Теоретические исследования | Theoretical research

# Мероприятия по поддержке девочек с нарушениями зрения в Саудовской Аравии: качественное исследование

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Данное исследование посвящено тому, насколько хорошо программы поддержки незрячих девочек в Саудовской Аравии отвечают потребностям их потребностям, а также ожиданиям их родителей и учителей. Анализировались причины выбора программ поддержки, а также пути их улучшения. В основе исследования, выполненного с помощью метода кейсов, лежит теоретический анализ литературы, состоящий в основном из обзора документов Министерства образования, школьных политик и учебных программ и других документов государственного сектора. В исследовании использовалась качественная методология с участием исследователя в интерпретации результатов, четко описанных в заключительном разделе. Программа исследования состояла из серии полуструктурированных интервью с детьми, родителями и учителями, за которыми следовала серия наблюдений в школах. Результаты интервью были проанализированы путем тематического анализа. Наиболее важные выводы заключались в том, что учителям необходимо иметь теплые отношения со своими учениками и проявлять к ним особый интерес; существует потребность в большей гибкости и свободе учебной программы, позволяющей учителям разрабатывать школьные и индивидуальные образовательные траектории в сочетании с более широким использованием имеющихся технологий; следует включить более практические, полезные и актуальные темы для повышения качества услуг по поддержке незрячих школьниц и их родителей. Проектирование образовательных учреждений для незрячих девочек должно производиться с учетом их потребностей, поскольку Саудовская Аравия продолжает свою амбициозную программу реструктуризации образования.

**Ключевые слова:** женщины, вмешательства, специальное образование, ученики с нарушениями зрения, Саудовская Аравия.

# Intervention Services for Female Visually Impaired Children in Saudi Arabia: A Qualitative Exploration

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This study investigated how well the intervention services for blind female children in Saudi Arabia met the needs and expectations of blind female students, their parents and teachers. It explored the reasons for the particular choice of interventions and examined how they could be improved. The case study is based on the literature, mainly a documentary review of papers produced by the Ministry of Education, policies and curriculum information from the schools and other public sector documents. The study adopted a qualitative methodology, with the researcher's involvement in interpretation of the findings clearly described in the concluding section. It also involved a series of semi-structured interviews with children, parents, and teachers followed by a series of observations at the schools. The interview findings were analysed by identifying main themes. The most important findings were that teachers needed to have a warm relationship with and a special interest in their students; there were the needs to have more flexibility and freedom in the curriculum for teachers to design school and individual curricula combined with greater use of the available technology; and more practical, useful and relevant subjects should be included to improve the quality of intervention services. The design of buildings to suit blind female children should also be considered as Saudi Arabia continues its ambitious education restructuring programme.

**Key words:** female, interventions, special education, Saudi Arabia, visually impaired students.

## Introduction

The definition of inclusive education as adopted in Saudi Arabia is based on international definitions and adapted to the Saudi Arabian environment [11]. Inclusion targets two distinct categories: students with minor physical or communicative disabilities who are included in mainstream schools and are considered to form the majority of

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students who need special education, and students who are blind, deaf, mentally retarded (the term still commonly used in Saudi Arabian education culture although it is being replaced by 'mentally challenged') and those suffering from autism or multiple disabilities [11; 12]. These students are usually taught in classrooms linked to mainstream schools except for those who are admitted to specialist schools such as the Al Nour Institutes for blind female children [2]. The International Bureau of Education – UNESCO (IBE-UNESCO) report notes they "badly need full inclusion with peers in ordinary classrooms, and efforts are being made to try to include them into mainstream schools" [52, pp. 30-31].

The "Educational Policy in the Kingdom" document asserts the rights of the disabled for education, care, and encouragement depending on their potential and capacities and within the precepts of Islam that considers education as an obligation for every individual in the nation [36]. It also asserts that education of all types and at all levels shall be free and financed through the state budget. Before 1960, children with disabilities were educated in mainstream classes, following the standard curriculum. However, in 1960 the Ministry of Education (ME) opened the first government-supported training institute for blind boys and four years later opened the first school for blind girls as well as the first school for the hearing impaired [1; 2]. The first specialized institute for children with mental disabilities opened in 1971. The number of special education schools and programmes has steadily increased to cover a wider geographical area and hence enable more children to take advantage of special education [14].

According to the IBE-UNESCO report [53–55], based on ME, Saudi Arabia figures, in 2006–2007, the total numbers of special education students involved were 61 980 males and 13 433 females. More children were taking special education in mainstream programs schools than attending special education institutions, 93% compared with 7%, although for female students the figure was 69% of all female students with special needs [12]. Little has changed in terms of the standard curriculum which has been followed by children in both mainstream and special schools before and since 1960. However, Saudi Arabia has plans to make major changes, using technology to facilitate teaching and learning and promote inclusion in ordinary schools and classrooms, improving the design of buildings by allowing more flexibility, and making the curriculum more learner-centered and individual.

## Review of the Relevant Literature

This review indicates that many of the problems that can be easily rectified have been largely resolved, however, there are still challenges to be met concerning the education of blind children in the country. "Economic development and specific interventions are changing the pattern of blindness in children all over the world" [20; 37]. The World Health Organization (WHO) defines blindness as visual acuity of less than 3/60 (20/200, 0,05), and low vision as less than 6/18 (20/50, 0,3) in the better eye with the best correction. One of several studies in Arab and eastern Mediterranean countries reported by Tabbara K.F. [51] showed that the most common causes of blindness in Saudi Arabia were cataract, trachoma, non-trachomatous corneal scars, refractive errors, congenital anomalies, failed medical or surgical treatment, and glaucoma. On the other hand, refractive errors, amblyopia, and trauma were causes of unilateral loss of vision [4; 42; 44]. About 7% of all Saudi Arabians and 42% of those older than 40 years developed cataract and over 3,5% of

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the population had corneal scars; about half were caused by trachoma. Therefore, eye disease and blindness are important health problems in Saudi Arabia. An early study [50] showed that among children under fourteen in special educational institutions in Saudi Arabia, before 1962 three-quarters of the cases of blindness were due to acquired diseases, whereas from 1962 onwards, genetically determined diseases were responsible for over 80% of childhood blindness. Although there has long been an acceptance that blind children and adults have rights and indeed before 1960 blind boys attended general schools and blind men were typically employed in reciting the holy Qu'ran, historically, special education in Saudi Arabia began in 1958 [10].

Concerns about health issues have led to considerable research into disabilities including blindness and low vision, with a major programme of research being conducted at the Prince Salman Centre for Disability Research. Much of the focus is on cure and prevention and in educational terms, this links to a deficit model of disability [33; 34; 43]. The early work of Finkelstein V. [34] is cited because it reflects Saudi Arabia's position in 2008, stating once again that the kingdom is striving to close a gap of a quarter of a century in five years. Al-Gain S.I. and Al-Abdulwahab S.S. [5] reported problems with disability research in Saudi Arabia. These are significant: firstly, because they have focused both on treatment and rehabilitation, reflecting the medical model of disability, and on the social or psychological model; and secondly, because of the particular features of Saudi Arabian society. It is worth noting here that the view of people with disabilities in the society of this country is based on a simple idea of disability that consists of helplessness, continuing dependence, being home-bound, low quality of life, and lack of productivity. Following these attitudes, small scale educational programmes are provided for the parents of children with disabilities. There is a number of difficulties associated with the researching into disability-related issues in Saudi Arabia. Some of these difficulties are associated with the characteristics of Saudi Arabian society such as the high incidence of consanguineous marriage, car accidents, and the fact that some families feel ashamed that they have a child with a disability and as a result will tend to avoid taking part in research on disability-related issues.

However, there have been some research projects specifically directed towards the education of blind, and visually impaired children where the most relevant are Alotaibi A.Z. [13], Al-Sukait S. [16], Ghaly M. [36] and Al-Hazmi M. [6; 7] and Salim S.B. [45]. There is little detail available other than what is reproduced here. Al-Sukait S. [16] provided a survey on a sample of 13 841 children under 15 years of age and found that 1,2% of those surveyed had visual disabilities, that there were large variations in the availability and quality of services rendered to children with disabilities, and that the most needed services were rehabilitation services (56,7%), followed by educational services (40,1%), and then therapeutic services (37,6%).

In his investigative research Al-Hazmi M. [6] included some data from Al Nour (under the ME and the General Presidency for Girls' Education) that suggests that his study may be particularly relevant in its recommendation that a rehabilitation centre should be established in Al-Madina for children with disabilities. Worryingly, Al-Hazmi's earlier research project [7] estimated that the percentage of children with some form of disability was approaching half the population, although visual disabilities were between 4% and 10% depending on how they are defined, whether blindness or low vision. It gives added

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importance to his suggestion for a specialist centre. Salim S.B. [45] noted a general shortage of appropriate information services for people with visual disabilities, despite some libraries having books printed in Braille, some tapes and magnifiers for reading, although specialized libraries for the blind (operated under institutes for blind boys) were offering some specific services to targeted groups. Given the international debate about the advantages and disadvantages of Braille, especially in the United States of America, it was interesting that most participants in this study preferred Braille followed by tapes then standard printing, followed in turn by models and finally by printing in capital letters [15]. Alotaibi A.Z. [13] investigated a very low sample and found that three-quarters of normally sighted students had friendly dealings with low vision students, that just under 80% of visually impaired students were happy to be in regular schools compared with 3,45% who were not happy. Almost 90% of low vision students supported the idea of inclusion.

***Teaching and learning strategies.*** It is important to remember that blind babies lack one of the main ways of learning about the world, not only seeing but also social referencing [23; 31]. Children born blind or who go blind before learning to read will not benefit from traditional mainstream ways of learning to read. They lack one of the three key learning styles for young children – the visual is missing from the visual, auditory, and kinaesthetic – and if reading is delayed, they will also lack the fourth for some time. It is widely accepted that people remember 10% of what they read, 20% of what they hear, 30% of what they see, and 50% of what they both see and hear [32; 38]. However, people also remember more of what they say and do with others, so participatory. Cognitive development is as important as affective and psychomotor domains of learning. The degree of visual impairment affects how a child learns, also if they are born blind or lose their sight later, and there may be more extensive neurological involvement and therefore additional problems. A multi-sensory approach involving touch, smell, and taste along with hearing and listening skills for those whose hearing is not affected, is essential [24; 25; 35; 39].

There are three main approaches and types of the intervention strategy, behavioural, psychodynamic and eco-systemic, and in most cases, schools and teachers use a combination of these. It is also important because of blind children's health and safety needs to try to build in a preventive discipline that avoids incidents. The UK view of a behavioural approach to discipline states that behaviour can be learned and unlearned, learning acceptable responses and unlearning unacceptable responses. This has been criticized in the Warnock Report [29] because it may not improve challenging behaviour in the long term, and it is an extrinsic rather than intrinsic model of control. Blind children need to develop autonomy including self-management of behaviour. In Saudi Arabia, the central importance of Islam suggests that individuals with disabilities have the rights to enjoy all the benefits, and have duties to perform as any member of the community [3], and is later reflected in the rights and regulations for students with disabilities regarding their education [8; 9; 12]. These religious principles encourage inclusive education as stated in UNESCO, 1994 [55] and the Dakar Framework, 2000 [56]. In some ways, this reflects the eco-systemic approaches based on the work of Bronfenbrenner [21] that proposes that children's behaviour arises from interactions in and between the subsystems to which they belong such as a family and school. However, the linkages between what Bronfenbrenner [21] termed the micro-system (the child), the meso-system (the child, their teacher and classmates), the exo-system (child and child's relationship to school as a whole, parents and external agencies), and the macro-system (the child in relation to the cultural, social

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and educational values and beliefs of wider society) are so strong that there is a relatively little mismatch between them.

***Concepts of curriculum: differentiation in practice.*** There are different options of the target of the emphasis, either on a blind child's right to access the standard curriculum, or on an individualized curriculum that ensures that each child can develop at his own level and pace and that runs alongside the National Curriculum. According to Smith M.K [46] and Smith A. [47], curriculum models can be product models with specific outcomes to be achieved, often linked to an overall vocational model of education, process models [48] that emphasize how to put principles and features of an educational proposal into practice, competence models again linked to a vocational view of education (Scholastic Aptitude Tests are somewhere between product and competence) and situational models that take into account a system approach. Increasingly inclusion is moving schools towards a situational model that is appropriate for blind children: Saudi Arabia has a strong product model combined with a general situational model that does not perhaps allow sufficiently for individual differences in blind and low vision children. Unlike the UK, where differentiation at every level of the curriculum, the idea of differentiation is only starting to search for its way into the regular education system in Saudi Arabia.

***Teaching reading to blind children.*** Storytelling is a key element in learning to read Braille, but it is more strongly linked with teaching writing the blind students than teaching the sighted children to read because when a blind child reads his or her own story, he is actively engaged in what he is reading, while a sighted child is able to relate to what is seen in his environment. Consciously developing and extending vocabulary is also important: this takes time because longer explanations of words are needed when the things they describe cannot be seen. However, limited vocabulary is more likely in blind children and yet it is something which hinders their fluency of reading and writing.

The education of blind children is complex and requires a flexible, individualized approach to the curriculum which needs to be implemented through a flexible pedagogy that takes more account and develops a range of learning styles and teaching strategies. This presents teachers with new challenges they may not be equipped to deal with. Turning specifically to the current status of intervention services in Saudi Arabia, Alquraini T. [12] reported on the status of Special Education Services in the Arab World, highlighting the important role of voluntary communities and organizations which increased people's awareness of these services as well as creating many of such voluntary organizations. Significantly, Alquraini T. [12] found that girls' access to special education services was not as good as boys' access because greater numbers of boys were using more of the available services: this was born out in the fieldwork, where it was discovered that girls are far less likely to access pedagogical services such as visits to places outside the school. Despite the existence of a legislative framework, Alquraini T. [12] considered that such a legislation was an abstract statement that lacked strict measures for implementation and accountability.

Khodeer M.M. and Al-Biblawy I.A. [41] proposed that schools should be in a quiet location (because of students' need to rely more on their hearing) and close to therapeutic and professional establishments that provide appropriate services. The premises should have sufficient space and take into account security and safety, for example having gentle slopes, non-slip surfaces, tactile guidelines at an appropriate height on walls and no sharp

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edges. School building design should include provision for recreational activities, space for interests and hobbies, and offer a range of sensory experiences [41]. Careful attention should be paid to classroom layout, and the Braille library is important. Needless to say, educational technological aids shall clearly demonstrate their benefits to the students. Khodeer M.M. and Al-Biblawy I.A. [41] also make recommendations about the curriculum, including managing individual differences by providing individual educational programmes whether in mainstream or specialist schools, ensuring models are available to give a sense of visual concepts such as mountains and insects, and that these models shall be accompanied by detailed explanations from the teacher, encompassing physical and recreational activities involving orientation and mobility skills, and keeping the class size to a maximum of eight students.

## Research Methodology

This section sets out the justification for a qualitative, interpretive, inductive approach and the choice of a case study method in particular. Starting with the reasons for the case study approach, the researcher is aiming to find "patterns and linkages of theoretical importance." [22, p. 173], understand the situation and experiences in depth or, as Denzin expressed it, [26–28] qualitative researchers aim to get to the heart of social situations through what has been termed 'thick rich description' (26, p. 83).

At least two writers in particular highlight the value of case studies, Denscombe M. [30] and Stake R. [18; 49]. This is consistent with overall methodologies within qualitative research that use thick rich descriptions to examine, explore and understand social situations in detail and in depth [26–28] or as Bryman A. expressed it, 'understanding events in their context' [22, p. 65]. Qualitative research is often criticized on the grounds that the findings cannot be generalized and that a qualitative researcher may substitutes his or her own views for data and information: see e.g., Grix J. [40]. According to Bell J. [19, p. 6], citing Bassey M. [18], "an important way of measuring the usefulness and value of a case study is to assess the extent to which a teacher working in a similar situation could relate to the case study, in terms of whether the information is both appropriate and sufficient for their own decision making situations". In other words, Bell J. [19] makes the point that for a case study 'relatability' is more important than 'generalisability'. The qualitative approach is located within the interpretivism paradigm and "usually involves an in-depth investigation of knowledge through, for example, participant observation", interviews and documentary evidence [40, pp. 119-120]. An interpretive stance is also essential because in such a situation there will be multiple realities, for example, it is possible that each child has a unique experience of education in the school depending on their age, the nature and extent of their visual impairment, whether or not they have other associated impairments, and their family background. This study explores the status of intervention services for blind female children in Saudi Arabia and identifies potential improvements.

*Research questions.* The research questions were initially framed as follows allowing to evolve them during the course of the research if appropriate:

1. How do the services meet the needs and expectations of blind female pupils, their parents, and teachers?

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2. What are the reasons for a particular choice of interventions?

3. How could the intervention services for blind female children in Saudi Arabia be improved?

***Methods.*** The overall methodology is qualitative and interpretive, with the researcher's involvement in the interpretation of the findings clearly described in the chapter on the discussion of the findings. The researcher's role is important because of the language differences and translation of original documents. Primary data was gathered from a series of semi-structured interviews with children, parents, and teachers, in addition to observations at the schools. Data of the blind female students from the West of England School and College was used for comparison and contrast of socio-political context, and within the limits of time and resources one detailed case study from the Al-Nour Institute for Girls in Riyadh (for blind female students) has been supported with the information from a second Al-Nour Institute for Girls in Qassim (for blind female students).

The review of background documentation is important in order to answer the first research question because answers from participants need to be related to the services as they are described in official documents and delivered in the Institute itself. It is also essential to provide the context for answering the second and third research questions.

The semi-structured interviews were based on a series of interview schedules, with broad areas to be used as prompts during the interviews, but allowing some freedom for respondents to raise points of interest and issues what concerned them. Responses gathered during the interviews were analysed in terms of recurring themes, words and phrases, and the findings from those interviews presented under the emerging relevant themes. These were then compared or contrasted as appropriate with the themes that emerged from the documentary review in order to arrive at a coherent set of findings.

***Research instruments.*** It was decided to conduct interviews rather than distribute questionnaires due to several reasons: firstly, the responses would come directly from the participants rather than being filtered through an adult or translator in the case of the children and so, would give more freedom for expressing themselves; secondly, there was no budget either for translating the questionnaires into Braille for the blind participants or for translating the answers back into Arabic; thirdly, the availability of Braille equipment and the number of blind participants using Braille was very limited. The first reason was considered to be the most important. The interview schedules (one for each of pupils, teachers, and parents) included the following areas for discussion: needs and expectation, learners' personal views on school and home, curriculum, school-specific policies and initiatives, participation of parents, additional therapeutic and medical support, assessments, learning strategies, teachers' competence, professional development trainings for teachers, etc.

The final development of the interview schedules took place once the initial collection of documentary evidence had been read and summarized in order to ensure that the key issues were addressed where appropriate. Greater clarity was required about the nature of the services provided before asking how they met the needs and expectations of blind female pupils, their parents, and teachers so that the researcher could prompt and ask supplementary questions during the interviews.

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Interviews were chosen in preference to self-administered questionnaires to avoid the following: the possibility of misinterpretation of the questions but keeping the ability to clarify any questions during the interview process, the need to translate the questionnaire into Braille for the blind female children in the study and perhaps blind parents and teachers, and hence the need to place an additional burden on parents and teachers who would have to go through the questionnaire with the children. In addition, it is much more difficult to have a structured interview with a child and following an interview guide allows the researcher to 'go with the flow' yet bring the interview back onto topic at the earliest opportunity, whereas a structured questionnaire could artificially constrain the way that a child, in particular, might wish to respond.

## Case study & Findings

***The first institute.*** The Institute (Al-Nour Institute for Girls in Riyadh) had forty-seven teachers, nine specializing in teaching blind students, two with the responsibility of teaching students with mental retardation, and three responsible for teaching students with learning difficulties. The remaining were the teachers of other subjects. Those nine specialists were themselves blind. They were students at the Institute, then at the University, and they have been employed for more than twenty years despite their own blindness and additional health problems. There were 125 blind students out of 193 students in total. The institute was built more than twenty years ago and has three floors; there is little or no adaptation for blind pupils.

***The second institute.*** This Institute Al-Nour Institute for Girls in Qassim was much newer and smaller. There were thirty-two teachers, four of whom had undertaken a one-year specialist diploma following their BA, however, the remaining twenty-eight teachers were not special education needs (SEN) specialists but subject teachers. There were 31 blind students out of 97 students in total. The institute was built in 1998 and had three floors with adjustments for blind students such as automatic gates (for safety), appropriate seating and desks and ICT (Information and Communication Technology) facilities. Each blind student was entitled to two free sets of textbooks, one in Braille and one in standard print, also a cubes board for mathematics, a school apron, daily transport and meal (juice, biscuits and cake). Students received a monthly bonus according to their academic stage as well, irrespective of their achievements.

### *Participants perceptions of existing services: Pupil responses*

#### *Finding 1: Pupils need loving and caring teachers*

The importance of the relationship between teachers and pupils cannot be overstated. The impact of teachers as providers of a family environment, facilitators of learning, inspirers, and role models was clear. At present, although there is now a number of special education needs, teachers who have been trained abroad in SEN, this does not necessarily mean that they have been selected for their empathy with special education needs children. Often teaching appointments are made under the centralized system on the basis of applications for postings in particular locations rather than aptitude, interest, and speciality. SEN teaching provides a premium salary which may also attract teachers into the sector for the wrong reasons. It was clear that pupils valued variety, interesting

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activities (teaching techniques were mentioned frequently), a sense of family and friendship, and encouragement to succeed. For example, a female student stated:

*"Each teacher teaches the lesson every day in traditional and routine ways ignoring our love and passion for her. We want every teacher to feel our love and provide us with mutual love and passion to enjoy learning."*

It was also clear that parents might not inform the schools about the additional health needs having concerns the school could reject their daughter. In these circumstances, the children need extra care and attention from school staff. The nurse in the first school stated:

*"I have been working in this school for a year and I was surprised while flipping through students' files, to know that there is not enough information about the students' health. I was more shocked when I contacted the parents to investigate the health issues of their daughters and I found out that they say that their daughter is in a good health state."*

The individuality of the responses was striking, and this proved to be the case throughout the data analysis. For example, one first-grade student in the first school responded she liked the school, especially her teacher. For her, the difficult subjects were geography and mathematics because *"the many arithmetic calculations are less interesting than the school life"*. By contrast, a first-grade student in the first school responded her favourite subjects were mathematics and history *"because of the teacher's techniques and how she treats me"*.

A different view was offered by a six-grade student from the second school who found Home Economics the easiest because it was fun and useful, and she was praised at home by her mother because she cooked what she learned to cook at school. Yet another perspective was provided by a fourth-grade student who said she loved her teachers and activity classes because *"The teacher focuses all her attention on all three students in the class. All my teachers help me to develop my talent which is 'writing books'"*. She thinks that she will write many books that will be useful for the blind female students, especially in an everyday life. A first-year preparatory student from the second school summarized this finding very well: *"Teachers are the best thing at school. We are like one family at the Institute. Courses are easy when the teacher explains well and helps students understand"*.

*Finding 2: Pupils want more freedom and flexibility*

Most of those interviewed mentioned the oasis room where they could relax, meet friends or choose from activities, or the prayer room where teachers used a wider variety of teaching techniques than in the standard curriculum. Also, pupils considered friendships and religious instruction about how to live their lives as very important and therefore these were linked with freedoms and flexibility. They highlighted the importance of outdoor trips (temporarily suspended for girls) and getting to know their environment. Education needs to enable the children to handle adult life and not simply pass school-leaving certificates and so this is a serious concern.

One second-grade student in the second school clearly stated *"What upsets me is that I feel constrained and not free"* despite the fact that her favourite subject was Islamic exegesis

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because she liked the precision and regulations. A sixth-grade student in the first school was more specific noting she had three close friends to help her to get on the school bus and that she enjoyed participation in new non-class activities. A first-grade student from the same school enjoyed studying at the library as well as spending time in the oasis room, but most of all enjoyed *"sitting with my lovely friends"*. She, like many others, liked outdoor trips, although the regulation allowing them had been temporarily suspended.

### Finding 3: Pupils want more practical, useful, relevant activities

Students wanted a range of activities, from cooking and sandwich preparation to practical science sessions instead of purely theory lessons, outdoor trips to start to know the community and environment around the school, and essential life skills. Whilst the two schools visited were seeking to address these issues to some extent, one was better at securing resources than the other and more committed to the whole idea. Saudi Arabia has a huge agenda for a change in education and it would be easy to miss these relatively small but significant changes. Blindness will remain an issue, therefore ensuring that children develop the necessary life skills is essential. One school introduced these from the first day and continued to develop them throughout the entire education process. The researcher suggests this is the appropriate model. The question of practical science sessions could also be addressed through the central planning and budgeting mechanisms, although some flexibility in the curriculum would be needed as would teachers with training in how to manage such activities safely with blind children.

Although expressed differently, these views were common in both schools. For example, a first-grade student in the first school would like to do cookery and sandwich preparation, which echoes the student in the second school who enjoys Home Economics. By contrast, a sixth-grade student in the first school held the opinion that *"school is more interesting if there are interesting discussions"* whereas a sixth-grade student in the second school valued participating in the school broadcast every morning and also taking part in the "Visual Handicap Association" which brought her a lot of friends, both teachers and classmates.

### Participants perceptions of existing services: Teacher responses

### Finding 1: Teachers reported a strong need for more training

During the fieldwork, a Braille course was running in one of the schools. One teacher wanted a training *"this makes the teacher closer to the student"*. Generally, teachers also wanted more books about visually impaired children and believed they were "*in desperate need of more courses*" to enable them to train and teach better through having more knowledge. For example, a teacher from the first school stated:

*"We are not special education teachers, but we were appointed in this position due to the lack of these specialized teachers. All we need is to get some training programmes in special education to know how to deal with blind female students."*

Although numbers of teachers have completed Master courses abroad and foreign experts have delivered courses in the Kingdom, there remains a significant need for the benefits of the training for the practicing teachers, whether they have been working in the Institute for a long time or have just started their carrier there.

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The English teacher in the second school, already trained in special education, was *"keen to see more training and also experienced staff appointed"* and the Director at the same school wanted appropriate training courses for many teachers who were not trained in how to teach blind children, although she worked hard to train new teachers herself. The history and geography teacher stressed that *"preparation of student teachers is very important"*.

Training needs were different in two schools. In the first school, the computer teacher (the only one available who can teach the use of computers in the school) wanted to see greater variety of computer training courses especially those related to blindness. She acknowledged that there were training courses for teachers concerning communication but unfortunately many were missed because teachers were informed too late of the course dates. In contrast, the Islamic teacher from the first school was pleased that teachers were receiving the Braille training; but emphasized the importance of the teacher-student relationship, saying teachers believed that they urgently needed more courses for their respective field in a way that brings the teacher closer to the student. The observations at the schools reinforced the interview findings that more and more varied trainings were needed. In one class led by a blind teacher, some students were yawning and others were playing, yet the teacher carried on reading, totally unaware of what students were doing simply because she could not see them.

In the researcher's view, some of the teachers already trained abroad and with good experience of teaching in Saudi Arabia should be encouraged to deliver such a programme for in-service teachers. Recruitment and appointment of teachers to Al Nour Institutes should select teachers on the basis of their interests in special educational needs. This has particular relevance in view of those female students' aspirations who would like to become teachers themselves in the future.

*Finding 2: Teachers reported the need for more resources*

There was an agreement about the need for more resources. These could be medical (both schools wanted a resident doctor, one wanted psychological and social worker specialist available to the school), educational (up to date and more varied books, computers and the Internet access, teaching assistants, teaching aids) – more resources generally. For example, they wanted more and better resources, in particular for Braille and IT, with a desire to see computers introduced much earlier stage. Currently, computer resources intended for the elementary school students were being diverted to the intermediate and secondary school students because the latter were to leave school sooner but this was disadvantaging younger pupils. The inequalities were striking: one school had full Braille resources in both Arabic and English and most teachers were confident in using the technology while another had inadequate Braille resources in both the languages so the teachers could not acquire desired competency.

The Islamic education teacher from the first school noted that teachers could make their own creative resources but expressed a wish to see *"permanent and continuous development of educational methods and resources"* whereas the nurse at that school wanted accurate and complete health records, ideally, a resident doctor (and, if not, a supply of medicines for known conditions at the school) whilst the student guide wanted

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to speed up the renewal and repair of the Braille equipment and books. In the second school, much newer, and with younger teaching staff, the desire for improved resources is different but not less. In the teaching aid room which functions as a workshop, the teacher in charge of the room "*creates new teaching aids upon teachers' request*". The Director has persuaded a businessman to recognize the first graduates' achievement by the donation of laptops to the school, however, at a more basic level she would like to see better quality printing of Braille books. The nurse at this school had better facilities and used the nearest hospitals for emergency admissions but specifically wanted access to optometrists for regular eye checks.

### Finding 3: Teachers felt that there needs to be more flexibility in the curriculum

The Islamic teachers at one school thought it was important "*to reconsider subjects that are not suitable for blind children in their education*". Others wanted more time for guidance and orientation in respect of behaviour to enable children to live in the outside world after leaving school. Overall, there was a strong wish for individual schools and teachers to have greater flexibility and freedom in implementing the curriculum in the running of their own school because they believed that being so close to their students made them better judges of what they actually needed to help them achieve and have a better quality of life at and after school.

This is difficult for a country expanding so rapidly as Saudi Arabia with new schools opening on a daily basis for increasing numbers of children without as well as with disabilities. In addition, the kingdom exercises strong central control – a model that has worked well in countries with a tribal past. Relaxing rules and control at a time of vast expansion would require taking a major risk and it is unlikely that the country will follow this route. However, the researcher believes that flexibility could be given in specific areas. Here are the examples of specific suggestions included those from the English teacher in the second school: firstly, to reduce the time given to sessions that are too long because of the intensity of the effort required such as reading for those just learning Braille; secondly, to provide the equipment and time for the development of audio skills, that is a neglected area, by removing the areas of learning less relevant for blind students. As the Director of the second school suggested, such areas could include amongst others the sessions on the light reflection. According to the computer teacher in the first school, more computers and the Internet link were needed. The Islamic teacher wanted to see voice recording machines used to narrate religious novels and also "*more books about visual impairment to enable teachers to develop their teaching competence*".

### Participants perceptions of existing services: Parent responses

Whilst the original intention was to interview five parents from each school, it proved impossible to meet with parents of children attending the second school for two reasons. First, most of the parents lived at a considerable distance from the school and at the time of the fieldwork, there was no date arranged for a mothers' meeting. Second, because little time was available to complete the fieldwork after formal permissions had been obtained to carry out the research. However, the findings were similar to the findings for pupils and teachers.

### Finding 1: Parents want loving and caring teachers for their daughters

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All the parents emphasized the importance of the teachers' role in their children's lives, for learning subjects and life skills, and for behaviour management and control. Teachers need to be committed, caring and professional so that they look out for problems that any individual child may be experiencing - academic, educational, or social. A specialist training helps to develop the teachers who are loving and caring as well as having knowledge of how to teach and more training should be available to help the teachers to support the students.

For example, *"The teacher meets educational needs through child guidance and control especially when the teacher loves the student"* (mother of a third-grade student). *"Committed teachers help preparing children for life in the kingdom. Everyone in the team – parents, teachers, educational supervisor, manager, and others – need to work together on this"* and *"The school is good, the teachers are the best thing about it"* (mother of two children, the second and fourth grades).

*Finding 2: Parents want schools to provide more self-reliance skills.*

Although all the parents interviewed valued the education and help their daughters were receiving, and some, in particular, were delighted that their daughters could progress to the University (indeed one had already graduated so, they recognized there was a room for improvement in preparation for adult life and skills that would enable a greater degree of self-reliance.

For example, the mother of a third-grade student observed that *"The education is suitable but should add teaching self-reliance in preparing and cooking food"*. A different opinion was offered by the mother of a second-grade student that *"Preparation for the adult life is provided through formal and informal activities and could be improved with the help of journeys and more knowledge of the outside environment"*. This view was supported by the mother of a first-grade student in the first school who said *"Children need meaningful subjects and self-reliance in tasks and in negotiating their environment"*. The mother of two students, one in the fifth grade and the other in the sixth, noted that in this respect *"Easing the school curriculum would help to meet her daughters' needs"*.

The mother of a third-grade student summarized this finding as follows: *"To develop the learning curriculum so as to help the blind girl in her life, not as at present, which keeps the curriculum only for success in it, not to benefit from it in your life".*

*Finding 3: Parents want to see more and more appropriate resources*

This finding included a broad range of resources, from school buildings that are suitable i.e. adapted physical environment or purpose-built for blind children; a wider selection of books in Braille to a talking library; more computers and facilities to enable them to learn more of the life skills that needed for self-reliance; Individual comments reflected the needs and stage of development of their children.

For example, in the words of the mother of a fourth-grade student, *"Suitable buildings for teaching blind children"*, whilst the mother of the two students in the fifth and sixth grade emphasized that *"The library needs more books: her daughters often go there but cannot find what they want".* A third parent stated that *"The school should be given a talking*

*library"* Mother of third-grade student Changes could improve how educational needs are met, for example, if the school had an internet connection for children to learn to use it.

### Interventions and justification for their dominance

#### Intervention 1: Standard curriculum

The most notable feature is that apart from some additional support services, blind girls follow the same curriculum as their sighted peers in regular schools. Little attention is paid in practice to orientation in their school or wider environment or to the development of life skills. However, this probably stems from the fact that when blind boys were first integrated into mainstream schools, studying the standard curriculum was a great advantage in learning handcrafts and memorizing the Qu'ran because it opened up many new possibilities for them. Special schools opened up opportunities to blind girls that could not have been imagined before.

Whilst the delivery of a standard curriculum determined by the ME under the relevant legislation goes without question because it is monitored top-down on what is in effect on a daily basis at a school level, some teachers question whether this is appropriate. However, there is an opportunity to use many varied teaching techniques within the teaching of Islam in the prayer room. The need for change is recognized but it may be some years before the changes are implemented. In some ways, this is made more difficult by the way in which Saudi Arabia has embraced inclusion in its declarations as a member of UNESCO and the World Blind Union. There is simply too much change happening too fast. Yet there are possibilities.

For example, a first-year preparatory student mentioned *"The best thing about the prayer room is the lessons, competitions, programmes and the different activities that are made there".* The pilot activity teacher from the first school was developing *"extracurricular activities in themes (technical, professional, cultural, religious, and scientific), also teaching safe movement to children and their parents".* A third respondent expressed it this way, *"As for the social needs of children, it is better not to have any new idea"*, as the school has to obtain permission from the General Secretariat of Secondary Education (GSSE) that may take a long time to decide and then reject it. Even at the practical level of teaching and using Braille, many teachers were not trained, as discussed under the Teacher's Responses.

My observations in both schools confirmed all these perceptions. There were dedicated and caring specialist teachers who were struggling against the constraints of the standard curriculum and the lengthy bureaucratic procedures involved in obtaining permissions to make changes. In the worst case, the teachers with many years' experience were reading out standard texts as they always did because that is how they had been trained. In particular, in the first school some teachers who were teaching Braille to students were struggling both with the Braille itself and with finding the appropriate pedagogic method for teaching it. In the second school, although the teachers said that all their facilities and materials were good and suitable for blind students, my observation showed that many of these materials were very old and in need of renewal. I did not see any teacher actually using the facilities to make learning easier.

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*Intervention 2: Health assessments and health care*

Visual impairment is often accompanied by other health conditions and disabilities. The principles of thorough health checks, continuous assessments, and health care are clear. However, the practice does not live up to the theory. Nurses have poorly equipped rooms, there are no resident doctors, easily accessible psychological or social work specialists and parents are often reluctant to give the true facts about their children's health. There is a serious need to improve the quality of health interventions.

For example, the nurse from the first school said, *"There was a resident doctor who should be working in the school, but she moved away to work in another school"*.

From my observations in this school, I did not see a doctor at any time during my visit and noticed that the nurse had to meet all the medical needs of the students, including twelve serious conditions (4 renal failure, 4 multiple disabilities, and 4 others), effectively doing the doctor's job in addition to her own one.

*Intervention 3: Orientation to the external environment*

The intervention here is minimal, students are encouraged to stay in the school and classroom, although some teachers disagree with this approach. The reason for restricting this orientation is a inadequate finance allocated for the protection of girls, especially blind girls, who could be particularly vulnerable.

As the Islamic teacher from the first school said, *"Preparing students for adult life is done through awareness activities and programmes, targeted seminars, and school broadcasting on important subjects"* and this reflects the historical definition of disability, a condition close to complete helplessness. The physical education teacher at the same school held a similar view *"Preparation for adult life is better achieved through symposiums and awareness programmes. This programme has generated interest among boys but is not available for girls (who do not take their full educational entitlement)"*.

My observation, in complete contrast to my experience in the West of England School and College in the UK, was that students were given minimum orientation to both their immediate environment and the wider one. The Director of the second school, like myself, believed that the school could better meet blind girls' social needs, she replied: *"Through engagement with the community and living alongside them in a way that allows them to see the community and actually feel part of the community".*

### Directions for improving existing services in Saudi Arabia

According to the students, the following changes are needed:

a. more relevant activities: cooking and sandwich preparation, and other essential life skills; outdoor trips to get familiar with the community and environment around the school;

b. more interesting activities: practical science sessions instead of purely theory, quizzes, games and competitions in lessons across the curriculum;

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c. more resources: computers, the Internet connection (how to use Google), a wider choice of books in the library.

According to the parents, the following changes are needed:

a. more specialists and teachers who have appropriate training to help them meet the needs of their blind students;

b. adaptations to the curriculum that allow time for the development of self-reliance skills and make the learning of Braille less stressful;

c. more and better resources such as a talking library, computers with the Internet connection and a wider variety of reading materials.

According to the teachers, the following changes are needed:

a. more freedom and flexibility in the curriculum to be able to adapt the curriculum content and timing of lessons to suit the needs of blind students;

b. more training to enable them to better meet the needs of blind students, especially in Braille and ICT;

c. improved access to health care specialists (doctors, psychologists, therapists) and social workers;

d. more and better resources that can be renewed more quickly and more often.

There is a considerable degree of overlap and agreement between the changes that pupils, parents, and teachers want to see.

### Conclusion & Recommendations

This study investigated how well the intervention services for blind female children in Saudi Arabia met the needs and expectations of blind female students, their parents, and teachers. It explored the reasons for the particular choice of interventions and examined how participants in the study felt they could be improved. The study adopted a qualitative methodology, involving a series of semi-structured interviews in two schools for blind female students (Al-Nour Institute for Girls in Riyadh and Al-Nour Institute for Girls in Qassim), with 10 children in each school, 5 parents from the first school, and 5 teachers, the nurse and the social support worker from each school. These interviews were followed by a series of observations at the schools. The case study was also based on the relevant literature, including a documentary review of papers released by the ME, policies and curriculum information from the schools, as well as other public sector documents.

The most important findings are the following: the teachers need to have a warm relationship with and a special interest in their students; there is a need to have more flexibility and freedom in the curriculum for teachers to design school and individual curricula combined with greater use of the available technology; and more practical, useful and relevant subjects should be included to improve the quality of intervention services. The design of buildings to suit female blind children should also be taken into account. There was considerable agreement between the groups of participants about their perceptions of current intervention services and the changes they want to see.

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### Recommendations at the school level

These are practical recommendations that focus on the teaching methods employed in the classroom and adaptation of the curriculum to suit the needs of blind students. There should be, as a minimum, an ICT suite in each school to enable teachers to teach blind students more effectively using a combination of computer technology and Arabic Braille. This facility would also provide opportunities for teachers to learn how to use such a technology themselves. The standard curriculum needs to be adapted to suit the needs of blind students. Although this would happen in practice in Saudi Arabia from a top-down position, schools have a critical role to play in piloting variations on the curriculum and feeding back to the ME and the GSSE so that the new curriculum is designed in a way that will work for the teachers and students in the schools. Practical activities should be widely used as a method of teaching and learning in the classroom to develop the kinaesthetic learning style on which many blind children rely quite heavily.

### Recommendations at the policy level

There is a need to have a greater degree of inclusion, certainly inclusion of blind children in the wider community, whether that comes about through the involvement of businesses and state local organizations or through blind children socializing on a more formal and regular basis with children in the regular education system. Considering the geography of Saudi Arabia and the vast undertaking that constitutes its current educational expansion and improvement plan, a fuller degree of inclusion may take far longer time to achieve. Teachers should be given more freedom and flexibility to adapt to the standard curriculum by choosing and using new and more suitable programmes for blind students. Through the rigorous inspection, achievement could still be monitored effectively, although there would need to be a dialogue between schools and policymakers to ensure that appropriate attainment targets were in place.

### Recommendations at the societal level

There is the first and the main recommendation here is arranging trips and out-of-school activities such as shopping that not only prepare pupils for the adult life but also enable them to be seen by the community as part of it. It is aimed at influencing the attitudes of a wider society that will potentially have a far greater impact than awareness sessions.

The second recommendation would be for schools and businesses to establish partnerships. These could be small working partnerships like the one in the second school where the Director persuaded a local businessman to honour her first set of graduates by a donation of laptops, or by an action such as employers sponsoring a trip or a manager giving a talk to older children about what her job involves. Equally, large companies like Microsoft could be invited to get involved in the project management and delivery of hardware and software to schools for blind children so that no additional burden is placed on the ME or GSSE in equipping the schools. The rights of children with disabilities to special education services are stated in law. However, there is a difference between acknowledging their rights and implementing the necessary actions to make their rights a reality. In order to facilitate this, there should also be laws that reinforce the special

treatment for blind students: this would enable the Ministry to be held accountable for the implementation of the recommended actions.

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