogging" of technology in many societies. While in many parts of the Western world (but not so in many rural areas), technology in deaf education found its entry step by step; outside the West, technology leaps ahead with all its pitfalls, but also all its opportunities. How cautiously should we proceed when the need is so great?

Instead of simply trying to implement the insights resulting from Western research in contexts that are rather different, it is time to collect and disseminate academically informed knowledge about deaf education, constructed by scholars and practitioners in situ, in countries in Central and Eastern Europe, Africa, Asia, and Latin America. This volume, based on an ecological approach to deaf education, takes into account the characteristics of learners and the educational context. The chapters collected here represent practice-based evidence—and whenever possible research-based evidence—about deaf education in countries that all too often have been left out of the deaf education discussion. In doing this, the various authors naturally call attention to the often immense challenges encountered in establishing and improving deaf education in their respective countries. At the same time, however, they illustrate practices that are to be commended, that make a positive difference in the lives of deaf learners, and that can serve as examples of ways to move forward for scholars and practitioners in other countries.

Some of the practices and developments outlined in the following chapters may resemble situations and practices in the West; others are more typical of particular countries beyond the West. Various experiences are described, including those that emphasize the use of indigenous sign languages; those that advocate a strong position for parents and the Deaf community in outlining and articulating culturally and contextually appropriate deaf education; those that emphasize hearing screening and provision of hearing aids or cochlear implants; and those that emphasize the use of spoken language. The goal of this collection is to provide a platform for and encourage more research by professionals from so far underrepresented countries in the deaf education research community, and to strengthen the foundations for further improvement of deaf education for all deaf children, leaving no one behind. In this way, we hope to contribute to the realization of the fourth

goal of the worldwide Sustainable Development Goals of the United Nations: To ensure, by 2030, inclusive and equitable education and the promotion of lifelong learning opportunities for all, including deaf and hard-of-hearing children and adults, wherever they may live.

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2

Contemporary Practices in Deaf Education in Nigeria

Julius Abiola Ademokoya

HISTORY OF DEAF EDUCATION IN NIGERIA

The first formal school that was opened in Nigeria for any group of persons with special needs was not for the deaf, as many would expect, but for the blind. The school was the Gindiri Special School for the Blind, established in 1953 by the Sudan Interior Mission, which is now known as the Church of Christ in Nigeria. The school was located at Gindiri, Plateau State, in the north-central region of Nigeria (Fadeiye, 2006). (Nigeria has six geopolitical zones: southwest, southeast, south-south, northwest, north-central, and northeast.)

The Gindiri school seems to have inspired some Christian missionaries and philanthropists to think about establishing similar schools for the deaf three years later, in Lagos, the former capital city of Nigeria. Thus, in 1956, a group of philanthropists known as the Friends of the Deaf (and, later, the Society for the Care of the Deaf) brought together a few deaf youths and engaged them in some recreational activities (Onwuchekwa, 2005). The concern of this group was not just to organize fun activities for the deaf youths or to identify with them; the group also felt the need to also provide basic education for them. As providence would have it, these deaf youths, in 1958, formed the nucleus of the Wesley School for the Deaf, situated at the Surulere axis of Lagos. The Methodist Church Mission eventually took over the administration of the school and named it after its founding priest, John Wesley.

The decade preceding Nigerian independence in 1960 was a period when Christian missionary activities in the country shifted attention from spreading religion to establishing homes, centers, or schools for destitute individuals and specific categories of individuals in need of special education. Those same missionaries had brought formal education to Nigeria in 1842, when the Methodist mission opened the first formal school in Badagry, Lagos State (Fadeiye, 2006). The school was known as Nursery of the Infant Church. It probably dawned on the missionaries at that point that individuals with special needs needed

formal education like that which their able-bodied counterparts had been enjoying for over a century.

In the twentieth century, corporate Christian missions, as well as individual missionaries, began to reach the entire Nigerian landscape from the coastal towns and cities in Nigeria's southwest and south-south regions to interior or upland areas, setting up various special schools or homes. In 1958, for instance, a black American missionary named the Rev. Andrew J. Foster arrived in Ibadan (a city in south-western Nigeria, about 200 km from Lagos) from Ghana, his early African missionary settlement. There he set up what was then known as the Ibadan School for the Deaf. Around this same time, a young lady, later known as Chief (Mrs.) A. O. Oyesola, opened a private school for few young deaf youths in the same city. The school was called the Home School of the Deaf. The Rev. Foster and Chief Mrs. Oyesola decided to merge the two schools in 1963. The school, which adopted Chief Mrs. Oyesola's school name, continued to provide education to deaf children and youths. Some of its activities will be considered later in this chapter. The Rev. Foster later launched two other schools at Kaduna (northwest zone) and Enugu (southwest zone) in 1960 and another one at Nsukka (southwest zone) in 1965. The schools in Enugu and Nsukka were closed down during the Nigerian civil war, which occurred between 1957 and 1970. The school at Nsukka was merged with the one at the Enugu after the war.

The Rev. Foster was not only concerned about the academic needs of the young and adult deaf persons but was equally passionate about their spiritual, social, and recreational needs (Onwuchekwa, 1990). As a result, he later established what is now known as the Christians Mission Centre in Ibadan, where he had earlier opened a school. The Centre has since been a foremost religious, social, and recreation training hub for deaf persons in the country. The Centre, under the purposeful leadership of various committed and experienced individuals, has enjoyed moral and financial support from local and foreign philanthropists. The Centre now has plans to become a university known as the Andrew Foster University for the Deaf, similar to Gallaudet University in the United States.

Meanwhile, the Church Missionary Society, the missionary arm of the Anglican Church, moved into the southeast region of the country to set up another school for the blind, in 1958, at a town called Oji River, in the present Anambra state. Abang (1986) reported that the Royal Commonwealth Society for the Blind provided both staff and supervisory support for the school under the headship of Mr. K. Sykes. Although the center was initially set up to rehabilitate blind individuals, it later became a comprehensive school, providing special education services to blind students. The school was expanded to accommodate two more sections to provide elementary education to the deaf and to

physically challenged youths. The impact of that school on the development of deaf education in Nigeria is that it was the first major extension of formal education for the deaf from the southwest zone to the southeast zone of the country. The school not only provided formal education for deaf youths drawn from nearby states such as Imo, Abia, Ebonyi, Rivers, Cross-River, Enugu, and a few more, but it also provided inspiration and advisory support for these states to set up their own special schools for the deaf.

As mentioned earlier, the Gindiri School for the Blind, which later added sections for deaf and physically challenged individuals, served as the flagship of deaf education in the north-central zone of the country. Education for the deaf in the same region was boosted in 1974, when a deaf teacher, Gabriel Ademola Adepoju (who later earned a doctoral degree in special education), started a private school for the deaf in Ilorin, the Kwara State capital in the north-central zone of the country. The school, which started with ten deaf pupils in 1972, had added more deaf pupils by 1982. The idea of adding a section for the blind in the school that same year changed its orientation from a deaf-only special school to a more inclusive one. The Kwara State government took over the running of the school that same year and renamed it the Kwara State School for the Handicapped. This school was renamed again in 2006, to the Kwara State School for Special Needs, to reflect the new terminologies in the special education field. Some deaf pupils who graduated from the Kwara State School furthered their education in various higher institutions in Nigeria and overseas. Graduates also have made significant contributions toward extending deaf education to various Nigerian states, particularly in the northern region, where they have served as teachers or school administrators, as a result of the teaching and supervisory experiences they acquired while working in their previous schools.

Deaf education practices in Nigeria appears more active in the southwest zone than in the other geopolitical zones of the country. Dr. J. O. Fadeiye, a historian of Nigerian special education, explained that since Christian missionaries who brought both formal, regular education and special education were, by the mid-nineteenth century, more firmly rooted in the southwest than in the other zones, it is not altogether surprising that Western education was more widespread and active there. This explains why the southwest zone has more deaf education facilities today than other zones in the country.

EARLY CHALLENGES OF DEAF EDUCATION IN NIGERIA

What were the experiences of deaf youths and adults before formal schools were set up for them? The late Dr. Peter Mba, a Nigerian deaf special education scholar, described the pre–formal education period for

the deaf in Nigeria as a "dark age," when deaf persons were maltreated, dehumanized, and ostracized from their families and communities. Such experiences were not peculiar to the deaf alone but were experienced by various categories of exceptional individuals including those with dreaded conditions such as epilepsy (Ajobiewe, 2000). This exclusion was due to the fact that in many Nigerian communities, the occurrence of disabilities, as well as persons with disabilities themselves, was associated with myths and evils. Many Nigerians in the past and even now are highly superstitious about disabilities. Alake (1988) stated that deaf children often are regarded as cursed and their parents are considered sinful individuals who have been penalized by the gods for their evil deeds. In the African worldview, the common notion is that disability is due to the wrath of the Supreme Being, ancestors, or other spiritual beings (Appiah-Kubi, 2016).

Deaf children and family members thus are usually subjected to strong disapproval from the rest of the community. Parents or family members do whatever they can to hide deaf children in the darkest corners of their houses and prevent the public from knowing they exist. One unfortunate consequence of this practice, as Mba (1988) observed, is that because they are hidden at home, these children cannot start school until age 6 or later, and when they do start their lack of language skills means that they often do not even know their names or the names of family members.

Deaf children at home are not only deprived of social interactions through which they could acquire social skills but are also denied early childhood education, which their hearing peers usually acquire at home before they reach school age. Parents and siblings of deaf children do develop a few crude signs or gestures by which they can communicate essential needs (e.g., feeding, movement, or safety). Since such children may not enjoy learning sign language until they begin to attend school, it is not surprising that they usually have very small vocabularies when they are eventually enrolled in school.

The Nigerian public and government have always been reluctant to get involved in providing education for the deaf, partly because some traditional beliefs do not encourage association of any sort between the hearing and the deaf. For example, a common notion among the Yoruba tribe forbids a pregnant woman from interacting with deaf persons. A pregnant woman who defies this notion is said to risk the likelihood of giving birth to a deaf child. It is therefore often difficult for teachers or educational administrators who share such beliefs to support deaf education in any form. Meadow-Orlans and Erting (2000) reported that because of such cultural prejudices against deaf persons, education for the deaf in Nigeria begins very late. Mba (1981) pointed out that while the government and ignorant members of Nigerian society were skeptical about providing or supporting education for the deaf, missionaries

and a few courageous individuals defied these superstitious beliefs and went on to open schools and rehabilitation centers across the country.

Setting aside the cultural factors associated with hearing loss, there long has been the fact that deafness, being a "hidden disability," does not easily evoke sympathy or urge support from the public as much as blindness or other easily visible disabilities do (Ologe, 2014). In fact, deafness often has earned their victims ill feelings or resentments from hearing people in Nigeria who are obviously unaware of deaf people's hearing handicap and do not understand why the deaf sometimes behave in ways that therefore might seem bizarre (Ademokoya, 2016). Sign language is the predominant means of communication for the deaf, but a huge number of hearing Nigerians neither understand nor use it. Therefore, encounters between hearing and deaf Nigerians are often contentious, especially if sign-language interpreters are unavailable to interpret for the two parties.

Another challenge to deaf education in Nigeria has been the lukewarm attitude of some deaf youth and parents/guardians toward schooling. This challenge drew its roots from poverty and the culture of begging. In developing nations like Nigeria, education is still considered a luxury meant only for those who can afford it. Deaf youth more often than not come from poor parents. There is a strong relationship between disability and poverty (Ademokoya, 2007a), and it is commonly said that disability begets poverty or vice versa (Nwolise, 2004). Coupled with poverty has been the common practice among various tribes in Nigeria of engaging poor people or youths with disabilities in begging (Ademokoya, 1995). Deaf children themselves frequently have taken to begging to fend for themselves, since they are often denied proper care by their parents. Poor parents often send out their deaf children to beg for food, money, or materials to support family financial needs including paying school fees of hearing siblings (Ademokoya, 2016). How poverty and begging retard deaf education in Nigeria is that parents as well as deaf children themselves are not often very keen about schooling. Low enrollment of deaf children and the high dropout rate of enrolled deaf school children have been quite evident in many schools (Ademokoya, 2007b). A former commissioner for education in Oyo state once stated that she picked up some deaf school children on the streets who skipped classes to beg.

Poor funding of deaf education in Nigeria has always been a challenge. Poor funding itself is a result of multiple factors. One is the country's poor economy, which is a common factor in developing or underdeveloped nations like Nigeria. Another is the unwillingness on the part of the Nigerian governments, and indeed many Nigerians, to fund special education-based schools adequately. This could be due to a lack of understanding about disability and disabled persons or a deliberate oversight by government officials and indeed Nigerians

of the fact that special education requires much more funding than is needed for general education. The government appears apathetic about funding special education because government officials, like other Nigerians, apparently do not believe that investing scarce public funds to educate special needs children is a rewarding venture. Many Nigerians, including education officials, have low expectations for the academic performance of children with special needs and on the potential financial returns from investing public funds on their education (Mba, 1995b).

Deaf education has had its share of several pitfalls identified in special education practice in Nigeria. Such pitfalls, identified by Adima (1988), included admitting poorly rated candidates into colleges and universities to train as prospective special education teachers or specialists. This was worsened by low-quality training programs with poorly prepared curricula, inadequate training facilities, and lack of incentives for teachers and students. There is also the unfortunate practice (although it is reduced today) of assigning special education specialists or teachers to regular schools while non–special education professionals end up taking special education jobs in schools for the deaf.

These barriers largely were offshoots of cultural biases against special needs persons and anything related to them, including their education and services. Similarly, many Nigerians attach a low value to special education as a discipline or profession. One result of this situation is that candidates seeking admission to higher academic institutions who fail to score high enough grades to be admitted to their preferred disciplines usually settle on studying special education out of frustration. This practice, as Adima (1988) observed, has rendered special education training institutions as "dumping grounds" for candidates rejected by other disciplines.

Reluctant candidates who opt to study special education usually look for opportunities to leave it for other disciplines before or as soon as they graduate, leaving special education employment vacancies for desperate non–special education job seekers. All of this means that unenthusiastic and unqualified specialists or teachers end up teaching or training special needs schoolchildren. This is the paradox Adima (1998) described as handicapping already handicapped children.

DEAF EDUCATION PRACTICES IN NIGERIA

To provide some understanding of the administration, facilities, enrollments, and staff structures of various deaf schools across Nigeria, it will be helpful to describe a few deaf secondary schools today.

A brief history of the Wesley School in Lagos was given earlier in this chapter. The school, which provides primary education for deaf

pupils, was divided into two—Wesley School I and Wesley School II—in 1980 to simplify administrative processes when the school recorded increased pupil enrollment. Over 6,000 pupils have graduated from the two primary schools from inception until the present. Wesley Schools I and II comprise pre-primary (otherwise known as early childhood care and development) and primary sections. The pre-primary unit includes the nursery and kindergarten with 27 pupils in Wesley I and 29 pupils in Wesley II, while the primary section in Wesley I has 95 pupils and that in Wesley II has 107 pupils. Each of the two primary schools has one arm from primary I to IV. The two schools have eighteen teaching staff and forty-one non-teaching staff altogether. The teaching staff are professionally trained and graduated from universities and colleges of education. Non-teaching staff are usually assigned to the schools from various regular schools in the state.

The Ibadan School for the Deaf runs pre-primary and primary sections. There are 39 pupils in the pre-primary section and 151 pupils in the primary section. Eighty-nine pupils have hearing aids either bought by their parents or donated by philanthropists or hearing aid manufacturers. There are forty-one teachers (twenty specialists and twenty-one nonspecialist). The school has boarding facilities for interested pupils, while non-interested students are registered as day pupils. Apart from academic activities, the school engages the pupils in various vocational and entrepreneurial training programs, such as soap making, animal rearing and farming, catering, barbering, photography, information technology, and communication activities. There is an audiology clinic and speech training room, but they are now locked due to a dearth of equipment and staffing. The Oyo State government supports the school by paying the salaries of the teachers and staff working in the school clinic.

In 1980, the state government established an inclusive high school for hearing and deaf students within the school premises to provide post-primary education for pupils who graduate from the primary school. There are sixty-seven deaf students currently in the high school, with ten specialist teachers. The students attend classes alongside their hearing counterparts. Teachers in the high school use sign language to teach in the inclusive classes made up of deaf and hearing students.

The Kwara State School for Special Needs has pre-primary, primary, and secondary sections. There are 16 deaf children in the pre-primary section, 115 in the primary section, and 206 in the secondary section. The primary school section has eight classes and eight teachers in addition to a department head and ten support staff. All members of staff except the support employees are specialists. The secondary section has six classes, thirty-three teachers (fifteen specialists, eighteen nonspecialists), and six vocational teachers (four specialists, two

nonspecialists). There is an audiology clinic staffed by an audiology assistant to undertake audiological assessment and care of the pupils.

THE POPULATION OF DEAF SCHOOLCHILDREN

No accurate data on the population of deaf schoolchildren in Nigeria are presently available. This is due to several factors. First, the Nigerian Population Commission in its last census did not capture such data. Second, as noted earlier, many deaf children and youths are still hidden and/or not enrolled in schools to avoid stigmatization. Despite these challenges, there are many deaf children attending school in Nigeria, even if we don't have an accurate number. This fact is supported by the findings of a recent survey on the population distribution of special needs schoolchildren in three southwestern states of Nigeria.

ADMINISTRATION OF DEAF SCHOOLS IN NIGERIA

Administrative procedure for deaf schools in Nigeria largely requires that missions or philanthropists that established most of the deaf schools serve as school proprietors (Oni, 2005). Their main responsibility is to oversee the accommodation, feeding, and health and safety needs of the children, especially those who are boarders. They also are responsible for engaging the students in vocational activities such as farming, animal husbandry, fashion design, soap making, arts and crafts, and so on. The proprietors also organize parent–teacher associations and their activities, such as setting up and directing meetings. They also conduct some support programs, such as engaging parents in sign language education, counseling, and consultations.

The Nigerian government's involvement in deaf school administration is usually through agencies such as Ministries of Education, Local Inspectorate of Education, or School Management Boards. Officials of these agencies oversee the administrative activities of the deaf schools. Such administrative responsibilities include the recruitment and promotion of school administrators, teachers, and support staff. They also administer funding of the schools by paying staff salaries and giving subventions for running the school. They also ensure the implementation of policies related to deaf education.

Government officials also act as joint school proprietors with missions and philanthropists. In this case, the two parties consult with each other and make decisions on matters relating to the academic and moral affairs of the school. School administrators, teachers, and support staff are accountable to the missions and philanthropists as they are to the government. Indeed, some missions and philanthropists are very powerful and could influence government officials to reward diligent staff or punish erring ones.

CONTEMPORARY DEAF EDUCATION PRACTICES IN NIGERIA

Inclusive Education

The federal government of Nigeria, through its policy document on education, otherwise known as the National Policy on Education (2004), has accepted inclusion as the preferred placement option for education of all children, disabilities notwithstanding. The document has also indicated the government's preparedness to mobilize all its resources to achieve this goal: "All necessary facilities that would ensure easy access to education shall be provided, e.g., inclusive education or integration of special classes and units into ordinary/public schools under the UBE (Universal Basic Education) scheme" (National Policy on Education, 2004, p. 48).

Despite making that statement, however, the federal government has not made concrete efforts to provide inclusive education for deaf children or for other special needs children. However, some state governments have taken initiatives to provide inclusive education for deaf and hearing learners. For instance, the Lagos State government established thirty-nine inclusive education units in its various local government areas. Other states and private schools are following suit.

Inclusive education as currently practiced in Nigeria does not imply that deaf children and their hearing counterparts share the same classrooms, undertake the same instructional sessions together, or are taught together by same teachers, as inclusive education in the real sense requires (Stainback & Stainback, 1992). Rather, deaf children are placed into some designated regular schools, where separate classes or sections are created for them. Teachers and teaching activities remain essentially the same as in previous special schools. However, the new placement program has fostered stronger social fusion between deaf and hearing learners in mainstream schools.

Curriculum

Existing curricula in pre-primary, primary, and post-primary education levels in Nigeria are specifically developed for teaching hearing children. They are also used for deaf children, since the country's educational service does not have specially developed ones for deaf education. Several challenges involved in using these curricula include the failure to address specific needs of deaf children, such as cumulative cognitive deficits resulting from their hearing/communication barriers, social skill deficiencies and emotional trauma, and failure to identify appropriate pedagogies required for teaching special needs children, in this case deaf children. Using the existing curricula for deaf education is contrary to the federal government's indication that it would provide a diversified and appropriate curriculum for all special education beneficiaries (National Policy on Education, 2004).

Audiological Services

Only a few deaf schools in Nigeria have functional audiological clinics or resident audiologists to offer audiological services to deaf children. The limited services available include evaluating and ascertaining degrees of hearing loss in children for proper academic placement; recommending, fixing, and repairing hearing aids; and enhancing oral communication, speech training, and so forth. The result is that only a few pupils have information on their hearing levels and types of hearing loss. Indeed, many pupils are referred to schools for the deaf without audiological reports or audiograms. They are referred or admitted to the schools just because they demonstrated acute symptoms of hearing loss such as not being able to hear shouts, noise, or clapping.

In many schools for the deaf, children do not wear hearing aids, both to avoid being stigmatized and because hearing aids are not often recommended since many deaf children never received audiological assessment. Some children who wear hearing aids have discontinued using them because there are no experts to repair them or because they could not find a place to purchase new batteries.

Although school-based audiological services do not seem to be very effective at present, it is heartwarming to note the support offered by some hospital-based and private audiological clinics/centers across the country in providing audiological services to some school children whose parents could not afford the financial cost of such services. Some children enjoy sponsorships for such services from local and foreign philanthropists. Audiology as a profession and the provision of audiological services in Nigeria have in recent times flourished. This is because several Nigerian higher institutions, particularly the University of Ibadan and a few other teaching hospitals, have begun to train audiologists and to offer audiological services such as hearing assessments, ear care, hearing aids, and so forth. Worthy of note are various contributions provided by the Speech Pathologists and Audiologists Associations in Nigeria, the professional body for practicing speech therapists and audiologists in the country; philanthropic bodies like the Lions, Rotary, and Inner Wheels Clubs; and hearing aid manufacturers, such as Starkey and Widex. These organizations and some public-spirited individuals often organize free hearing screening, hearing aid donations, ear care education, and other hearing-related services to children and others in the country.

Placement and Teaching of Deaf and Hard-of-Hearing Children

Several schools for the deaf in Nigeria place hard-of-hearing and deaf children in the same classes. This occurs because most deaf children do not have audiological reports to determine their hearing levels and to place them appropriately, and there also are no distinct schools or

classes for hard-of-hearing children. Alikali (1991, p. 42) observed this phenomenon in several schools he visited and remarked:

> Historically and traditionally, no kinds of educational programming curriculum planning and development have been addressed to actual learning needs and situations of the hard-of-hearing in Nigeria. We have forgotten to sample them out as a unique category of handicapped children so as to meet their unique needs in the classroom, just because of the commonalities they share with other deaf and hearing categories respectively.

Olaniyan (1990) conducted hearing assessments of sixty-three deaf children who registered at St. Francis School for the Deaf in Vandeikya, Benne State, in the northwest region of Nigeria. His findings showed that 2.3% of the children had moderate hearing loss (41–55 dB), while 5.8% had moderately severe hearing loss (56–70 dB). Unfortunately, these children were placed and taught together in the same classrooms with the rest of their deaf counterparts, who had a hearing loss of 71 to 91 dB. This is a common practice in several schools for the deaf in Nigeria, as it is in other countries.

Early Childhood Education and Development of Deaf Children

As mentioned earlier, deaf infants and children, some years ago in Nigeria, were subjected to poor early childhood experiences. Contemporary practices for deaf education have improved significantly from what used to be put in the past. However, there are still some old practices that are yet to fade away fully. Factors such as ignorance about deafness and deaf persons, lack of audiological services required to provide early diagnosis and interventions, and hostile cultural practices toward deaf persons not only deprive deaf infants and children of the understanding and impactful early care they need at home and in public but also may cause defective personality development. For instance, some deaf children who were abused at early childhood grew up to become aggressive, self-willed, and pessimistic adults (Ademokoya, 2005). Failure to identify deaf children as early as possible is a failure to have proper childhood development interventions for such children.

Fortunately, Nigerian society is making progress in this regard. More schools are now providing early childhood education programs (in nursery, kindergarten, and pre-primary sections) for deaf children. This marks a change from the old practice when deaf children were not enrolled in school until they were over age 6 years. The advantage of this new development is that young deaf children hopefully will be able to adjust very early to the reality of their hearing loss and become better mentally and emotionally prepared for future life. More schools should be encouraged to introduce pre-primary education programs

in order to extend their benefits to more deaf children. It is also hoped that early childhood education programs will be complemented by early audiological assessment, speech training, and exposure to sign language, as appropriate.

Teacher Training Programs

In the past, teachers of the deaf in Nigeria acquired their professional training in foreign institutions for special education specialists. In recent years, however, more Nigerian higher institutions have been training teachers for the deaf not only for Nigeria but for other African countries. There have been an increasing number of Departments of Special Education instituted in several Nigerian universities, polytechnics, and colleges of education. These institutions train the teachers, school administrators, and support service providers that are required for deaf education at primary and post-primary levels. Mainstreaming special education specialists into regular schools was common in the past, although the practice has been greatly reduced in recent times.

Sign Language and Sign Language Profession

American Sign Language (ASL) was adopted as the uniform sign language in most schools for the deaf in Nigeria. ASL has been largely mixed with various local signs developed from various dialects or tribal languages in the country. Nigeria is a multilingual nation, with over two hundred local languages. Each tribe has evolved its own specific signs for names, items, or concepts that have no clear codes of ASL. It is therefore very likely that Nigerian Sign Language will not be as standardized as conventional ASL. That is, the Nigerian version of ASL may not be of the same quality as the original ASL used in America. This idea is derived from the fact that English as a second language in African countries is adjudged not to be as standard as the type spoken or written in the United Kingdom or the United States. The same is true for sign language, which is also a second language to native deaf users in Nigeria.

Although Nigerian Sign Language varies from one tribal group or geographical zone to another, deaf persons and sign language interpreters quickly grasp the signs of whichever tribe or geographical area they find themselves in because of factors such as tribal intermarriages and the free flow of Nigerians from one region to another. Indeed, these make both spoken and sign languages easy for Nigerians to learn and understand.

There has been an increasing need for trained sign language interpreters in various schools for the deaf in Nigeria. A significant number of teachers and support staff in various schools are not specialists in deaf education and thus cannot communicate proficiently with sign language. This has always cast doubt on the quality of services