

SITUATION ANALYSIS REPORT – MONTFORT RESOURCE CENTRE

By

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Date: 8th March 2014

THE EXERCISE WAS CONDUCTED BY:

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Date: 6th March 2014: Follow up of low vision assessed pupils & Situation Analysis
11th March 2014: Low Vision Assessment of new 9 pupils (one did not turn up)

Final Draft

1. INTRODUCTION

The Situation Analysis Report (SAR) is an attempt to provide basic information on the situation of Montfort Resource Centre (School for the Blind). In order to do that, the SAR looks at the methodology that was used to collect data, school general information, report findings which have been categorised into clinical findings based on clinical assessment of the children, social or non clinical findings, sanitation and hygiene, and other findings not related to the assignment. The report also looks at challenges that children with low vision, blind children and the school in general face. Finally the report ends with recommendations and conclusion.

The SAR is not an exhaustive situational analysis of the school and therefore can not be used as a basis for conclusion of the state of affairs of all resource centres in Malawi. Rather it provides a basis for a case for a national wide situational analysis for informed decision making and programming for interventions.

2. OBJECTIVE OF THE SITUATION ANALYSIS

The main objectives of the exercise were two:

- ✚ To follow up on pupils that were assessed during the last visits; who were given optical devices and find out how they are fairing and status of those given devices.
- ✚ To conduct a situational analysis of the resource centre as a basis for programming and, resources permitted, national wide assessment of the resource centres.

3. METHODOLOGY

The following methodologies were used in conducting this exercise:

- ✚ A simple questionnaire was designed for data collection.
- ✚ On a day of the visit, a brief meeting was held with all teachers in the resource centre where the objective of the visit was well explained.
- ✚ Clinical assessment of new pupils. One child (Mateyo Right), who came on the day of the visit, was thoroughly and clinically assessed and the recommendation was made to the guardian who accompanied him as well as to the teacher.
- ✚ After Mateyo Right was assessed, old pupils were assessed based on the information on their forms and summary report of each child. Each child was asked how he or she is using the devices such as spectacles, lens, and stand magnifiers. The team also heard about the pupils' performance after provision of reading aids – S/M, Reading Stands, glasses etc. This information by both the pupil and teachers. We also had a critical overview of the condition of the glasses. This was done by asking the pupils and physically looking at the glasses. In addition an academic general understanding of the performance of those pupils that were recommended to start using print as opposed to Braille. These were the ones that were using Braille for learning before a low vision assessment was done.

- ✚ After clinical assessment and low vision screening were done, a questionnaire was administered. This questionnaire was administered to the teachers of the resource centre including the head of the school. The aim of the questionnaire was to collect both quantitative and qualitative data from the teachers.
- ✚ Finally a wrap up meeting was held in the afternoon in the resource centre where all teachers of the resource present were in attendance. During this meeting all teachers were urged to ask questions on areas they did not understand and also to tell the team anything they had not shared with the team. Furthermore the team agreed with the teachers on the date to collect additional information which was not available at that time.

The whole exercise took almost five hours to complete.

4. GENERAL INFORMATION ABOUT THE SCHOOL

Montfort School of the Blind also known as Resource Centre is a unit within Montfort Demonstration Primary School owned by Blantyre Archdioceses of the Roman Catholic Church. There are conflicting reports about the date of the establishment of the school. Some suggested late 60s while others think it was established in the early 70s. The school is a sub granted primary school – owned by the church but wholly supported by government.

According to the 2013/2014 school calendar data, Montfort Demonstration Primary School has a total enrolment of 951 pupils (487 boys & 464 girls). The enrolment has been on the increase since 2009/2010 school calendar. Many of the pupils are in 5-10 age group showing that intervention at this age will prevent many pupils from developing low vision and blindness altogether

The resource centre has a total number of 51 pupils, of which 21 have low vision and 30 are completely blind. 11 of these children are orphans (5 lost both parents and 6 have lost single parents). The enrolment does not change over the years. This is due to boarding bed space limitation although they are some who commute from home to the school

The children in the resource have boarding facilities where their needs are catered for – accommodation and food among others. The resource centre is stalked with devices necessary to facilitate smooth learning of children with visual impairments. Currently 6 qualified special needs education teachers man the centre, of which only three have been trained by BICO in basic low vision.

At standard three, the pupils are released from the resource centre to the mainstream primary school where integration takes place – low vision and blind children learn together with normal pupils. The teachers from the resource centre provide technical support to both pupils with visual impairments and teachers.

In terms of sanitation and hygiene, the boarding has piped water system and proper sanitary facilities (water run toilets) while the main stream school has improved Pit Latrines. This poses a challenge to pupils with visual impairments to access hygienic sanitary facilities since most of them come from poor families and walk bare foot.

It is reported that following interventions at the school, the centre has improved in providing quality special needs education to children with visual impairments. It has enjoyed a considerable support from many well wishers such as BICO, Strathclyde University, Montfort Centre for the Blind, School Proprietors - Catholic Church and ESCOM. These have provided varied support to the institution – capacity building, provision of optical devices and learning aids, ICT Computers with CCTV facilities, Braille paper, and building to house the centre and food respectively among others.

5. MAIN SAR FINDINGS

a) CLINICAL FINDINGS

Annex 1 shows the clinical assessment of each pupil and recommendations made. However the following is the summary of the clinical assessment of new and old pupils:

i. Follow Up of Old Learners

- ✚ A total of 15 learners were reviewed
- ✚ 5 (five) learners broke their glasses. These need replacement. The assessment established that this loss was partly due to carelessness by these pupils
- ✚ 3 lost their spectacles. These need to be given new spectacles based on the prescriptions.
- ✚ 1 learner lost his or her hand magnifier
- ✚ 2 learners are yet to go for cataract operation at Queen Elizabeth Central Hospital. It was reported that there is resistance from the parents of the two children because of the past cataract operation error of their first child – a daughter. All the three children come from the same family.

ii. Clinical Assessment and Screening of New Pupils

- ✚ The school has enrolled a total number of 10 new pupils
- ✚ A total of 6 learners need low vision assessment while 4 were recommended to start using Braille.

Note: Annex 2 shows individual diagnosis results of each new pupil screened.

b) SOCIAL SAR FINDINGS/NON CLINICAL FINDINGS

- ✚ There is resistance from some parents to allow their pupils to go for cataract operation. Apparently these parents seem to be very uncomfortable with this because of the past surgical failure of their first child who is still at the school whose condition seems not to have improved for the better. To make matters worse none of the teachers have ever taken an initiative to sensitise parents on this. These two pupils are still at school and becoming of age which will make operation to have minimal impact if done later. Something needs to be done urgently.

- ✚ There is no clear admission and graduation policy for the aged and none performers. A case at hand is one student (Damiano Kandodo) aged 18 and blind who is still in preschool. He has been in the preschool for seven years now. According to teachers, there is no hope for him to graduate to primary school because of poor performance. Apparently teachers do not know what to do with such pupils. However such pupils block deserving and high performing pupils to access high quality special needs primary education at the school. Mateyu Right is a typical example. He is in standard 6; certified low vision student but could not be admitted because there is no place.
- ✚ The school does not hold open day interface and sensitisation meetings with parents and community at large on the special needs educations hence no community involvement in the school day to day activities. Let alone home visits.
- ✚ There is very strong public opinion among teachers that parents of children with visual impairments treat the school as a dumping ground for such children. Teachers reported that parents do not come to see their children and only come when the school closes and opens.
- ✚ There has been no drop outs in the past two years
- ✚ Through BICO's intervention, it was reported that pupils who depended on others to read are now able to do so on their own using stand magnifiers. Through the training, teachers from the resource centre are able to help teachers from other schools when dealing with albino children who were referred to the school from another school.
- ✚ There have been improved relations between teachers in main stream primary school and those from the resource centre. The teachers from resource provide technical support to their counterparts regarding education for children with visual impairments
- ✚ Despite the shortage of teaching and learning materials at the school, children with visual impairments do not share a book with normal children in the main stream school. This is courtesy of BICO's training and interventions.

Internal & External Support

- ✚ The school gets a maximum of MK80, 000.00 per month from government for its operation cost. This, according to teachers, is far below the minimum funding requirements of the school because it only caters for food for pupils in the boarding. Consequently the school cannot afford to provide teaching and learning aids to pupils.
- ✚ The following organisations have ever supported the school: BICO (teachers training in basic low vision, screening of pupils, surgical operation & provision of optical devices to pupils), Strathclyde University (computer for teaching and learning), Catholic Church (food), Montfort College Centre for the Blind (stationery) and ESCOM (provision of 120 bags of maize). Unlike BICO, this support has been one off.
- ✚ Government also supports the school through training of teachers, staff salaries and wages for the boarding temporary staff.

c) SANITATION & HYGIENE PROVISION.

- Sanitation and hygiene is good at the boarding centre because toilets use piped water and at the difficult to learn section. However the 14 improved pit latrines at the main stream primary school are unhygienic and pose a health hazard to children with visual impairments. The toilets produce very strong bad smell. Human faeces are littered all over. Children with visual impairment can easily tramp on these unknowingly as most of these children come from poor families and usually walk bare footed.

d) OTHER FINDINGS – NOT RELATED TO THE ASSIGNMENT

- There is shortage of teachers' accommodation at the school. One out of 6 special needs teachers is accommodated at the school. The rest are accommodated outside Montfort campus. This compromises on the quality of education to be provided to these pupils. They cannot stay until late in the evening to help these children.
- Teachers complain that they are ignored when it comes to promotion and other privileges.
- It was reported that Directorate of Special Needs Education in the Ministry of Education does not provide adequate support to the school. This relates to funding and material support.
- Resource centre learning room is not conducive for learning as it hosts two classrooms which are close to each other with no barrier in between. With enrolment at 51, it is a night mare to provide quality education to pupils under such circumstances.
- There has been a consider attempt by the school leadership to solicit support for smooth running of the resource centre. The ESCOM's 120 bags of maize support is a good example.

6. CHALLENGES

a) CHALLENGES CHILDREN WITH VISUAL IMPAIRMENT FACE

- i. Loss of optical devices. This is sometimes due to lens falling off from the frame and break or losing sight of everything altogether. This is a serious challenge not just because it affects pupils' performance in class and their general interaction with each other and their environment but also threatens sustainability of the interventions. As is in everybody's knowledge, most of these devices are not locally found; they are imported and are expensive.
- ii. Lack of parental support. Most of these are never visited by their parents until they close. It was reported that some parents view the boarding services for their children as relief to them.
- iii. Poor sanitation at mainstream school. This poses a health hazard to these children as most of them walk bare footed. It is easy for them to walk or tramp on human solid and liquid waste.

b) CHILDREN IN THE RESOURCE CENTRE FACE

- i. Inadequate optical devices. However part of this problem is being addressed with the direct intervention of BICO through provision of optical devices such as reading stands, stand magnifiers, spectacles etc.
- ii. Inadequate learning & teaching materials. This is exasperated by inadequate financial support from government and other development partners.
- iii. Lack of mobility devices for the blind. Only one child has a white cane. This makes these pupils vulnerable to accidents as they struggle to find their way.

c) Institutional & policy challenges

- i. There is apparently no policy direction of admission and graduation of the learners. As observed, the school has no cut off point on when admit or refuse to admit a child with visual impairment. Similarly there is no policy guidance on age limit i.e. when to withdraw a child because of age and non performance. It looks it is a free for all situation where as long as you are a child with visual impairment, you have an automatic right of admission and that you can stay at the school as long as you wish.
- ii. There is no policy on development of institutional linkages with other schools such as Mulanje School of the Blind where over age and none performing students in academic fields can be referred for non academic skills development needed for self employment and independence. It is unspeakable at this age to have a child 18 years of age in preschool. Such students could benefit from such linkages.
- iii. There is no deliberate strategy for development of long term partnerships or networks with institutions with similar interests to support the vision of the school.

d) INSITUTIONAL CAPACITY CHALLENGES

- i. Despite capacity building in pupil screening for referral system, there is inadequate capacity in resource mobilisation.
- ii. Community involvement and contribution towards the running cost of the centre are minimal if not zero. As a result, there is high dependency on government and well wishers for most of their operations.

7. RECOMMENDATIONS

a) CHILDREN WITH VISUAL IMPAIRMENT

- i. There is need to replace all broken optical devices. This will help restore hope and confidence in pupils. It will also help sustain their performance in class.
- ii. There is need to find a way of sustaining the access and use of these devices. There is need for a round table discussion with all stakeholders involved so that we minimise loss of these devices. Everyone should be involved – teachers, pupils, parents and community in protecting these devices.

- iii. It is also recommended that fitting of these glasses should be done professionally and with ultimate care to avoid falling off as reported in many cases. The technician should be sensitised and warned against loose fittings.
- iv. Teachers should be able to organise regular home visits of all families with children with visual impairments. This is not only professional ethical but also important to improve interface between teachers and parents. All myths, misconceptions and misunderstandings about blind children and those with low and surgery can be cleared.
- v. On clinical surgical failure as a reason for parents' resistance to allow their child to go for operation, the report recommends that BICO should organise and arrange that an eye clinician from Queens go the village and meet the parents concerned and explain what happened and what needs to be done now. The report further recommends that the teacher of the children should be involved in this trip.
- vi. New pupils that have been admitted in the resource centre should be screened for low vision before this school term comes to an end. I recommend that this should be done before they start their end of term examination so that those recommended for surgery can do so soon after closing schools.
- vii. On poor sanitation and hygiene at mainstream school, the SAR recommends the construction of special disability friendly and hygienic toilets for children with visual impairments as is the case with classrooms housing difficult to learn children. Therefore I recommend that the school takes the matter with DC Chiradzulu for financial support under Local Development Fund or other well wishers such as banks, telecommunications companies under their corporate social responsibility window.

b) CHILDREN IN THE RESOURCE CENTRE

- i. On inadequate optical devices, I recommend that other sources of funding be sourced to complement on the efforts that BICO is making to ensure that the right to education of these children is realised. However I comment BICO efforts at this school.
- ii. There is need to lobby for increased funding from government for the smooth running of the centre. There is need for the school involvement in the annual budget preparation process at DEM's office so that the budget incorporates needs of special education. The PEA's office needs to be sensitised on this as is the need for a Desk Officer responsible for Special Needs Education at district level or division level.
- iii. The 30 blind children need to be provided with walking sticks. I suggest that BICO should consider this as these may not be expensive. This will help in their movement and avoid unnecessary accidents which may cause other impairments.

c) INSTITUTIONAL & POLICY CHALLENGES

- i. The school should develop a policy on admission and graduation of the learners. The policy should look who should be admitted, at what age and at what grade. It should look at when to release someone so that the school can be able to take on other deserving learners who desperately need special education. The policy should look at linkages with other similar institutions and how they can collaborate. Of course this should be drafted

in such a way it is not in conflict with Policy Investment Framework (PIF) which provides free education for all at any age. I believe this is a special case.

- ii. There is need for develop strategy for long term partnerships development or networks with institutions with similar interests to support the vision of the school????

d) RECOMMENDATION ON INSITUTIONAL CAPACITY CHALLENGES

- i. There is need for capacity building for the staff in the centre in resource mobilisation and proposal development for alternative sources of funding. This will help in bridging the funding gap at the institution. BICO can support this initiative?.
- ii. Communities should be sensitised on their role towards their child education. As community organisation, BICO should use its strategic position to mobilise and support such community's initiatives. These should be targeted interventions.

8. CONCLUSION

In conclusion, this is a snaptic view of the situation at the school. The information, therefore, cannot be used as a basis for conclusion of the state of affairs of all resource centres in Malawi. Rather it gives a fair understanding of the situation at the school and provides a basis for a case for a detailed and systematic national wide situational analysis for informed decision making and programming for interventions.

Annex 1: Follow up visit report for each child

No	Name of the child	age	Status	Recommended action
1	James Tchale		Broken glasses BE +16.0	Needs 5X Telescope
2	Bridget Chibalo	17	Broken glasses LE -5.00	Glasses need to be repaired Maintain hand magnifier and telescope
3	Lonjezo Taulo	13	Using both glasses and stand magnifier well	
4	Elia Joseph	13	Lost glasses BE -4.00 Using magnifier well	Awaiting cataract operation Needs a 5X Telescope
5	Harriet Doviko	17	Has +4.00 for reading She is reading well Uses Braille and print	To consider Bifocals
6	Steven Divala	10	Broken frame but lens ok	To replace frame
7	Elena Thomas	14	Using stand magnifier and telescope well	To continue using well
8	Rafik Chibwana	13	Absent. He was not seen	
9	Madalo Mbewe	10	Lost both hand magnifier and sunglasses	Needs replacement
10	Belinda Jimu	6	Broken lens	Needs replacement
11	Comfort Esak	10	Still struggles to read Chichewa text	Continue assisting him until he masters the art of reading
12	Susan Esak	11	Lost glasses. Reads without magnifier	Needs replacement
13	Brightone Doviko	11	Still not operated Parents resisting	Involve the clinician and teacher to sensitise parents
14	Gladys Puluma	15	Broke glasses BE – 4.00 Using telescope	Top replace glasses
15	Owen Kamowa	15	Doing fine with glasses and stand magnifier	To continue using well
16	Carlen Kamowa	15	Doing fine with glasses and stand magnifier	To continue using well

Annex 2 New cases

No	Name of the pupil	Age	sex	class	diagnosis	Remarks
1	Kelvin Mtaliyana	13	M	7	Cornea Scar	Needs low vision assessment
2	Angella Chokani	23	F	Teacher	Cornea Scar	Needs low vision assessment
3	Elina Benard	15	F	7	Retinitis Pegmentosa	Needs low vision assessment
4	Joel Lupia	21	M	6	Cornea Decompensation	Needs low vision assessment
5	Kondwani Mbirima	14	M	6	Albanism	Needs low vision assessment
6	Mateyu Right	16	M	6	Aniridia Cornea Scar	Needs low vision assessment
7	Damiano Kandodo	17	M	preschool	Phthibis Bulb	Braille
8	Julia Matoga	7	F	preschool	Cortical blindness	Braille
9	Chifundo Bonface	13	M	3	Phthibis Bulb	Braille
10	Weston Simon	7	M	preschool	Phthibis Bulb	Braille