A case study of how a centre-based preschool programme for children who are blind/visually impaired supports early multilingual communication development

by

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Abstract

Communication development is an essential part of a child's development – socially, academically, and vocationally. For children with visual impairment/blindness (VI/B), the literature indicates that opportunities supporting early communication development can benefit a child with VI/B. Speech-language therapists' (SLTs) core focus on communication is instrumental in supporting children to develop their communication. However, little is known about the practices which support the communication development of children with VI/B.

The study therefore aimed to explore and describe how the centre-based preschool programme at the League of the Friends of the Blind (LOFOB) in Cape Town supported early multilingual communication development. A qualitative case study design was used to explore and describe the programme's knowledge, values, principles, skills, and practices. Semi-structured interviews were conducted with key stakeholders, along with classroom observations and document reviews of key government policies, principles and standards. Thematic analysis was used to analyse and interpret findings. During this process a key informant with VI was used to assist with the interpretation of the data.

The findings are presented as a narrative and accompanying individual vignettes. The narrative explores the activities and opportunities available for multilingual communication support. While the individual vignettes describe the knowledge, values, principles and skills that inform the practices of the programme. Key themes that emerged from thematic analysis of the data include an inclusive approach to encourage multilingual engagements and support, a structured programme that focussed on capabilities, and a committed team offering support.

The study argued that there is an opportunity for the SLT profession to rethink how communication is typically supported and shifting from a focus on pathology to communication supports that explore capabilities and inclusion.

Key words: Communication development, communication supports, visual impairment/blindness (VI/B), centre-based preschool programme

Glossary of terms

Global South

Refers broadly to the southern regions of the world, previously termed as ‘developing countries’ i.e., Africa and South America, considered low income, politically and/or historically marginalised (Odeh, 2010).

Global North

Refers broadly to the northern regions of the world, previously termed as ‘developed counties’ i.e., Europe and North America, considered the wealthier and more privileged parts of the world (Odeh, 2010).

Inclusive schools

Inclusive schools or full-service schools are equipped with the resources and the staff to support learners with a range of learning needs (Department of Basic Education, 2001).

Parent/caregiver

Individuals involved in the care and support of the child with VI/B in the programme.

The programme/centre-based programme/the preschool programme

The programme is formally known as the early childhood development programme based at the preschool centre at the League of the Friends of the Blind (LOFOB).

Stakeholders

The people involved in the running of the preschool programme at LOFOB.

Special school

A special school is resourced specifically to deliver education to learners requiring high-intensity support (Department of Basic Education, 2010).

Sighted

Individuals who have the ability to see and rely on sight to engage in the world around them.

Non-sighted

Individuals who have a visual impairment or blindness.

Sighted world

The world as perceived by those who are sighted.

Visual impairment/ Blindness (VI/B)

Visual impairment referring to all degrees of vision loss and blindness referring to the complete lack of sight (World Health Organisation, 2019).

Abbreviations

ECD	Early Childhood Development
DBE	Department of Basic Education
DSD	Department of Social Development
IE	Inclusive Education
LOFOB	League of the Friends of the Blind
LoLT	Language of Learning and Teaching
NCF	National Curriculum Framework
NELDS	National Early Learning and Development Standards for children
SLT	Speech Language Therapist
VI/B	Visual impairment/Blindness

Preface

As the researcher, I acknowledge my positionality as significant in the research process. My positionality contributed to how the research was conducted, how the results were interpreted, and what outcomes were drawn. Positionality refers to my perspective and the position I adopted when conducting the research, this included my beliefs about the nature of our social reality, knowledge, what I know, and my assumptions about reality (Holmes, 2020). In other words, these ontological and epistemological assumptions are further influenced by my own personal values, my gender, race, ethnicity, social class, historical and geographical locations, (dis)abilities, etc. (Sikes, 2004).

I identify as a middle-class woman of colour in post-apartheid South Africa, who is sighted, neurotypical and able-bodied. I am for the most part a monolingual speaker who grew up speaking, reading, and writing in English. I received formal training at a medical school with specific knowledge and practice in speech-language pathology. I have always wanted to help people for a living. Speech-language pathology meant that I could work with people of all ages to help them communicate effectively in their day-to-day lives. My training gave me the knowledge of typical speech, language and communication, ultimately shaping my views and perceptions of impairment or disability, mostly informed through a pathology lens. While at the same time intersecting with my own identity, experiences and personal understandings.

This pathology lens placed me in a position of power to 'fix' or remediate deviations from 'normal'. During my training, there were few opportunities where I practically engaged with impairment or disability outside of this medical lens. I wanted to challenge my lens and shift from the traditional understanding to explore possibilities of communication support for children with visual impairment/blindness (VI/B). In doing so, I would be shifting from my pathology lens and rethinking my practice as an SLT. The current study has a focus on communication supports for children with VI/B. I view myself as an outsider who has limited experience and understanding of VI/B.

When engaging with the participants during the research process, I was perceived as an expert in communication by those involved in the study given my background in speech-language pathology. However, through the research process I assured participants of my stance as a researcher, also as an outsider gaining insights from their experiences with VI/B. This shift was necessary to challenge my views and lens as an SLT, whose role is embedded in power as the

‘expert’ medical professional. Through the process of the research, I felt challenged as I shifted my views on impairment. Support from my supervisors, as well as the informant involved in the study, helped me reflect on my role and interrogate my beliefs and assumptions.

Chapter 1

Introduction and Rationale to the study

1.1 Overview of the chapter

This chapter aims to introduce concepts relating to communication development, early communication supports, early intervention and communication supports in the context of a programme as it relates to children with VI/B. Once these key areas are discussed, the rationale of the study will follow including; the knowledge gap the study intended to fill and the need for communication support. The study context will include the South African context and describe the specific context in which the study took place. The focus of the study will detail the important aspects the study intended to focus on, followed by the research question, aims, objectives along with a chapter-by-chapter outline.

1.2 Background

The following sections discuss key aspects of communication development and how the literature positions a child with VI/B developing communication. This is followed by how early communication is being supported for children with VI/B. Early intervention will be introduced, including how its practices support young children with VI/B. Once these practices are described, the following section will explore supports offered in the context of programme.

1.2.1 The importance of communication development

The ability to communicate is an essential life skill for all people living in the modern world. Communication development is a collaborative process that contributes to a young child's holistic development (Owens, 2012). Communication is not only the development of spoken language but also includes the development of non-verbal expression such as gestures, signing, body language, written and graphical forms. The ability to communicate successfully is impacted by several factors including exposure to languages along with the ability to understand and articulate needs and wants. Developing language and communication skills sets the foundation for later life achievement, academic and social success (Owens, 2012).

The early years, comprising of birth up to three years, are a critical time for language acquisition and communications skills are central to this (Buckley, 2003). During early childhood children develop language and communication skills in relation to their social and cultural environments where they interact and engage with those around them. Through these

interactions, language and communication skills are modelled and supported through cues in their environment. As SLTs, we know that these interactions start early on between primary caregivers and their infants (Buckley, 2003).

Early communication development typically involves the establishing of early social behaviours and communication skills, that are achieved through eye contact, directed gaze, shared and joint attention skills (Bryant, 2009). These prelinguistic skills rely largely on vision for successful communication development. Early communication development emphasises visual perception with reference to the abilities of a sighted child, but how would this differ in a non-sighted child? As SLTs, we understand that, without sight children will be unable to establish foundational communication skill like eye contact and possibly joint attention skills (James & Stojanovik, 2007; Mosca, Kritzinger, & Van der Linde, 2015).

However, children with VI/B do go on to develop communication skills, potentially lacking in early pragmatics skills. Thus, communication development may be divergent in nature, depending on the presence of other more primary diagnosis (de Verdier, 2018). Communication development will differ for each child in this heterogenous group, where communication difficulties may co-occur with VI/B (Veldhorst, Vervloed & Steenbergen, 2022). Communication development is not an immediate consideration when providing care and support for children with VI/B. Therefore, little is known on supporting the specific communication needs for this population (Mosca, Kritzinger, & Van der Linde, 2015).

1.2.2 Supporting early communication skills

Rattay & Zeedak (2005) discussed the significance of mothers supporting communication through creating alternative non-visual communication opportunities for children with VI/B. Children with VI/B produce vocalisations with the intention to communicate (Rattay & Zeedak, 2005), therefore supports by primary caregivers become valuable for the development of communication skills. In a 2001 study, Pérez-Pereira and Conti-Ramsden found that mothers with children who are blind tended to adapt their interaction with the child to compensate for the effects of blindness. Communication abilities were found to be no different to sighted participants, where supported mother-child interactions had a positive impact on early communication skills. Supporting communication early on through positive mother-child interactions contributed to communication development for children with blindness.

Thus, parents that are competent and adaptive communication partners help support communication development (Funnell & Wilding, 2011). Caregivers (assumed to be sighted)

who provided quality interactions were significant in supporting communication skills early on. Rattay & Zeedak (2005) noted that mothers maintained quality interactions through touch, vocalisations and facial orientation as means to support communication. Mothers play a significant role during early interactions, as they stimulate and provide opportunities for language development. These interactions can be assisted through accessing early intervention services that include the support of SLTs.

1.2.3 Early intervention practices for children with VI/B

Early intervention, as an evidence-based strategy (ASHA, 2008; SASLHA, 2011), is known to augment young children's early development and ensure long-term functional outcomes for both the child and the family (Fazzi, et al., 2005). When accessing early intervention services, SLTs can provide supports to communication development for children with VI/B, especially those who present with additional medical related diagnosis (Chen, Klein & Minor, 2009). Early intervention increases supports being made available to families and caregivers which leads to positive developmental outcomes. Foundational early intervention principles that focus on family-centred and relationship-based practices were found to benefit children with VI/B (Ely & Ostrosky, 2018). These practices focused on child and adult learning in natural environments, while engaged with a quality team (Pletcher & Younggren, 2013).

As children with VI/B present as a heterogenous group, children with congenital VI and other related medical conditions require more support in the early stages of development (Chen, 2001). Thus, early intervention practices become significant in supporting children with VI especially when supporting children with multiple disabilities. Accessing these services should involve caregivers and families to meet the needs of children with VI/B (Chen, 2014). This includes the intervention programmes that are home-based and tailored to the needs of the child and their family (Dale, et al., 2018). Intervention services with a collaborative team can provide the necessary supports that assist families in stimulating language and facilitating communication support.

1.2.4 Communication supports in the context of a programme

While early intervention practices are important for early communication support, there is a narrow focus on quality caregiver-interactions in the literature. While these supports are critical in the early years i.e., birth to three years, how are children being further supported during early childhood? Children with VI/B will inevitably enter social and academic settings, where they would be required to navigate social and academic participation, as well as peer and social

interaction. In these contexts, children will interact with peers, and maintain, and initiate play activities as part of early childhood experiences (James & Stojanovik, 2007). Prior to their formal schooling, preschool settings lay important foundational skills for school readiness, which includes language and communication skills.

When compared to their sighted peers, children with VI/B may struggle with aspects of social communication, pragmatics and communicative competence (James & Stojanovik, 2007). Studies regarding the communication abilities of children with VI/B are largely comparative with the abilities of sighted peers, thus almost always indicate poorer abilities without receiving necessary supports (Veldhorst, Vervloed, & Steenbergen, 2022). As children with VI/B develop communication skills in early childhood they are still in need of supports, more so where social communication skills are concerned (James & Stojanovik, 2007). Children with VI/B are more likely to be at a disadvantage within these social contexts that cater to the experiences of sighted individuals. However, what communication supports are being made available in these contexts where children are expected to learn and engage with peers? The current study is interested in early communication supports that are happening within the context of a centre-based preschool programme for children with VI/B. In order to understand what communication supports are being made available.

1.3 Rationale

The background to the study introduced communication development, focussing on communication supports for a child with VI/B. The current study is interested in communication supports for children with VI/B in the context of a preschool programme. Therefore, the following section will provide a rationale for the study, discussed in two parts. Firstly, exploring the SLT knowledge gap in the current available literature. Secondly, discussing the need for communication support for children with VI/B.

1.3.1 SLT knowledge gap

SLTs' understanding of language and communication development in children with VI/B is limited (Mosca, Kritzinger, & Van der Linde, 2015; James & Stojanovik, 2007), where most studies were conducted outside of the field of Speech-language Therapy (Chen, 2001; Chen, Klein & Minor, 2009). There has been no recent investigation to inform SLT practices as to how language and communication is being supported for children with VI/B. In the online interdisciplinary training of early intervention professionals done by Chen, Klein & Minor (2009), SLTs were included as there was a need for early intervention services and support for

children with VI/B. However, the focus was on early intervention services for this population across disciplines and not only related to our specific field. Thus, focussing on the benefits of multidisciplinary work to meet the needs of families with young children with VI/B.

Our own SLT knowledge and practice is limited for children with VI/B both internationally and locally (James & Stojanovik, 2007; Mosca, Kritzinger, & Van der Linde, 2015). There is a clear knowledge gap within the field of Speech-Language Therapy, where language and communication development of young children with VI/B needs to be further understood. To fill the knowledge gap, and to improve our services to this population, there needs to be knowledge coming directly from our field. As identified by Mosca, Kritzinger, & Van der Linde (2015), there is limited knowledge within our own field and within our own South African context. While the literature indicates the need for early intervention practices that can support the communication development of young children with VI/B (Chen, 2001), SLT practice could be further informed on how communication can be enhanced especially as children with VI/B develop and socialise in sighted world.

1.3.2 The need for communication support

As SLTs we understand that communication support is necessary for all children to develop language and communication skills (Buckley, 2003). Early on these supports are modelled and shaped by primary communication partners, through both direct support and incidental cues. The use of facilitation, nurturing, scaffolding, and stimulation of communication, all further support their communication development (Gross, 2017). Allowing children to learn and engage with the world around them. Children with VI/B may require more direct language instruction when engaged in play, motor, cognitive, and social skills (Chen, 2001). Therefore, communication supports would serve to benefit young children with VI/B in early learning settings where play, motor, cognitive, language and social skills are being developed i.e., preschool settings.

Play incorporates all areas of development and is an essential part of early childhood development (Sheridan, Howard & Alderson, 2010). Play is a primary context in which preschool children acquire social skills, learn to practice and maintain interactions with peers, and engage in pretend play activities. Play skills may be affected in young children with VI/B when compared to typical development of play skills (Chen, 2001). Thus, communication supports could provide opportunities for social and language-rich play between peers. Children with VI/B may require supports when it comes to initiating and maintaining play activities with

peers (Rettig, 1994). Communication supports in the context of play is valuable for children with VI/B to develop language and social-communicative skills.

While play can provide opportunities for communication to be supported between peers, it is also a natural medium where children can be exposed to multiple languages. Preschool teachers as communication partners can provide support, with more structured opportunities for communication to be supported (Kaiser, Hester, & McDuffie, 2001). Preschool teachers along with other early childhood practitioners with training and experience with children with VI/B are key stakeholders involved in supporting children with VI/B (Dote-Kwan, Chen & Hughes, 2001). Opportunities for communication support with stakeholders, can increase SLTs understanding of how communication support happens in these settings for children with VI/B. SLTs can provide key input on how to further support communication and language development. To increase our understanding of communication supports for children with VI/B, it is important to acknowledge the context in which communication support will be examined.

1.4 Study context

The above section introduced communication support for children with VI/B and provided a rationale for the current study. The below sections will focus on positioning the current study in relation to the study context. This will include the discussion of the South African context and the context in which the centre-based programme can be found, i.e., LOFOB.

1.4.1 The South African context

The legacy of colonialism and apartheid in South Africa influenced SLT practice and populations being served (Pillay & Kathard, 2015). Policies during apartheid created social and racial inequalities which upheld white supremacy, creating a large disparity in education (Engelbrecht, 2006). The effects of imperialism, colonialism and apartheid are still experienced today, where SLTs best cater to white middle to upper class populations while black South Africans remain underserved. The majority of SLTs in South Africa are white, either English or Afrikaans speaking, with a lack of quality speech-language therapy services in African languages (Pillay & Kathard, 2015). As a result, this population remains underserved by SLTs.

To cater to these underserved communities, SLTs need to develop more responsive practices that meet the needs of the population (Wylie, et. al., 2013). Children with disabilities face many challenges within the South African context including stigma and discrimination, lack of

resources, lack of skill, difficulties with access, and spatial legacies. Although national policy documents such as the National Integrated Early Childhood Development promote the inclusion of all children with varying abilities and impairments (Republic of South Africa, 2015), individuals who have VI/B may experience barriers to accessing necessary support in the early years. The practice of Inclusive Education (IE) has been widely embraced as an ideal model for education, both in South Africa and internationally. However, accepting these ideal practices does not necessarily translate into what occurs within practice. Successful inclusion depends on the attitudes and actions along with the ability to challenge or support that inclusion (Donohue & Bornman, 2014).

The Early Childhood Development (ECD) sector is included across departments of Health, Education and Social Development in South Africa that recognise the importance of early development in policy and legislation (White Paper 5, 2001a; Department of Health, 2004; Department of Social Development, 2006). This includes early detection and intervention services for children with disabilities. While these government departments recognise the need to include and integrate children with disabilities, little provision has been made to carry out formal implementation and service delivery of government policies (Storbeck & Moodley, 2011). Thus, children with VI/B are likely to face challenges when it comes to gaining access to appropriate services in South Africa. There is not a clear focus on meeting the needs of children who are disabled.

1.4.2 The centre-based preschool programme

The centre-based early childhood preschool programme at the League of the Friends of the Blind (LOFOB) is a non-profit organisation partly subsidised by the department of Social Development based in the Southern Suburbs of Cape Town, South Africa. LOFOB as an organisation services individuals with VI/B in the community and across South Africa providing access to a basket of relevant services. Their focus is assisting, empowering, educating and independence development. The organisation established its services in 1933 (LOFOB, 2019) and has since grown and developed a range of services for individuals with VI/B. This includes the centre-based preschool programme as well as a home-based infant stimulation programme which was established in 1988 (LOFOB, 2019). These longstanding programmes have serviced the community for decades with the intention of providing early childhood support for children with VI/B and an ethos of 'preparing children for life'.

In doing so they prepare the young VI/B child to be educated in the South African schooling system. As discussed, while IE is an ideal practice, there are often challenges faced when realising this in South African schools (Mariga, McConkey & Myezwa, 2014). As such children in the programme have the opportunity to access special schools or inclusive schools, once completing the preschool programme. Furthermore, LOFOB is key in supporting low-income communities that are largely underserved by SLTs. They cater to the needs of VI/B individuals from the local community and surrounding areas. The stakeholders at the organisation are responsible for running the centre-based preschool programme where children attend a daily programme. As many of them form part of the local diverse community, multiple South African languages are spoken including English, Afrikaans, and isiXhosa. These languages are representative of the community but also of those who are involved in the programme. Multilingual communication practices are common in this context as they represent the diversity of their communities and the South African context.

1.5 Study focus

The current study looked at the centre-based preschool programme at LOFOB and how it provided support for early multilingual communication development. The study focused on the practices of the programme that are aimed at supporting communication and multilingualism at a population level. The study specifically explored the experiences of the stakeholders involved in the programme. This included observing their practices and understanding what shaped this practice when it came to supporting early multilingual communication development. Thus, the focus was to describe and explore their practices as it relates to opportunities for multilingual communication support within the preschool programme for young children with VI/B.

As the study is interested in early multilingual communication support, the research question asks: How is the centre-based early childhood preschool programme at League of Friends of the Blind (LOFOB) supporting early communication development and multilingual learning of children who are blind/visually impaired?

Aim:

The current study aimed to explore and describe how the centre-based early childhood preschool programme at LOFOB supports early communication and multilingual development.

Objectives:

Explored and described:

- the knowledge, underpinning values, and the principles that inform the programme;
- the skills required to implement the programme;
- activities included in the curricula to support and monitor communication and multilingual learning;
- opportunities available for communication development and multilingual learning; and
- the barriers and facilitators of communicative support.

1.6 Outline of chapters

Chapter Two includes the literature review that details current and relevant research surrounding the topic of this study. In Chapter Three, the method of the study will be described, detailing how the results of the study were gathered. Chapter Four includes the results from the study in the form of narratives and vignettes from participants. The chapter further discusses the emerging themes from the study findings. In Chapter Five, an integrated argument will be presented in relation to the study findings with reference to the current literature on the topic. Followed by strengths, implications, and recommendations for this study. Thereafter, a conclusion will be drawn.

Chapter 2

Literature review

2.1 Overview of the chapter

Chapter Two analyses and critiques the relevant literature relating to early multilingual communication support available for children with VI/B with specific focus on centre-based preschool programmes. Programmes are critiqued in relation to what multilingual communication support they offer. A programme that focuses on parent-child interaction is analysed, followed by preschool programmes that include activities and opportunities that support the VI/B child's ability to interact with their peers during play. Thereafter, preschool programmes creating opportunities for communication support and learning will be discussed. Followed by gaps in the literature and a summary of the literature review. Lastly, the conceptual framework will be presented for the current study.

2.2 Supporting early communication development

Language and communication development for children with VI/B is not typically studied within the field of Speech-Language Therapy. Therefore, limited studies focus directly on language and communication development and the communication supports being made available for children with VI/B. Early communication supports are predominantly understood through parent-child interactions with an emphasis on early intervention practices (Mosca, Kritzinger, & Van der Linde, 2015), especially for those with multiple disabilities and VI/B (Chen, 2014).

2.2.1 A focus on parent-child interaction

A curriculum-based programme developed for children with complex multiple disabilities, including visual and hearing impairment, called Promoting Learning through Active Interaction (PLAI) focussed on enhancing parent-infant communication (Chen, Klein & Haney, 2007). Piloted in the United States (US), PLAI has six key aspects in promoting and supporting communication between infants and parents. These areas included monitoring daily routines, caregiver interviews to understand communication needs, promoting intentional caregiver-interaction along with anticipatory cues to stimulate more active communication participation from infants with VI (Chen, Klein & Haney, 2007). While the programme was successful in guiding and supporting early caregiver-infant interactions, the focus was mainly

on early preverbal communication skills for young children who presented with multiple disabilities including VI.

The programme was inclusive of diverse backgrounds where bilingual families received support from early interventionists who spoke Spanish (Chen, Klein & Haney, 2007). Chen (2001) also found that Spanish-speaking families preferred resources in Spanish rather than English and early interventionists who speak their home language to provide services. Similarly, Dote-Kwan, Chen & Hughes (2001), emphasised the importance of training teachers who are culturally and linguistically diverse to provide better service and support to meet the needs of all families with young children with VI. Supporting families who are bilingual, or multilingual is an important part of providing early communication support that is appropriate and inclusive for all families.

Early interventionists who facilitated the programme, had teaching qualifications along with advanced degrees in hard-of-hearing, deafness and visual impairment (Chen, Klein & Haney, 2007). However, SLTs were not included in the curriculum-based programme where children's communication was directly receiving support. The programme specifically focussed on activities in the child's daily routine in order to establish predictable routines to encourage communication and interaction (Chen, Klein & Haney, 2007). Activities were selected based on child preferences and incorporated multiple sensory cues to anticipate familiar activities. Parents commonly made use of touch, auditory and object cues to initiate activities (Chen, Klein & Haney, 2007). Once cues were established, communication support was targeted through turn-taking with caregivers and encouraging the child to request during desired routines (Rosetti, 2001). Parents reported that the programme changed the way they interacted with their children as they learned to communicate better with their children.

The programme practices are in line with foundational early intervention practices described by Ely & Ostrosky, (2018), benefitting children with VI. These foundational practices include family-centred practices that allow for language choice, relationship-centred practices, natural environments, child learning, adult learning, and quality team practices. Collaborations with professionals also strengthen support and intervention outcomes (Pletcher & Younggren, 2013; Chen, Klein & Minor, 2009). Interdisciplinary support is essential when supporting a child with VI/B, more so when they present with multiple disabilities. A single discipline or profession cannot be responsible for meeting the complex needs of this heterogenous population (Chen, Klein & Minor, 2009). Thus, early interventionists, teachers and SLTs need

to collaborate in their approaches to support early communication development for children with VI/B.

2.3 Communication supports within preschool programmes

Support needed during early childhood in centred on family, relationships, and quality team practices (Ely & Ostrosky, 2018). Once communication begins to expand, children's communication development will begin to expand outside of caregiver interactions. Children with VI/B will enter preschool environments/programmes where they would require more direct instruction along with opportunities to directly interact with new concepts and new environments. Existing programmes in the literature highlight play, inclusive peer interaction, and opportunities for sensory support (Zanandrea, 1998; D'Allura, 2002; Ozaydin, 2015; Hamilton, 2001; Chen & Dote-Kwan, 2021). The programmes below describe a focus on play and peer interaction as well as sensory support.

2.3.1 Play and peer interaction

A motor programme for both VI/B and sighted preschool children was adapted in order to enhance motor tasks, play and social interaction skills for VI (Zanandrea, 1998). Along with co-operative teamwork skills between children who are both sighted and non-sighted. Children with VI were orientated before activities started using action songs to increase spatial and body awareness. Specific communication support to enhance clear following of instruction was to eliminate any background noises to enhance auditory awareness, along with opportunities for practice and repetition of instructions. The motor programme did not specifically target communication support as seen in PLAI (Chen, Klein & Haney, 2007) but ensured children's understanding and participation in activities were supported.

Moreover, the motor programme ensured that opportunities for peer interaction was being made available in the context of play for VI and sighted peers. It was found that children with VI interacting with sighted peers had positive outcomes where peers showed teamwork and co-operation in more challenging aspects of the activities, additionally children with VI/B were more likely to interact independently with their peers (Zanandrea, 1998). Peer interaction increased when children with VI were supported through a well-structured inclusive programme. They were given repeated opportunities to engage activities, thus were more likely to initiate play and social interaction with their peers (Zanandrea, 1998). In valuing play and creating opportunities for peer interaction, children's social and communication skills were being supported in the motor programme.

Another study focusing on enhancing social interactions for children with VI in a preschool programme at an early childhood centre in New York, looked at reverse mainstreaming with co-operative learning strategies (D'Allura, 2002). Co-operative learning strategies promote self-esteem, socialisation skills, and positive interactions among students. Integrated learning environments introduced sighted peers to the learning environment of children with VI (reverse mainstreaming). Peer interactions were observed before the instruction month and again for two months following the instruction (co-operative learning strategies). The instructions included structured lesson plans for the integrated class, where all children were required to participate in activities in order to complete set tasks. Promoting positive interdependence between peers (D'Allura, 2002). While this study does not focus on communication supports, it highlights how integrated preschool environments can promote positive peer interaction where communication can occur for children with VI.

Before the instruction, children with VI spent less of their free play interacting with peers compared to sighted peers. For both groups, most of this time was spent interacting with other children with similar visual abilities. After the instruction, the children with VI matched their peers by spending more of their free play time interacting with other children (D'Allura, 2002). Although there is no mention of communication support in this study, strategies that instruct integrated peer groups allow for increased opportunities for peer interaction. When peer interactions are supported opportunities for communication are created for children with VI. A key learning seen in both programmes is the value that inclusive interactions have for both sighted and non-sighted peers (Zanandrea, 1998; D'Allura, 2002) when it comes to communication and supporting interactions.

Another study making use of reverse mainstreaming (Ozaydin, 2015) in Ankara, Turkey, introduced sighted peers to three children attending a private preschool programme for children with VI. The children were taught play skills to improve on social interaction with peers. Play activities were taught to VI participants in four basic stages: paying attention to one's peers (calling by name), directing one's peer to move closer (directing one's peer to where a sound comes from), initiating play activities (offering to play, by asking what another is doing and sharing roles), and finally maintaining play activities (talking about the roles in the play activity, changing roles/toys, replying to questions or expressions, explaining what oneself is doing and asking what one's peer is doing). The children were taught via direct teaching methods that involved tactile matching, modelling desired skills, role play, practice and repetition of desired skills (Ozaydin, 2015).

The three children were successful in not only initiating and maintaining social interactions during play with a sighted peer but were also able to retain skills after two to three weeks of the implementation (Ozaydin, 2015). The direct method used to teach play skills that incorporated specific language and communication, whereas the more structured instructional method in the integrated class did not include how language or communication was being used (D'Allura, 2002). Children with VI were taught directly how to initiate and maintain using language and communication which resulted in sustained play and peer interaction opportunities (Ozaydin, 2015). Explicit teaching and practicing of play skills that incorporate language and communication, supported the ability to interact, play and communicate during play with their peers.

2.3.2 Sensory supports

Programmes included thus far mention caregiver or peer interaction, play, and some form of sensory support in activities such as tactile or auditory support. Auditory and tactile supports are described in Hamilton (2001) at the preschool and kindergarten programme at the Maryland School for the Blind in US. The programme made use of the learning centre approach, where the preschool programme's classroom is divided into centres for learning and specific themes would be targeted for the month. The language centre would focus on discussion while introducing objects relating to the theme for example 'winter clothing'. Children would be encouraged to share ideas and answer questions relating to the theme in the group while feeling and touching clothing objects (Hamilton, 2001). Communication is being supported directly in the language centre where they learn new vocabulary alongside tactile supports.

The programme provides support for children with visual and multiple impairments, with no mention of multilingual communication support. Tactile learning is an important part of their day-to-day learning along with direct verbal communication/instruction (Hamilton, 2001). Strategies such as repetition of known phrases and sounds are emphasised in the programme especially for children with multiple disabilities. They are given the opportunity to learn with auditory and tactile cues. (Hamilton, 2001). Throughout the programme their communication was being supported through sensory cues, repeated exposure of language and sounds along with direct instruction.

A range of sensory modes were considered for two pre-schoolers with VI and multiple disabilities within two instructional frameworks (Chen & Dote-Kwan, 2021), namely Universal Design for Learning (UDL) (Lohmann, Hovey & Gauvreau, 2018) and Differentiation

strategies (Hall, Stragman & Meyer, 2004). These two overlapping frameworks was designed to address individual learning needs. The UDL is a set of principles to develop accessible curricula for all children through multiple means of engagement including the use of various sensory modes, representation, action and expression. Differentiation strategies allow for further accommodations to the learning environment and process of the child's learning (Horn, et al., 2016), both including strategies by sensory mode i.e., visual, tactile and auditory. These instructional frameworks highlight how sensory modes and strategies can be incorporated, to support learning and instruction for children with VI. It was found that through a collaborative educational team and inclusive preschool settings both frameworks had value in supporting participation and learning (Chen & Dote-Kwan, 2021).

The collaborative educational team included a bilingual preschool teacher and a co-teacher certified in early childhood special education. The preschool receives additional support for the six out 20 children who had special education services including a certified teacher of students with visual impairments who is dually certified as an orientation and mobility specialist, a certified teacher of students who are deaf or hard of hearing, a speech and language pathologist, an occupational therapist, and a physical therapist (Chen & Dote-Kwan, 2021). The two children in the study received individual support from these services including the speech and language pathologist. While there is no direct mention of how language and communication was being supported in the preschool, collaborative team practices benefitted the individual child with VI in the inclusive preschool setting (Chen & Dote-Kwan, 2021).

2.4 Gaps in the literature

Throughout the literature review gaps have been identified in relation to the current research question. Limited programmes speak directly to early multilingual communication support. However, there is no direct focus placed on communication supports at a preschool level for children with VI/B. Communication support was mainly emphasised in a programme that targeted early communication skills between sighted caregivers and their child with VI/B (Chen, Klein & Haney, 2007). While collaborative team practices are mentioned in relation to supporting the child with VI/B, SLTs are not directly included in the programmes. Similarly, there is a gap in what is known about multilingual communication supports. Some programmes offer early interventionists and teachers who are bilingual (Chen, Klein & Haney, 2007; Chen & Dote-Kwan, 2021) but it is not clear how language development is being supported in the programme.

The preschool programmes offered activities and opportunities for play, social interaction, and sensory support with some insight into the support of language and communication development. These programmes value inclusion of all peers, where opportunities are created for children to interact with each other during activities. Direct teaching methods appeared to provide the most language and communication support for preschool children with VI where they were taught to use language and communication to initiate and maintain play (Ozaydin, 2015). While this is valuable for their social communication skills, what communication supports are being made available throughout the programme? Activities where language is targeted was included in Hamilton (2001) and opportunities that incorporate sensory supports, along with the use of instructional frameworks to enhance their learning (Chen & Dote-Kwan, 2021). However, there needs to be an expansion of this knowledge that relates specifically to communication development including multilingual supports.

Programmes mentioned in the literature are largely representative of US populations and other countries in the Global North (Chen, Klein & Haney, 2007; Hamilton, 2001; Ozaydin, 2015). Preschool programmes for children with VI/B in the Global South have not yet been identified in the literature. There was however a qualitative study that was undertaken in Malawi that looked at community settings where children with VI under the age of six received care and support (Gladstone, et. al., 2017). Caregivers were interviewed, observations and focus groups were completed. Topics covered related to care, play, communication and feeding of the child with VI. It was found that caregivers naturally adapt their forms of communication and interaction with a child with VI through touch and auditory description. A significant finding was the importance of the environments for both children and caregivers to be safe and comfortable for play and exploration (Gladstone, et. al., 2017). These findings are not within the context of a programme but does support previous findings (Rattay & Zeedak, 2005) of adapting interactions through tactile and auditory cues and the significance of safe environments for play. However, there is still not a focus on multilingual communication supports.

The current study is interested in describing communication for children with VI/B with a focus on multilingual communication support. In order to inform SLT literature, the current study aims to explore and describe how the centre-based preschool programme at LOFOB supports early multilingual communication development.

2.5 Summary of the literature review

In summary, the literature available on programmes for children with VI/B predominantly exists outside of the field of Speech-language Therapy. Programmes available for early communication support describe communication interactions between the child with VI/B and the sighted parent (Chen, Klein & Haney, 2007). There is a clear focus on supporting communication as part of early intervention practices. Especially for children with multiple disabilities, where SLTs can become involved as part of quality team practices. Whereas preschool programmes tend to focus on peer interactions in the context of play and inclusion (D'Allura, 2002). Direct instruction and teaching methods was found to support language and communication in these contexts accompanied by sensory supports including tactile and auditory modes (Hamilton, 2001; Ozaydin, 2015). This included opportunities of repetition and practice when supporting communication. SLT involvement in the preschool programmes was only included in relation to the child who presented with multiple disabilities and VI (Chen & Dote-Kwan, 2021). Again, also as part of a team with a focus on supporting the individual child. Gaps in the literature indicate a limited understanding of multilingual communication support for children with VI/B and a need to understand programme supports available in the global south.

2.6 Conceptual framework

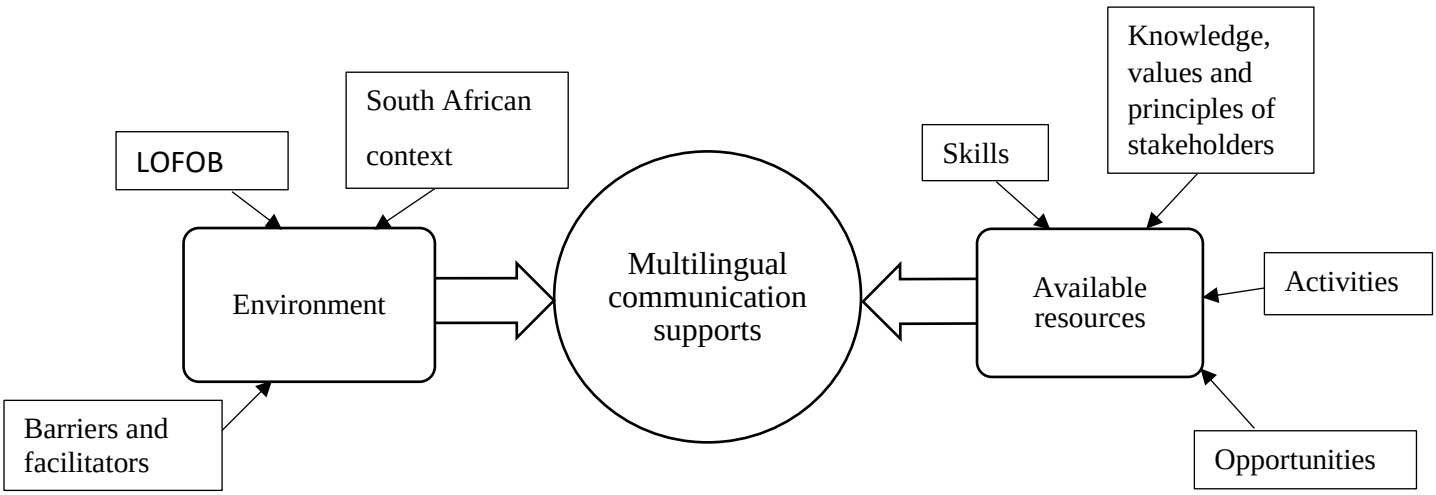
The current study is interested in multilingual communication support at a centre-based preschool programme in South Africa, through the lens of an SLT. Typically, SLTs offer individual supports for children with VI/B, more so for children who have multiple disabilities (Chen, Klein & Minor, 2009; Chen & Dote-Kwan, 2021). This can be linked to our professional training which has a predominant focus on pathologies. Our professional practice and knowledge around disability is formed through the medical model (Berghs, et. al., 2016). The medical model is a conceptual model of disability that considers disability a problem that lies with the individual due to disease or impairment (Smart, 2009). This model is strongly normative where individuals are considered disabled due to deviations from 'normal' functioning (Amundson, 2001). As an SLT interested in a programme offering communication supports, this individual-focussed medical lens is not sufficient for the current study. The aim is to shift from the individual focus to understanding a programme that supports communication for all children with VI/B.

In shifting from this view and pathology lens, the current study views the child with VI/B as capable of developing multilingual communication skills. Communication supports in the context of a programme can help enable the development of communication skills. According to the literature, communication support is made available through activities and opportunities in a programme (Zanandrea, 1998; Ozaydin, 2015). Key skills, knowledge and underpinning values are essential to communication support such as the support of skilled teachers in an inclusive setting (Chen & Dote-Kwan, 2021). Together these factors offer communication support for children with VI/B in a programme setting. These factors can be broken down into environmental factors and available resources, in relation to a capability model. The capabilities model (Sen, 1992) focuses on the interaction of function and capabilities. Functioning is the result of the interaction between factors affecting the individuals, including resources available, and capabilities that have value to the individual. While children have not yet realised their full capabilities, each child is capable of realising communication skills (Reindal, 2009).

The capabilities model specifically looks at the individual's personal characteristics, available resources, and environment (physical, social, economic and political) (Mitra, 2006). Personal characteristics are descriptive of who the child is in relation to their functioning, for example the child's age and VI/B. Available resources are what is offered in the programme to support multilingual communication development. This includes the skills of the stakeholders involved programme, the knowledge, underpinning values and principles of the programme, the activities and opportunities being made available for communication supports. Finally, the environment broadly includes the physical, social, economic and political factors that influence communication supports in the programme. The programme environment is the organisation (LOFOB) or the centre itself based in a South African community. These environmental factors can impact on communication supports in the form of barriers or facilitators to the communication support. When coupled with the available resources, these factors offer a framework for communication supports (see below Figure 1).

Figure 1

Diagram representing how multilingual communication supports has been conceptualised



LOFOB as an organisation is community focused, supporting the needs of a diverse multilingual South African community. Creating an environment where multilingual communication support can occur for children with VI/B in a South African context. Available resources such as the skills of its stakeholders contribute to multilingual communication in the programme. Knowledge, values, and underlying principles contribute to viewing the child as capable. Stakeholders create opportunities and activities where multilingual communication support can occur. This includes caregivers and families of the children in the programme. Thus, framing communication supports using a capabilities approach (Sen, 1992; Mitra, 2006), placing less focus on what the individual lacks. Focussing more on the available resources and environment that make children capable of realising functioning. In shifting from the individual, this approach can help SLTs focus on the communication needs of the population. This includes supporting multilingual communication within the South African context.

In conclusion, the framework has a focus on communication supports that view the child as capable of achieving early multilingual communication skills. There is a shift from the individual-focussed medical model of conceptualising disability to a model that highlights capabilities. The capabilities model looks at available resources and the environment of the programme. It offers a framework in which communication support can be viewed within the context of the preschool programme. Available resources will be viewed in relation to the programmes the knowledge, underpinning values, principles, stakeholder skills along with the activities and opportunities that support communication. The environment of the programme

includes the organisation (LOFOB) and the South African community, which include possible barriers or facilitators to communication support.

Chapter 3

Methodology

3.1 Research question

How is the centre-based early childhood preschool programme at League of Friends of the Blind (LOFOB) supporting early communication development and multilingual learning of children who are visually impaired/ blind (VI/B)?

Aim:

This study explored and described how the centre-based early childhood preschool programme at LOFOB supports early multilingual communication development.

Objectives:

To explore and describe:

- the knowledge, underpinning values and the principles that informed the programme;
- the skills required to implement the programme;
- activities included in the curricula to support and monitor communication and multilingual learning;
- opportunities available for communication development and multilingual learning; and
- the barriers and facilitators of communicative support.

3.2 Research approach and design

The study focussed on the centre-based early childhood preschool programme at LOFOB, specifically the experiences of those involved in the programme, including teachers, caregivers, the preschool environment, and other related stakeholders. A case study research design was selected within a qualitative and interpretive framework (Hennink, Bailey & Hutter, 2011), to gain an understanding of a complex multifaceted topic in its real-life context. The qualitative approach was selected to collect detailed accounts from participants on their experiences in the programme. Multiple data sources were used to allow for an in-depth view of the programme, how it is implemented in its context and an understanding of how the key role players are involved in the programme (Gerring, 2006).

Qualitative research aims to describe and understand people with a focus on understanding how people experience and make sense of their experiences (Ormston, et. al., 2014). This type of explorative research is particularly useful when attempting to gain knowledge of a phenomenon or intervention in its real-life or primary context (Baxter & Jack, 2008). The interpretive framework aims to seek understanding for people's lived experiences, recognising that reality is 'socially constructed' as people's experiences occur within social, cultural, historical and/or personal contexts (Ormston, et. al., 2014). The framework considers the broader contexts of people's lives and acknowledges that people's perceptions and experiences of reality are subjective, therefore having possibly multiple perspectives as opposed to a single truth.

3.3 Setting and participants

As described in Chapter One the setting of the programme is based at the non-profit organisation LOFOB. The organisation serves the local community and provides a basket of services to those living with VI/B. The preschool programme is a long-standing programme aimed at supporting young children with VI/B and their families. Participants were selected according to their involvement in the centre-based programme. The inclusion criteria was based on the applicability to the current study's aim and objectives as outlined in Table 1 below. There were no exclusion criteria. Participants were determined beforehand based on their role in the centre-based preschool programme at LOFOB, and their direct involvement in the programme. Participants were selected carefully in relation to their experiences and proximity to the programme to identify information-rich participants (Ormston, et. al., 2014). Therefore, participants were selected based on their involvement and experience with the centre-based preschool programme, and excluded if they were not involved in the programme currently or previously.

Table 1

Participants included in the current study and motivation for inclusion

Participants	Inclusion criteria	Motivation
Programme co-ordinator/s	- Involved in programme decision making - Currently working for the organisation	The current programme co-ordinator was part of the current context of the programme and decision making. Input from the programme co-ordinator could provide insight into the logistics,

			background and history of the programme.
Teacher/s	-	Currently working as a teacher for the programme	The teacher/s involved in the programme currently could offer direct insight on the skills and knowledge needed for the preschool programme.
Teacher assistant/s	-	Currently working as a teacher assistant for the programme	The teaching assistant could provide recent and relevant experience of the current programme context. This was relevant to understanding how the programme was currently implemented for the children with VI/B.
Children in the programme	-	Currently attending the preschool programme	The children who attended the current preschool programme, contributed to understanding the programme supports within the present context.
Parents/caregivers with children in the programme	-	Parents/caregivers who have children currently registered for the programme	Parents were required to give assent for their children in the programme. Parents who had children currently registered, potentially had relevant experience with the current programme.
Social Worker	-	Currently working as a social worker for the programme	The Social Worker potentially had relevant skills, knowledge and experience related to current programme.
Braille Instructor	-	Currently working as a braille instructor for the programme	The Braille Instructor potentially had knowledge and skills related to the programme and experience with children in the current programme.

3.4 Sampling

Given the case study design of the study, purposive or selective sampling was employed to identify participants specifically related to the programme who can provide detailed accounts on the topic being investigated. These were individuals who could provide the best information in relation to programme, for example those who are directly involved in running the programme and teaching the children in the programme. Purposive sampling was particularly beneficial in identifying information-rich participants to allow for comprehensive and relevant

data collection (Hansen, 2006). These participants were able to provide a full and detailed account of their experiences with the programme. Thus, contributing to rich data collection that was relevant to what was being investigated for the study.

3.5 Recruitment strategy

The researcher recruited participants using the steps illustrated in Figure 2 below. Firstly, permission from the Faculty of Health Sciences Human Research Ethics Committee (HREC) at the University of Cape Town was obtained to conduct the study (see Appendix 1) with reference number 849/2019. Thereafter, an initial meeting was set up with the programme co-ordinator of the preschool programme at LOFOB to discuss organisational consent (see Appendix 2), identify potential participants and access relevant documents for document review.

Figure 2

Recruitment strategy of participants

Given the delay for onsite data collection due to the COVID-19 National lockdown[1], a follow up meeting was held online with the programme co-ordinator. It was then decided that potential participants be briefed on the study at LOFOB by the programme co-ordinator. The information and consent forms for online semi-structured interviews was then distributed by the programme co-ordinator. She distributed consent forms to the staff at LOFOB and other potential participants which included parents and past parents/children in the programme. She also contacted parents who were potentially interested in participating in the interviews. Consent forms were returned via email to the researcher for all participants partaking in the online semi-structured interviews. Information and consent forms were distributed to parents/caregivers via the programme co-ordinator and were sent home with children to obtain

[1] A global pandemic declared by the World Health Organisation which led to the National lockdown in March 2020 due to the spread of the COVID-19 virus

assent for the classroom observations. Consent forms were returned to the programme co-ordinator where the researcher collected forms before conducting classroom observations at LOFOB.

3.6 Methods

Data was collected using the following qualitative methods: document reviews, semi-structured interviews, and classroom observations. A combination of methods was used to explore the aim of the current study. These methods were employed to obtain information-rich data that addressed the objectives of the study in detailed description. Documents informing the programme, stakeholders, and role-players directly involved in the programme; along with observing the preschool environment provided the necessary detail of the centre-based preschool programme at LOFOB. Multiple data sources also assisted in the credibility of the study findings, which ensured sufficient data was collected to describe the programme accurately and meaningfully across a range of data sets.

3.6.1 Document Reviews

Documents were reviewed using a systematic approach to evaluate critical documents (Bowen, 2009). To gain a full understanding of the early childhood programme at LOFOB, there were key documents that informed and shaped the curricula that allowed for the understanding of the underpinning values that inform its practices. The documents reviewed included the daily programme of the early childhood programme at LOFOB, the South African National Curriculum Framework (NCF) (2015), the National Early Learning, and Development Standards for Children (NELDS) (2009) as well as the National Integrated Early Childhood Development Policy (2015). These documents provided a context for understanding the daily running of the programme which was critical for this study. The documents were useful in situating the practices of the programme, as the current study was interested in describing and exploring the underpinning values that inform the practices of the programme. Thus, document reviews was an important part of the data methods.

3.6.2 Semi-structured interviews

Semi-structured interviews consisted of several key questions that related to the main areas that were explored in this study, such as the skills required to run the programme and the opportunities available for communication support. The use of semi-structured interviews was

deemed appropriate as it allowed the interviewer and interviewee to diverge to pursue an idea or response in more detail (Gill, et. al., 2008). The interviews facilitated an in-depth discussion along with the interview schedule (see Appendix 4A-4B), which included questions like 'How would you describe the pre-school early childhood programme at LOFOB'? and 'What do you think informs these practices?' These open-ended questions prompted detailed responses from participants on their experiences. The interview schedule included questions that aligned with the objectives of the study. To account for experiences in relation to the COVID-19 pandemic[2], the following questions were also included; 'What was the impact of COVID-19 on the classroom environment'? 'How has the programme changed due to the new protocols?' and 'How you think this has impacted the children?'

3.6.3 Classroom Observations

Observations were conducted in the classroom as it served as one of the main settings for the centre-based preschool programme. This natural setting is where learning and experiences happen readily for the children in the programme (Hansen, 2006). An observation tool, described in Section 3.7 below *Data collection tools*, was used to guide the researcher's observations in the class in addition to field notes which were taken throughout observations. The classroom observations offered valuable insight into the programmes activities and opportunities directly made available to the children in the programme. The classroom served as a setting where children engaged regularly with the programme and interacted with those offering communication supports in the preschool.

3.7 Data collection tools

The following section describes the tools used to collect the data for the current study. The tools include the document review schedule, the interview schedules and the observation tool used for the classroom intervention. The interview schedule can be found in Appendix 4A-4B, and the observation tool can be found in Appendix 5.

The document review schedule was drawn up by the researcher based on the objectives of the current study. The document review schedule was used to extract relevant information from the documents (see Appendix 8). The interview schedule was used during the interview phase to guide the interview process with staff members in the programme and caregivers. Questions

[2] Originally COVID-19 questions were not included in the interview schedule as the study did not commence during COVID-19. It did, however, continue during the pandemic and these questions were later added on to probe for changes in the programme due to COVID-19.

were drawn up based on the aim and objectives of the study through the consensus between the researcher and her supervisors. The questions were open-ended and direct in nature to prompt participants to share relevant details. Questions included 'Describe your role in the early childhood programme.' And 'Who else plays a role in the running of the early childhood programme?' Interview schedules differed slightly in wording for caregivers such as 'How do you think *your child's* communication development is supported in the programme?' This ensured that information gathered was relevant to the participant being interviewed, allowing for rich personal experience to be shared during the interview process.

The Communication Supporting Classrooms Observational Tool (CSCOT) was used as an observational tool to guide the researcher's observations in the classroom to describe the main aspects of the classroom i.e., Language-learning environments, language-learning opportunities and language-learning interactions (Dockrell, Ricketts & Lindsay, 2012). The observation tool (see Appendix 5) allowed the researcher to look at the preschool-aged learners in their classroom environment, using the tool as a checklist to observe learner and teacher interactions, reporting on frequency of items observed as well as reporting on what is being observed in the classroom. The CSCOT was examined by a panel of experts to determine its face and content validity as well as appropriateness in a South African context (Harty et al., 2013), as part of an undergraduate research project. The tool was described as structured enough for the classroom context, as it considers a variety of aspects in the setting and allows for additional observations to be reported on. However, the tool does not consider the needs of children with VI/B and was therefore used predominately as a guide to report on observations in the classroom. Thus, aspects relating to vision or sight in the observation tool were not included during observations, the researcher rather observed other sensory aspects i.e., tactile and auditory that were significant to children who VI/B.

3.8 Equipment

The researcher made use of her personal laptop to conduct online interviews via Zoom and saved all recordings on the laptop. Backup copies were saved to the researcher's own external hard drive. The researcher also made use of her personal phone to contact potential participants, be in touch with the programme co-ordinator, and to document observations to reflect on during data analysis.

3.9 Research procedures

In the following section the research procedure will be discussed. This includes the preparation that was required for data collection and the stages involved in the data collection process. The stages of data collection were namely, document reviews, conducting online semi-structured interviews, followed by the classroom observations. The research process will be detailed below.

3.9.1 Preparation

Once approval from the UCT Faculty of Health Sciences Human Research Ethics Committee was obtained, the researcher contacted LOFOB to request a meeting to discuss organisational and participant recruitment. Organisational consent was confirmed with the programme co-ordinator at the in-person meeting and dates were discussed for interviews and observations. Consent forms were then handed over to LOFOB to distribute home to parents and staff members. However, due to lockdown restrictions research activities with the site were put on hold from March 2020 to July 2020. The UCT Faculty of Health Sciences Human Research Ethics Committee had paused research activities with human participants for a duration of the 2020 lockdown.

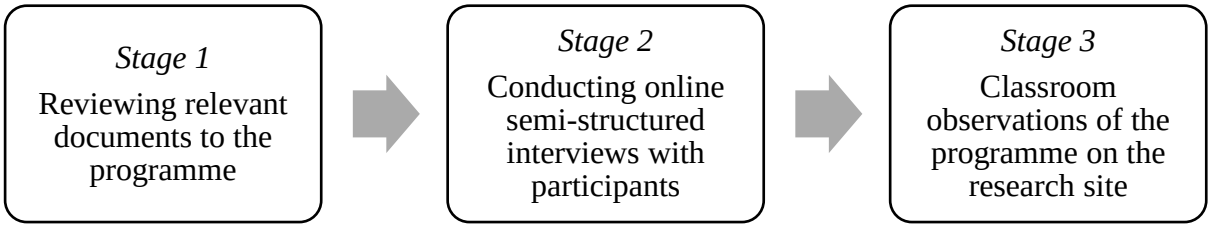
The researcher was in contact with the programme co-ordinator and relevant documents for document reviews were forwarded to the researcher via email to commence the document review process during this time. Over this time, the researcher needed to obtain approval the UCT Faculty of Health Sciences Human Research Ethics Committee to adjust the method of interviews to online interviews (see Appendix 6). Once approval was obtained, consent forms were sent out via email to the LOFOB programme co-ordinator and forwarded on to potential participants. Consent forms were then sent back to the researcher and interview times were set up with each participant via email or telephonically. Informed consent was obtained from participants being interviewed and informed consent was obtained from parents of children in the programme to conduct classroom observations (see Appendix 3A-3C). The researcher renewed the ethics approval for the study (see Appendix 7) and could commence with onsite data collection as of February 2021. The researcher was able to liaise times for classroom observations once the site could accommodate for site visitation.

3.9.2 Data Collection

Data collection was conducted sequentially due to the COVID-19 lockdown restrictions that limited in-person data collection. Once participants were able to return to the organisation, semi-structured interviews were conducted online. Similarly, once the children were able to return to the centre-based programme, classroom observations took place. Data collection therefore occurred in three stages. The three stages aligned with each data collection method, starting with document reviews, and ending with classroom observations.

Figure 3

Stages of the data collection



The following steps were followed during stage 1 of data collection:

- Documents were shared digitally with the researcher via email by the preschool programme co-ordinator prior to the start of semi-structured interviews and classroom observations.
- The researcher familiarised herself with the contents of the documents. Reviewing documents systematically by extracting relevant information pertaining to the objectives of the study. The researcher made use of document review schedule (see Appendix 8) to collect data from the existing documents.
- Extracting data from documents was a significant part of the process before analysing and interpreting the data in relation to the other findings.

The following steps were followed during stage 2 of data collection:

- Semi-structured interviews took place online via the Zoom online meeting platform, each interview was recorded for later transcription and in-depth analysis. Online interviews were conducted over a period of three weeks where the researcher met with each participant online at a set time.
- Two interviews were planned after each other so that participants could share one device. The rest of the interviews were conducted on participants' personal cell phones

via Zoom, including the parent who also participated in the interviews. Table 2 provides more context on who participated in which data collection method.

- The researcher sent links to participants via email on the day for them to access for the purpose on the interview.
- The researcher spent time ensuring all participants could access clear audio and video on the call. One participant was blind, so the video was not used during this participant's online interview. The rest of the participants kept their cameras on and were encouraged to do so, so that the researcher could observe non-verbal cues and body language (Hennink, Bailey & Hutter, 2011). The interview lasted approximately 30 minutes to an hour. The researcher ensured each participant that there are no wrong or right answers but rather a sharing of their experiences at LOFOB.

Table 2

Data collection process each participant was involved in

Participant	**Data collection process**	**Participant background**
Programme co-ordinator/s	- Semi-structured interview (1)	Melissa[3] is the manager and co-ordinator of the services to children at LOFOB for the past 10 years. She is 47 years old and has been with the organisation for 23 years.
Teacher/s	- Semi-structured interview (1) - Classroom observation (3[4])	April is the teacher at the preschool and has worked at LOFOB for the past 11 years.
Teacher assistant/s	- Semi-structured interviews (1) - Classroom observations (3)	Amanda is 48 years old and works at LOFOB as a teaching assistant. She has been with the organisation for 15 years and initially started working at the hostel as a domestic worker before being trained by the manager and teacher to assist at the preschool.
Children in the programme	- Classroom observations (3)	The preschool programme had a total of 9 children attending the centre-

[3] Pseudonyms have been used throughout the dissertation.
[4] Due to the COVID-19 safety protocols there were limited opportunities to observe the classroom.

			based programme. Ranging from ages as young as 3 years old up until the age of 7. All children had various degrees of visual impairment, some totally blind and others visually impaired.
Parents/caregivers with children in the programme	-	Semi-structured interview (1)	Vanessa is Chad's mother, and this will be his second year in the programme at LOFOB.
Social Worker	-	Semi-structured interview (1)	Musa is from the Eastern Cape and relocated to Cape Town in 2013 and worked in the hotel industry before working as a social worker at LOFOB in 2019. He is 27 years old with experience working with both adults and children.
Braille Instructor	-	Semi-structured interview (1)	Aneesa is 29 years old and matriculated in 2009 from Athlone School for the blind. She is the only blind staff member currently directly involved in the preschool programme. She started working at LOFOB in 2018.

- Once the interview commenced, the researcher spent some time getting to know each participant and how they came to the organisation, reassuring them of their confidentiality. Each participant shared their own personal background and how they became involved in the early childhood programme at LOFOB. Once participants became comfortable with the researcher, she would begin with the set questions relating specifically to the programme (see in section 3.6.2 *Semi-structured interview*). During the interview process, the researcher would rephrase or restate information that was being shared by using phrases like '… So, you're saying the programme has been around for a long time…' and ask relevant follow up questions relating to what was been said such as 'If the programme has been around for a long time, what has contributed to the success of programme over the years?'
- Through this process participants would answer questions that the researcher had prepared which gave the interview a less structured format (Hennink, Bailey & Hutter, 2011). Participants were encouraged to speak freely on the topic of the programme and

at times required clarity or further explanation for the set questions prepared. The researcher made sure participants understood questions during the interview process by rephrasing questions in simpler terms for example 'What opportunities facilitate communication development and multilingual learning? In other words, how is the programme and the activities in the programme, providing opportunities to support their ability to communicate and learn more than one or even two or three languages?'

- It was important for participants to feel confident in their ability to answer questions as well as speak openly on their own experience '…so you've been with the organisation for a long time so your input will be very valuable to the study, please share more on your experience with the preschool programme…' and by adding questions like '…is there anything else you'd like to add before moving to the next question?'
- The researcher would go back to questions that were missed or information that still needed to be covered for example 'You mentioned the other staff members that are involved in the programme, can you talk more about the other role players in the programme?'
- The interview progressed based on the responses given by the participants with no strict time frame. Once the researcher felt all the prepared questions were discussed and the participants had nothing more to add, she would prompt the end of the interview by thanking the participant for their time and participation in the interview process. Reminding participants that they would be contacted should the researcher need more clarity once analysing the data. Contact information was confirmed, and the researcher concluded the interview recording by saving it for later transcription.

The following steps were followed during stage 3 of data collection:

- The researcher arranged for classroom observations with the programme co-ordinator prior to arriving at the site, as limited site visits were made available given the COVID-19 protocols and safety procedures. Three mornings were discussed and if necessary, follow up observations before the programme closed for the school holidays.
- The researcher arrived with her own transport around 9 a.m. to observe the class. She was required to sign in, have her temperature taken and hands sanitised. Along with these procedures the researcher was required to wear a mask and observe a physical distance from others as requirement to be on site.
- The researcher tried her best not to make herself known in the classroom as to not interfere with the usual running of the programme. She sat distanced from the class and

only interacted with the teacher when necessary. She would ask follow-up questions regarding the activities when the teacher was done with tasks.

- The researcher made use of the CSCOT observation tool (as mentioned above in section 3.7 *Data collection tools*), where items on the tool were marked upon observing it in the classroom under different sections to record communication in the classroom. The observation tool was used as a guide given that it did not account for children who are VI/B, therefore the researcher made use of other tools to observe and collect data. This included field notetaking, recording activities as they happened in the classroom, and capturing the classroom environment. All these tools were used to write an observation report to reflect on the activities in the programme and detail the routine of programme as observed by the researcher.
- The researcher became familiar with the morning ring activities and was able to observe all the children on the alternating days. Once all the children were observed during morning ring time, the researcher would observe snack time and play activities outside of the classroom. The researcher was able to observe most of classroom group activities thereafter, concluding the observations over the three days.

  She thanked the teacher and programme co-ordinator for allowing the onsite observations. All assent forms were handed over to the researcher over this time.

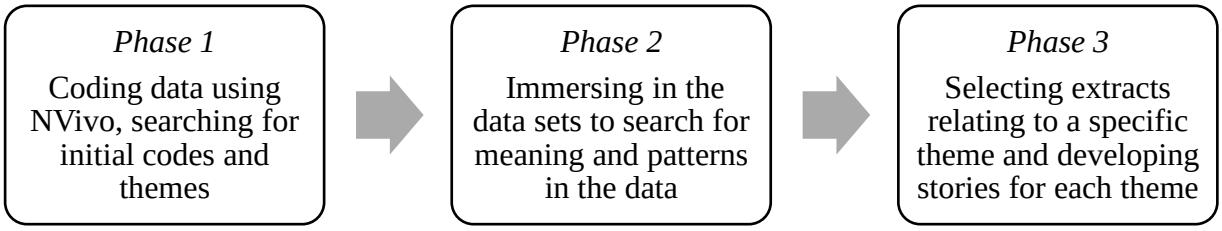
3.10 Data analysis and Interpretation

The data collected was analysed using thematic analysis (Braun & Clarke, 2006), where data was coded and analysed for patterns and themes in all collected data. Interview data was transcribed verbatim and checked before proceeding with coding all data for thematic analysis.

Each phase of thematic analysis is illustrated in the figure below:

Figure 4

Phases of Thematic analysis



Initially, data from the interviews was transcribed by the researcher herself and checked by a team member before coding for themes on the programme called NVivo. NVivo is a computer programme that was installed on the researcher's personal laptop to help organise, analyse and find meaning in the qualitative data sets. The observation report as well as documents reviewed were uploaded onto NVivo for analysis and developing of emerging themes. The data was analysed through thematic analysis (Braun & Clarke, 2006). Data analysis was data-driven and therefore no pre-determined themes were used to analyse and account for findings.

The researcher became familiar with the data by immersing in transcribed interviews, listening to audio recordings, reading and rereading documents, and reviewing observation notes to enhance the understanding of the data set. Approximately 10 to 15 initial codes were generated from initial analysis. Each piece of data either generated a new code, fell under an existing code, or generated a sub code under an existing code. At this stage the initial codes captured the diversity and patterns found within the data collected. Codes ranging from the 'impact of COVID-19' to 'supporting caregivers/parents'. Thereafter, the researcher searched for themes by reviewing coded data to identify areas of similarity between codes to begin cluster codes. Clustering codes that share some unifying feature would generate themes and subthemes. Themes and subthemes reflect and describe a coherent and meaningful pattern in the data.

During the process of interpreting the data the researcher made use of member and peer checking (Creswell & Poth, 2018). Interviewed participants were consulted in-person at the research site to confirm details in the data and follow up on information shared to corroborate findings. Peer checking by a VI/B peer was employed to help the researcher interpret the findings. Her peer's experiences gave the researcher a real-life perspective of a VI/B person, and what it means to learn, develop and communicate in a sighted world. This was a valuable step in the interpretation process as the researcher's experience with VI/B is limited. By engaging with a VI individual the researcher was able to deepen her understanding of communication development for children with VI and confront her own perspectives and assumptions. In becoming more aware of her positionality during this stage, the researcher was able to challenge her thinking around impairment. The input of the VI/B peer helped the researcher become more aware of her own biases which lead to the researcher becoming more critical during the interpretation process.

The researcher then reviewed all potential themes where all themes were checked against the collated extracts of data. Potential themes were explored in relation to the data. Thereafter,

deep analytic work was employed to shape themes. This phase involved selecting extracts to present and analyse and then setting out the story of each theme (Braun & Clarke, 2006). This was an iterative process as the researcher compiled many technical report-style write ups by selecting extracts to create a story behind each theme. This was often a challenging process, especially as the impact of COVID-19 became apparent across the data, and during this time the researcher found it valuable to debrief with supervisors and peers (Creswell & Poth, 2018). The researcher, then developed a teacher narrative to represent findings along with vignettes to represent participant roles and voices. The narrative was developed using both the interview data and classroom observations. The narrative was reviewed by the supervisors and a peer with VI/B..

3.11 Rigor and trustworthiness

A number of strategies were in place to ensure the rigour and trustworthiness of the current study as it takes into account areas of credibility, transferability, dependability and confirmability (Shenton, 2004). To achieve trustworthiness in a case study methodology the following strategies were employed for each area of scientific rigour:

3.11.1 Credibility

In preparation for the study, the researcher spent time becoming orientated and accustomed to site activities at LOFOB before the commencement of data collection. This included preliminary observations at the site, meetings with the programme co-ordinator, and staying in contact with the co-ordinator before data collection commenced. The researcher continued to engage with the site telephonically during periods where she could not be physically in contact with the site to maintain rapport. Upon selecting participants, the researcher employed purposive sampling for information-rich participants who were directly involved in the programme. The researcher spent time engaging with each participant before starting the interview process, making sure that they were comfortable to share their own experiences. Participants were reminded that their experience was a significant part in understanding communication for children with VI/B, to instil in them a sense value in their contribution, as they were the experts on VI/B in the current study.

Verbal data was transcribed verbatim and supplemented with note taking during the interview process. These transcriptions also underwent checking from peers to ensure the accuracy of data captured from the interview. Classroom observations were also recorded and documented

by the researcher, in addition to using the CSCOT observation tool (see in section 3.7 *Data collection tools)* and taking field notes, to ensure an accurate account of classroom activities in the observational report. Member checking was used to check the researcher's interpretations of the data with the participants and subsequently provide the participants with an opportunity to discuss and clarify (Baxter & Jack, 2015). This involved the researcher following up with interviewed participants to verify statements and elaborate further on responses provided. Another critical part of credibility was triangulation to ensure that multiple data sources were used including document reviews to corroborate the findings so that multiple perspectives were explored. Through the process of analysing and interpreting the data sets, the researcher made use of peer debriefing and peer checking to ensure findings were interpreted accurately without being impacted by the researchers own personal or professional biases (Creswell & Poth, 2018).

3.11.2 Transferability

To ensure transferability, all participants were selected using purposive sampling against a clear inclusion and exclusion criteria for selected participants to be representative of the research design. The introduction of the study aims to provide a thorough understanding of the research context to determine whether the results can be transferred to another context (Jensen, 2008c).

3.11.3 Dependability

In this methodology chapter details of the process of the current study have been documented to ensure the process is clearly recorded and traceable. The researcher has kept records of all transactions related to the current research along with backups of data collected on external hard drives and the cloud. Information was stored regularly and backed up throughout the data collection. The audio and video recordings used for data interpretation and analysis will be destroyed upon submission of the final thesis.

3.11.4 Confirmability

Given the interpretative and subjective nature of qualitative findings the researcher ensured confirmability using triangulation where multiple sources of data and methods were used to corroborate the findings across the data sets. The researcher's personal and professional biases were reflected on consistently throughout the research journey and discussed with peers and supervisors. During the interpretation process the researcher consulted a peer with VI/B to

assist with analysis of the data and bring in a perspective of a non-sighted individual living in a sighted world. This perspective helped the researcher gain an understanding outside of her own world view when analysing the data sets.

3.12 Ethical Considerations

The current study received ethical clearance from the Faculty of Health Sciences Human Research Ethics Committee (HREC) at the University of Cape Town to conduct the current study (see Appendix 1) with reference number 849/2019. The following ethical principles (World Medical Association, 2013) were taken into consideration throughout the research process: non-maleficence; beneficence; autonomy/self-determination; justice; privacy and confidentiality to ensure the respect and dignity of the participants are maintained.

The study ensured no harm will be imposed on participants. The participants were involved in online interviews, classroom observations and follow up member checking, and were therefore not in any direct harm, ensuring minimal risk. The researcher took the necessary steps to avoid the spread and contraction of the COVID-19 virus, therefore she maintained safety protocols throughout the research process (WHO, 2020). There were no direct risks involved in participating in the study, nor were there any direct benefits included in this study. However, through gaining an overall understanding of how to better support and strengthen communication development, participants indirectly benefitted.

All participants were briefed about the nature and objectives of the study before directly participating to ensure autonomy/self-determination. Consent and assent were obtained, and participants were able to withdraw from the study at any point. In terms of the employment of justice, all participants were treated equally and fairly, without any harm or abuse. Privacy and confidentiality were maintained for all participants. Contact details were taken for member checking and, once verified, all identifying information of participants were removed. Codes were used in interview transcripts to ensure confidentiality as well pseudonyms in the narratives and vignettes in chapter four. Participants will not be identified in any publication; however the name of the institution will be included in the findings.

Complete privacy and confidentiality cannot be ensured and through reading the findings of the study, participants may be identifiable through contextual information such as the description of experiences within the programme. Data collected was not shared with any research assistants. Interview transcripts were shared for the purpose of peer and member checking; however participants were given codes and names were removed.

3.13 Reporting

The researcher intends to report the final findings to the research site in a presentation. The researcher also aims to publish the research in a recognised journal.

3.14 Conclusion

This chapter presented the study aim and case study design within a qualitative interpretive framework. It included the study participants and detailed how the results that will be presented in Chapter Four were obtained. Strategies used to enhance rigour and trustworthiness were discussed and due consideration given to the conduct of ethical research. The study findings follow in the next chapter and will be discussed in Chapter Five.

Chapter 4

Findings

4.1 Overview of the chapter

Chapter Four includes the study findings and discusses the key themes that emerged from the data. The findings are represented in the form of a constructed teacher's narrative and participant vignettes. The teacher's narrative details a typical day at the preschool programme, including the key programme activities while the participant vignettes include the experiences, values, knowledge and roles of the stakeholders in the programme. Thereafter, themes emerging from the data will be discussed. A conclusion will then be drawn to summarise the study findings.

4.2 Teacher's narrative

The teacher's narrative provides a story of a typical day at the centre-based programme. The narrative focuses on the activities and opportunities that are provided in the centre-based preschool programme. The teacher narrates activities that are happening throughout the day and introduces key stakeholders in the preschool programme.

Busy from the time they enter up until they leave

'" Mornings, *molweni* (hello)…"'. Getting my day started before the children arrive at the centre. Melissa comes into the class while I check my register. "Don't forget our meeting later at around 2 o'clock, I want to chat about how Skye is doing… and also about the home programmes… do you think it's going well?" I'm trying to make sure there are enough spaces between the mats for physical distancing. I look up at Melissa, "Sorry, Melissa, what was that? My mind is all over the place with the children being back." "Not a problem Teacher April we can chat later in the meeting, don't forget! 2 o'clock!" I smile at her as she leaves the class, I know she is always interested in how the children are doing especially the new ones. "I will definitely see you then!"

Teacher Amanda walks in from the adjacent room leading into the main classroom. She has just grabbed some hula hoops [5] for us to take to the front of the centre. "How many do we have coming today? Four, right?" "Yes, four in total, remember Skye is still getting use to our

[5] A circular hoop used during children's play activities that goes around a child's body with enough space for them to move around in it

programme so she will be coming with her mother today." Now with COVID we try to keep an equal number of children in the class at a time so that they don't risk bumping into each other. So, they come in on alternating days and then receive a home programme for the days they are not here. Teacher Amanda nods, "I'm still getting used to using these hula hoops but at least it's just to get them out of the transport" I nod my head in agreeance, "Yes it's all about their safety…but they understand… remember?" Teacher Amanda laughs, "Yes, the children say: 'teacher we must sanitise our hands.' When you ask them 'why are you wearing your mask?' then they say: 'because we need to protect ourselves.'" We both laugh as we leave to collect them in front of the centre.

Aneesa is sitting at the reception area, "Morning dear, please open for us… the transport is here… are you coming by the class later?" "Morning ladies, yes of course and yes, I'm going to do braille readiness with one or two of them today. Thembi is doing well but Hanah needs more practice." "Thanks dear I will make sure they are ready for you."

Teacher Amanda is already outside welcoming the children. The children are lining up nicely with the hula hoops around them and march to the sound of Teacher Amanda's voice. Musa, our social worker, walks past and greets, "Mornings, *molweni* (hello)…" The children are excited to hear his voice and Hanah jumps to say "*Molo* (Hello) teacher Musa… I have new dog… a puppy teacher Musa." "Really? Hanah, you didn't tell us about this…" Teacher Amanda loves all of their stories especially Hanah. "Oh, wow will you tell me more later?" "Yes!" she replies.

The children start to get restless, and all start with a story, "Teacher Musa I have a new…" "And me and me…" I interject "Now we can talk later to Teacher Musa, remember we must go put our things away. Say 'bye Teacher Musa'. Thembi what do we say in isiXhosa for 'play later'" Thembi joins in with everyone to say goodbye and Musa says something to her. He then says he'll see them later for playtime. "*Dlala* (Play) teacher April." "Okay lets *dlala* (play) inside the class, the mats are out already…"

Teacher Amanda is now leading them into the classroom, "Okay… bags away, lunches away, snacks away, who needs the toilet?" They all know where to go as this is part of a practiced routine to start the day. While teacher Amanda keeps an eye on them, Skye comes in with her mother. I greet and welcome them. "How is Skye today?" "She's quiet today, how has she been settling in?" "She's getting there, we try to get them into a routine so when she's ready teacher Amanda will help her put her things away…" "Thank you teacher April… say 'thank you

teacher'" Skye hangs onto her mother's hand and smiles when her mother talks to her. Skye may be totally blind, but they haven't confirmed yet. I haven't heard her say words yet, she mostly makes sound. "Let's go join the other children Skye." "Let's go Skye." Teacher Amanda takes her hand and leads her to the area where the other children are.

Pack all your toys…*pakhisa* (pack). Once the children have settled in, we give them toys in a box for them to play with on their own mat. Teacher Amanda goes around to see how they are doing. She sits with Skye and talks to her about the blocks. "Green block, *hierdie een is groen, soos gras*. (this one is green, like grass)" We use all available languages in the programme as it is important to keep in mind that:

> All children need to hear and learn to speak in their mother tongue. If they have a solid foundation in their mother tongue, they will find it easier to learn another language as they will have already found out how language is structured and how to communicate with others. This will help them if they are cared for in a place where more than one language is spoken. (National Integrated Early Childhood Development Policy, 2015, p. 16)

The children mostly catch on very quickly to the English because we teach in English. Our isiXhosa is limited so sometimes we rely on the other children in the class to translate with ones who are having trouble understanding English.

"Okay let's pack up!" I instruct them before we start our morning ring. "Pack all your toys in your box… *pakhisa*… (pack)". They all start to move around on their mats and pack away each item, teacher Amanda assists where she can, but they know what to do.

"Lulonke what song next?" … *amaweeli amabus chekeleza* (wheels on the bus go round and round). I sit in front of the small group on a chair and begin to chime "hello how are you?" signalling the start of their daily morning ring. Some soft voices can be heard behind tiny masks and one eager voice sings "Hello!" waving in excitement. "It's good to see Hanah here, it's good to see Hanah here, how are you today?" I go around singing each child's name while the children sing along in unison. I like to start the morning session like this, it's an opportunity for them to know who is in the class with them. I sometimes ask them "Hanah who is on your left? Is it Thembi?" So that they can practice their left and right and also to orientate them as to who is next to them during their morning ring. I ask them individually how they are

doing and what they were up to on the weekend. Some respond “Fine” and “Yes!” Others nod their heads indicating they are doing well. I look over at Skye who has not spoken yet and ask if she’d like to sing “Happy Birthday” because it’s her favourite song. No response from Skye even after being prompted to sing. I move on and say, “okay maybe later.”

“What day is it today?” I give them a chance to respond but I help them along “what comes after Sunday?” Still nothing. “Okay Days of the week are…Monday…. Tuesday… come everyone… Wednesday, Thursday, Friday, Saturday and Sunday! So today is Monday, right?” Some of them nod. “Hanah today is Monday, *vandag is Maandag* (today is Monday) … Thembi today is… Monday, what do we say for Monday in isiXhosa…? *Mvulo* (Monday)” Thembi mumbles “*Mvulo* (Monday)”.

We move on to our theme for the month, wild animals. “Are you scared of animals in the wild?” some shake their heads “why? Wild animals can smell meat “*inyama* (meat)” and if they smell you in the wild, they will turn you into a meal!” They all gasp, and Hanah says she won’t go into the wild. “Why Hanah?” “They going to eat me!” “Yes, so be careful of the wild…let us sing our favourite animal song, “Old Macdonald had a farm ...” I start handing out some instruments to each child to use while we sing. “Thank you teacher” Some are shaking tambourines and others are beating on drums with drumsticks. “Old Macdonald had a farm…hehahehaho… and on the farm he had a…” I pause in between to allow the children to fill in the blank. “Cow!” shouts Hanah “and a moo moo here and moo moo there hehahehaho” They continue in this fashion while I pause in between to allow the small group to call out animal names and sounds before completing it myself. “And on the farm, he has a…. (What is a horse?) *ihash* (horse)… hehahehaho… Thembi…what sound does a horse make? *ihash* (horse)?” I attempt to make a neigh sound and the group laughs.

Skye is not really participating so to include her I move onto singing Happy Birthday as this is her favourite song. “Everyone clap hands for Skye” I go over to Skye and put my arms around hers to encourage her to clap. “Hip hip hooray yay clap hands for Skye!” I can tell Skye feels included by this and can sense the attention on her. Skye is slowly getting used to the class environment but still needs some time. It is important that we encourage her and make her feel included in our classroom activities. I always try to use what the children like such as favourite songs to get them engaging in our morning ring time. “Lulonke what song next?” Lulonke turns her head to Thembi and starts to slowly beat on her drum “*chekeleza* (go round) …” I join in “*amaweeli amabus chekeleza* (wheels on the bus go round and round) …Hanah

sing…*Die wiele van die bus draai om draai om draai om* (the wheels on the bus go round and round) …" They all sing along while shaking and beating on their instruments. "Okay up up… This is the way we stomp our feet stomp our feet…" They slowly start to move on their feet and most of them struggle at first to orientate themselves, however they are eager to stomp around on their feet. I bring the group closer "come follow my voice, come, come…" I touch on each of them to make sure they are an arm's length away but also to reassure them that they are near. "Am I singing alone?" they join in and I continue with "this is the way we jump around jump around…" I continued with various actions such as running and hopping. I assist Hanah as she is totally blind by holding her shoulders as she hopped, jumped and ran around with the others who had some partial vision. Hanah knocked into some tables but felt her way around it as I stood behind her. Skye quickly became overwhelmed by the activity and screamed so I let her sit on her mat while the others continued. As the morning ring ended, I reached for the hand sanitiser before handing out their snacks.

We talk about taste, flavour and smell. Teacher Amanda cuts the fruit into small pieces then serves to the children who are now seated at their table. I take Skye's hand and lead her to the table once she has calmed a bit. "What fruit are we eating today?" I ask the group as some reach out to the plate in front of them. Some children are not used to oranges or peaches but we encourage them to eat different fruits so they can get the taste of a variety of fruits and the different textures. Skye's mom packed apples, "okay today we are having apples, what fruit are you eating?" "Teacher… I don't want apple." "Just try it Hanah…what do you have packed today?" Teacher Amanda comes over with yoghurt from her lunch box. "What flavour yoghurt do you have today? Is it apricot yoghurt or peach yoghurt or strawberry yoghurt". "Strawberry teacher Amanda."

"Remember when we had the Bakerman? Can you remember?" Bakerman happens on the last Tuesday of every month. This is an easy baking activity like icing a Marie biscuit [6] or cupcake. During this kind of activity, we talk about taste, flavour and smell. "Yes, teacher when we ganna do it again?" "Next month we will do another one" "Lulonke do you remember? What did it taste like? Like strawberry?" "Like sweet teacher." They remember the icing as "sweet" so the children can understand sweetness. The smell of vanilla essence we associated with something that is sweet. "Yes, like a sweet taste and then what did we do with the sweet taste... the icing" "On the biscuit teacher! Yum." The children love being involved in these

[6] The name of a round flat biscuit in South Africa.

kinds of activities. “Yes, Hanah on the biscuit… and then…” “I took it home to show my mommy.” “Yes, your mommy knows you’re a clever girl.” We talk and ask questions about what they’ve learnt. This is part of them learning to communicate effectively and use language here in the programme.

Examples of how adults can support the growth and development of young children:

- Include children in conversations whenever possible
- Encourage children to experiment with new words
- Talk to children about what they are doing
- Encourage children to recall events, prompting when necessary
- Read and tell a variety of stories of familiar and unfamiliar events
- Encourage children to draw events from their day or from a story they have heard (the National Early Learning and Development Standards for children (NELDS), 2009, p. 24-25)

***Hamba (go)*…in… out…left…right.** “Who’s ready to play in the hall?” Usually after their snack time we do a physical or a gross motor activity, sometimes they have orientation and mobility training with one of the interns at our centre. Today teacher Amanda will take them to the hall for some physical movement. “Okay let’s use our hoops again, we can do an in and out game…” I line them up to go through to the hall in the centre. Teacher Amanda lays the hoops on the floor, “Lulonke *hamba* (go), in… out… in and out…yay… good!” Teacher Amanda challenges Lulonke and Thembi by letting them hop on one leg in and out of the hoop. They are fine with this as they are not totally blind. I take Skye’s hand and we jump together “in” and “out” the hoop and the same with Hanah. Hanah does well on her own and doesn’t need too much help. “Good!” We do some rounds of this before ending off the session. We make our way back to class to start on some tabletop activities before Hanah and Thembi go for their braille sessions.

Aneesa is waiting by the class door. “On our way Aneesa.” I shout from a distance. She must have just gotten there. She turns in the direction of my voice and says, “Okay not to worry.” “Hanah, Thembi who is ready for teacher Aneesa?” Aneesa focusses on exercises that teach and reinforce right and left as part of introducing the children to braille and the braille cell. “Is Hanah ready for our ping pong game?” Hanah nods her head and off they go to the adjacent

room. The others stay in the class while we set up some beading, peg puzzles and playdough for tabletop activities. Teacher Amanda sits with Skye while she lets her feel and hold the beads. They then feel hole of the bead before stringing it through. “Well done, Skye, the bead went through! Another one…” Teacher Amanda places her hand over her hand, and they string it through together. She shakes the string so Skye can hear the two beads on the string. I give Lulonke and Thembi a wooden puzzle. I make sure to unpack the pieces out for them. They both start building the puzzle. “Nice Thembi, keep trying… Lulonke you have circle… A circle is round like a five rand coin…” I talk them through the puzzle every now and then but don’t get involved, it’s good for them to feel and explore.

I hear Hanah come back from her braille session. “Teacher, I roll the ball… this way... that way” She waves her hand to the left and right. “Really? And what else?” Aneesa waits for Thembi at the door of the adjoining room. “Thembi go to teacher Aneesa please…” “Teacher Aneesa first shows me then I did it all by myself…” “Good!” I set another puzzle down for Hanah. “Now come do the puzzle at your table all by yourself… come…” “Teacher we always do the puzzle… over and over again…” “Yes, we do it again again, it’s good practice… you will get better at building puzzles.” “Okay…” She finds her way to her seat and plants herself in the chair. “We going to have lunch soon, so do your puzzle nice and quick.” She starts to move her pieces around with some enthusiasm. Could be the thought of lunch or wanting to get her puzzle over and done with.

A team effort. Musa arrives not long after we finish lunch to do play therapy. We start talking about Skye, “Okay yes… she is quiet but does enjoy certain things. We try to include those things in our classroom activities… still needing more support than the others. Maybe see how she does in the play therapy with the rest of the group today.” “I will include her in play today…” We are slowly trying to include Skye in all the programme activities as she adjusts to the routine of the programme. Play therapy is mainly pretend, free play that is facilitated by our social worker. The children get to play with cars, push wagons or play prams. The purpose being for the child to almost re-enact real life scenarios to delve deeper into social issues potentially related to their lives. The children are very fond of Musa and even the ones who don’t speak isiXhosa as a home language try to use isiXhosa to engage with him.

Musa continues, “…so yesterday, Kyle opened up during play about his father being taken by a police car.” Kyle comes in with the second group. We know about some of the social issues affecting the children. Musa is more directly involved especially with the intake of new

children. “Oh okay… Kyle seems to be doing alright with our activities…I know the family sometimes struggles to do the home programme on the days he is home. He still makes good progress…” “That’s good to know… he is still engaging and wants to be here…so we can support him.” “Yes, the lockdown did change things with our programme… but I am glad we are back now and still offering a home programme on the days the children are not in… it’s good to still have all that support.” “Yes, we offer a lot of support here in the programme… even just being able to talk to the children again. Some of them even speaking isiXhosa…” Musa grins, “Like Chad saying ‘*hamba imoto’* (go car) yesterday during play.” We both smile. Musa says he notices the children using and understanding isiXhosa words and phrases. He then makes his way into the next room. Teacher Amanda calls for them to join him while she takes Skye in by the hand.

Later that day I make my way to the boardroom to meet with Melissa and the rest of the team involved in the preschool programme. We follow a formalised programme here at the centre, so it is important for us to discuss progress and goals in the programme. We discuss the home programme and how the parents managed to stimulate their children during lockdown and up until now. “Yes, we were able to see some progress when they came back in September already. Some of the parents were pleased that there were activities sent for them to do. Simple enough for them to incorporate into their day with all the languages available for the activities. So, they also really enjoyed the activities.” Melissa seems pleased, “That’s good… it’s good to know that they still felt supported, and the children had something to do… how is Skye settling into the programme?” “I think she is doing okay, still needing some more time to become familiar with everything…” “…let’s just give her time… I will feedback to the family about her progress. We are aware that she isn’t really talking but as we’ve seen with our children in the past… they eventually catch on.” I nod in agreeance. “Yes, the parents are aware and they’re hoping the programme will help her communicate more... they are also receiving support at the hospital clinics.” “Okay let’s keep up to date with her and her communication…” “Okay… and let’s give it time.” We both nod and Melissa moves on to her next item. “So, we will officially be welcoming an Occupational Therapist (OT) this month.” This is wonderful news; I know we have struggled with funds for that post for a long time. “Looking forward to the new addition Melissa! I know the children are going to benefit so much from it… would be nice having that extra support.” “Definitely April, it will be a valuable resource to add to our programme.”’

4.3 Participant vignettes

In the following section individual participant vignettes include personal experiences of stakeholders in the programme. Vignettes reflect personal stories in which each stakeholder discusses what informs their role which includes their knowledge, values, principles, and skills in relation to the centre-based programme. Each participant vignette presented below has a title relating to the stakeholder's vignette. Followed by their personal background, thereafter their role and experience in relation to the preschool programme.

It's about community and teamwork

'We are about preparing children for life and a resource for families. I see our programme as a comprehensive programme. It is important that families feel they can turn to us for support, and we do our utmost best to meet their needs with the basket of services that we provide for them. You are dealing with a family who did not expect this. Did not expect a diagnosis of disability, of permanent blindness or of permanent visual impairment. Schools for the blind and centres for the blind its *deurmekaar* (confusing) with families and parents so we are dealing with families and parents who are extremely vulnerable because of a disability or an impairment or a diagnosis that they were really not expecting. Disability has got a negative connotation for many people. I can understand that it also depends on how the disability comes about. As a pregnant mom, as a young mom, many of our moms are first time moms. There's no way in your mind that you think your child is going to be blind or have a visual impairment. We tend not to think about any negative thing happening to us ever... yet disability is a part of a negative experience. People tend not to think about it, if it doesn't affect them then they won't think about the impact it can have on your life. I'm sitting here but I'm not a mother of a child who is blind. My children are not blind so it's important to keep that in mind, that perspective and to have empathy.

Our core has always been governed by disability and what is connected to government policies, the constitution of the country in terms of the rights of persons with disability and children rights etc. I also feel very strongly about inclusion because that's where disability is and that is what we are working towards. Many years ago, we saw individuals with visual impairments as separate from society and that's how LOFOB started out, individuals came to live at our hostel for the blind for years. They are older individuals now because this happens to be their home

for the longest time. We've moved away from that because persons with disability form very much part of our community, just like everyone else.

My passion lies within community work, which is something that really drives me in my leadership role, is serving communities especially at risk and vulnerable communities. I've been managing for over 10 years, be it challenging sometimes I check myself to say it's a blessing. I see our early childhood development programme as a centre of support. I see our centre as a centre of excellence. I see our centre as a lighthouse that parents and families can be drawn towards. I've grown with the organisation. My position at LOFOB is manager of the programme. How I see my role is not so black and white. I see my role as coordinating resources to primarily our beneficiaries. The resources can be so many different things because as I say we are not the only role player in our children and in our families' lives. We are one part of the puzzle. I always say that parents especially when we meet them for the first time. They get an overview. It's not about LOFOB only you know. There's medical support. There's families. There's the teachers. There's clinics. There's the pastors. There's the friend. Etc. So LOFOB is part of it. So I'd like to see myself as part of their structure that coordinates resources within a particular community'

For the love of teaching, for the love of children

'So, because of my experience in a mainstream school it was quite, not easy…I would say it was fitting for me because you teach the child and not the blindness. That is where my passion lies teaching children so that they can learn and progress. Also, that a child, a blind child, must not feel like they must wait for help, we want them to be independent. I think also working towards the goal of getting the children to be independent for them to go to school. If they need to move on to a special school. If parents opt for that then they are equipped to go to that school with the foundation that has been laid here. There are two schools in the Western Cape that our blind and visually impaired children can attend which is Athlone School for the Blind and Pioneers school. Pioneers school is in Worcester so if parents opt to send their child there, they will be staying in a hostel without the support of their families.

My experience, the organisation, Melissa, policies and the department of social development have informed me in my role I would say. You must be supportive to the family as well so it's not only about being a teacher. Sometimes children come with little stories, and you need to listen to these stories, and you need to take note because it can be them trying to tell you what

is affecting them at the end of the day. So, I have to deal with the parents, the caregivers and family related issues that impact the child. Family members play the biggest role in this programme. If they were not here, we wouldn't be here I would say. When the new children come say for instance, they are a month, a month and a half into the preschool programme. Then we allow our parents to come in and to come sit in for the day. Now with covid the parents also needed online support and that support has still not stopped. Parents could contact me should they need any assistance, so I was always there for them.'

Handling them with care and having consistent patience

'It gives me great pleasure to work with blind children and I enjoy what I'm doing - sometimes when I sleep my husband would say to me "you calling the children in your sleep", the names of the children. It's a great pleasure to work with them. You feel nice because you do a good job and I'm happy with what I'm doing. It was challenging at first but I learnt a lot with the blind children. I think it's not for anybody to work with blind children, you need to know what you're doing with the children, and they are very sensitive. You need to handle them with care. I got a lot of support from the manager and with the teacher who I'm working with - very supportive - and it is very nice. They support me in every way that I need their help. I started learning about the routine for the day and following that, then of course learning how to prepare tasks and activities for them that would involve feeling. I learnt quickly on the job and also working with the children. Some children when they're new in the class you just give them a little bit space. Okay today is fine, tomorrow is fine and maybe you know children don't open up immediately. It takes time for them, so we have patience. When you ready, when you feel alright then we allow them to be themselves. We don't push and push and push. We give them some time.'

All children deserve to be included

'I enjoy working with the families, so it's been a good experience for me especially learning about blindness and visual impairments. I think the LOFOB early childhood development programme emphasises giving children with blindness or visual impairment the opportunity to learn, grow and develop independence just like any other child would in a mainstream setting. They are able to develop skills and reach milestones like any other child would, being blind may hinder some skill development but that's why we are here to encourage and support them. For me you know every child has the right to be included in society. They should be treated, fairly and equally like any other child. They have the right to education, they should be free from harm, grow in a safe environment and have all their needs met. I have learnt a lot about

the needs of a blind or visually impaired child but most of all that they are no different to any other child. So here we focus on developing their independence in order for them to go to school and become educated. I support families within my role of social worker to ensure the child is living in a home that is conducive for their needs. I also offer families counselling so I am here to support them within my role.'

Support your child on their journey

'I think it has been a blessing being involved in the programme. I get the opportunity to support the parents and families. Being blind myself, I feel I can offer them that support from someone who has lived experience. I always like to see it when the parents are, you know, supporting their kids. I just I love it... it encourages me in a way. We had a parent who came to donate toys to the programme. She had all these toys that she used to use with the child. It was so beautiful her journey with her child. She got the child through varsity and everything. Then she donated all of his toys to LOFOB. So, I thought wow beautiful. Their willingness to support their child is so important on their journey and it can really determine the success of that child. They need the necessary support and the important thing for them is start from birth from as early as possible. Support not only comes from the immediate family but also neighbours and people in the community. Whether it's a neighbour who just lives next door who calls the child to come and play with their child. That's also learning for a child who is blind because you're learning to walk to another different space and also being included. I think everyone in the child's life plays a role, big or small, it is significant to help them develop.'

I didn't really have time, but they told me it was fine

'When I found out about his vision I wasn't in a very good space. Afterwards especially when I was referred to LOFOB by Red Cross I felt more at ease because then I met parents that were going through the same or different things but similar. So, there's that support group from parents as well. I would say they are honestly a huge help. It is being well run by them and by the teachers and managers. The whole LOFOB is being well run. They are very supportive. You can contact them at any time with any questions. Overall, they are good.

When we were receiving home programmes during the lockdown, I didn't really have time to go through his homework with him. I told them I don't have the time to do it because by the time I get home then he is half asleep. I am at work most days. So, they told me no it's fine. If I can't do it, they understand because they can always just catch up. Now that he is back at the

centre, there is some resistance from him. He feels they force him to eat certain fruits that he doesn't like, and he must do the same things all the time. I explain to him that they want you to eat healthy and the reason why they need to do the things over and over is so you can learn so I try and explain that things (*sic*) to him. I try to be supportive in whatever they implementing at school I must also try to keep up with that at home. So, I must just be supportive in my role as a parent as well. Attend parent meetings, teachers-parent meetings and things like that.'

4.4 Themes emerging

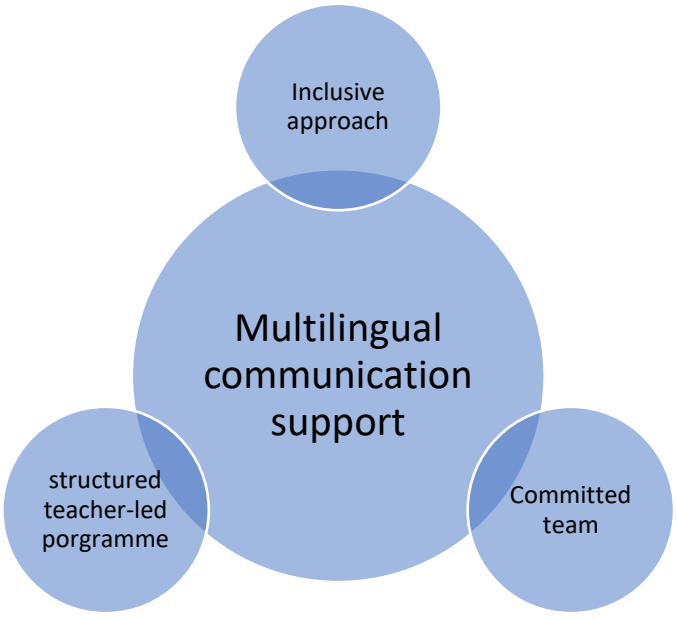
Following thematic analysis, themes that emerged in the data sets are discussed below in relation to the teacher's narrative and the participant vignettes. The themes that emerged are:

- an inclusive approach to encourage multilingual engagements and support,
- a structured teacher-led programme supporting the child's abilities,
- and a committed team offering support.

Themes interpret the main findings of the study to extract meaning from the narrative and participant vignettes. The interactions of these key themes are represented in Figure 5 below.

Figure 5

Themes supporting multilingual communication support in the programme



4.4.1 An inclusive approach to encourage multilingual engagements and support

Activities and opportunities for communication support focus on including each child. This inclusive approach includes the use of isiXhosa and Afrikaans to support their multilingual communication development. Throughout the teacher narrative, opportunities for children to engage in multiple languages were made available in the programme activities. This included opportunities in the home programme as well. Key words and phrases are used alongside the English medium. These opportunities are offered during the programme, during conversation, or during structured tasks and activities. Children are encouraged to use additional languages where they are prompted to use isiXhosa or Afrikaans. Supporting and including the language diversity in the programme, such as in the following examples

> '…Thembi what do we say in isiXhosa for" play later"? Thembi joins in with everyone to say goodbye and Musa says something to her. He then says he'll see them later for playtime. "*Dlala* (Play) Teacher April." "Okay lets *dlala* (play) inside the class, the mats are out already…"
>
> "Green block, *hierdie een is groen, soos gras*. (this one is green, like grass)"
>
> And on the farm he has a…. (What is a horse?) *ihash* (horse)… hehahehaho… Thembi…what sound does a horse make? *ihash* (horse)?" I attempt to make a neigh sound and the group laughs.
>
> Teacher Amanda lays the hoops on the floor, "Lulonke *hamba* (go), in… out… in and out…yay… good!"

The programme supports are also inclusive to all the children's communication abilities. This is highlighted in the Teacher's narrative where the child 'Skye' was included in all activities and given opportunities to communicate throughout the day. Although, she did not communicate using language she was still receiving communication support. For example, her favourite song was included during the morning ring to encourage her to sing the words to the song. Giving her an opportunity to imitate words in the song like the other children were doing during the activity. These practices are also described by stakeholders in the vignettes where the teaching assistant highlights inclusivity of all the children joining the programme:

> 'Skye is not really participating so to include her I move onto singing Happy Birthday as this is her favourite song. "Everyone clap hands for Skye" I go over to Skye and put

my arms around hers to encourage her to clap. “Hip hip hooray yay clap hands for Skye!” I can tell Skye feels included by this…’

‘Some children when they’re new in the class you just give them a little bit space… When you ready, when you feel alright then we allow them to be themselves.’

These inclusive practices are informed by the knowledge, values and principles of the stakeholders in the programme. The programme co-ordinator discusses inclusion and how they have moved away from keeping persons with disability excluded from the community but rather focusing on inclusion and integration. Their attitude toward the child with VI/B is shaped by inclusivity and by the child’s right to be included. The organisation and stakeholders involved in the programme work toward social inclusion. The stakeholders within the programme uphold this underpinning value where they encourage the inclusion and integration:

‘For me you know every child has the right to be included in society.’

‘Support not only comes from the immediate family but also neighbours and people in the community. Whether it’s a neighbour who just lives next door who calls the child to come and play with their child. That’s also learning for a child’s who is blind because you’re learning to walk to another different space and also being included.’

Thus, inclusive practices are valued in the programme where activities and opportunities to communicate involve supporting all communication and language abilities. The preschool programme works towards inclusivity in education. In order to prepare them for formal schooling, where inclusive education is part of education policy. However, schools mentioned specifically cater for children with VI/B, similar to the programme itself. While the centre-based preschool programme is inclusive in its approach, they are still needing to provide support that prepares them for the reality of the education context in South Africa. Thus, emphasis is placed on developing their independence in preparation for a ‘sighted world’:

'teaching the child and not the blindness'

'…we mostly concentrate on independence to prepare them for their schooling. There are two schools in the Western Cape that our blind and visually impaired children can attend which is Athlone School for the Blind and Pioneers school.'

'…that a child, a blind child must not feel like they must wait for help, we want them to be independent.'

4.4.2 A structured teacher-led programme supporting the child's abilities

In order to support and develop their independence and communication skills, the programme follows a set structure that is led by the teacher. The routine and structure allow for repeated learning opportunities, independence, and skills development. Daily routine activities provide the children with the opportunity to learn through repetition and structure of an adult-led programme. Structure and routine are suggested throughout the daily programme to support the child. When children arrive, they are expected to follow a routine while being directed by the teacher. During "morning ring", she uses scripting to indicate the routine of the morning ring time such as 'what song is next?' Consistent opportunities are created through routines where interactions are mainly initiated by the teacher:

> 'What did it taste like? Like strawberry?'
>
> 'Teacher we always do the puzzle… over and over again…' 'Yes we do it again again, it's good practice… you will get better at building puzzles.'

The programme draws on the child's other senses (abilities) in various activities to offer opportunities for communication support. This includes auditory senses as illustrated in 'morning ring' activities where children are learning new words during song. This includes multilingual opportunities where a variety of new words and phrases are included in isiXhosa and Afrikaans. Songs include repetition increasing exposure to new words, supporting their communication development. However, songs used in the classroom largely support a sighted child's world view. The first song includes the use of sight to acknowledge another's presence i.e. 'It's good to see...' Although there may be some understanding around the aim of singing the song, the idea of sight might be challenging for each child especially those who are totally blind. Some descriptions, like those included in these songs, may have little meaning to a child with VI/B.

Other senses are included as described in the 'Bakerman activities', where detail descriptions are used to describe smell and taste. Children are prompted to make associations to learn new words such as 'sweetness' relating to the smell of 'vanilla essence;' Similarly tactile opportunities are offered during structured tasks with direct verbal descriptions and associations. Communication support is often being presented in this way with uses senses, verbal descriptions, and associations.

> 'Green block, *hierdie een is groen, soos gras.* (this one is green, like grass)'

'Nice Thembi, keep trying… Lulonke you have circle… A circle is round like a five rand coin…' I talk them through the puzzle every now and then but don't get involved, it's good for them to feel and explore.

The structured approach to the programme stayed in place while experiencing changes due to lockdown restrictions. During that time, the programme format had changed from a home programme where parents became involved in activities to children returning to the centre-based programme where fewer children were attending the daily programme. There were fewer opportunities now for the children to explore or be outside the classroom. Teachers and stakeholders were now even more involved in directing the children in the programme. The use of 'hula hoops' were used to guide them out of the transport, creating opportunities for social distancing that aligned with their abilities. Distance created between their mats meant fewer opportunities to engage and communicate with peers. The teacher became more involved in directing them in activities. Thus, with an overall reduction in children in the physical programme, safety precautions that encouraged social distancing and reduced touch meant less opportunities for play and social interactions.

4.4.3 A committed team offering support

An experienced, passionate team provide support in the centre-based programme. There is a commitment to caring for the children and engaging in their 'little stories' throughout the day. In doing so they actively seek out ways to connect with children in the programme. Activities that are initiated in the morning ring time focus on greeting and asking the class 'How are you today?' group participation and singing songs the children are familiar with. The teacher made use of the children's names while interacting with them, including their home languages. Her willingness to include languages alongside English shows how language is used to connect with the children. This creates a linguistic diverse and inclusive space for communication support. Thus, the children were supported in communicating during the programme where the team connects with them on their level.

The narrative highlights how the stakeholders work together in supporting each child in the programme. Working toward a common goal of including and supporting the needs of the child in the programme. This includes supporting communication during activities set out in the structured programme. For example, the social worker also includes isiXhosa words and phrases that support multilingual communication development for the children in the programme. The programme co-ordinator and the teacher discuss the monitoring and progress

of the new child ‘Skye’ who requires communication support. While the teacher and teaching assistant are mostly involved in the activities and opportunities for communication development, they are being supported from all the stakeholders involved.

Skills of the team have shaped and developed over an extended period where they have gained professional training and direct experience with the organisation. They express a level of commitment and passion for their roles in the programme and being able to serve those that are considered vulnerable in the community. They have knowledge of what the children are expected to achieve within the programme and therefore practice this throughout the daily programme i.e., developing independence. The staff work together to support the children in the programme, meeting at the end of the day to discuss matters concerning the programme and ensure the needs of families are being supported:

> 'My passion lies within community work which is something that really drives me in my leadership role, is serving communities especially at risk and vulnerable communities. I’ve been managing for over ten years, be it challenging sometimes I check myself to say it’s a blessing.'
>
> 'My experience, the organisation, Melissa, policies and the department of social development have informed me in my role I would say. I think also working towards the goal of getting the children to be independent in order for them to go to school.'
>
> 'I would say they are honestly a huge help. It is being well run by them and by the teachers and managers. The whole LOFOB is being well run. They are very supportive. You can contact them at any time with any questions.'

The committed team’s support continued in the form of a home programme during lockdown. The teacher was still available to support families during this time when the home programme was the only form of support the children were receiving. The teacher discusses the home programme as an ongoing support while children attend the centre-based programme on alternating days. However, they were still maintaining support during this time. Parents were also key supports over this time as the responsibility shifted to them to teach and stimulate their child. The parent reflects on her role in the programme as a stakeholder also providing support:

> 'Now with covid the parents also needed online support and that support has still not stopped. Parents could contact me should they need any assistance, so I was always there for them.'

'When we were receiving home programmes during the lockdown, I didn't really have time to go through his homework with him. I told them I don't have the time to do it because by the time I get home then he is half asleep. I am at work most days.'

'I explain to him that they want you to eat healthy and the reason why they need to do the things over and over is so you can learn so I try and explain that things to him. I try to be supportive in whatever they implementing at school I must also try to keep up with that at home. So, I must just be supportive in my role as a parent as well. Attend parent meetings, teachers- parent meetings and things like that.'

4.5. Conclusion

This chapter included the study findings in the form of a teacher narrative and participant vignettes, and, thereafter, discusses the themes that emerged from the data. The programme is inclusive in its approach to multilingual communication support, offering a teacher-led programme that supports the child's abilities. The committed team is key to the support being offered by the programme, where the experience, knowledge and values are demonstrated in the activities and opportunities in the centre-based programme. The following chapter will explore these emerging themes in more detail, discussing the main learning the preschool programme offers.

Chapter 5

Discussion

5.1 Overview of chapter

Chapter Five includes the discussion and final synthesis of the findings. Themes are discussed in relations to the conceptual framework developed for the study in Chapter Two. Here themes will be unpacked and explored in relation to how communication support is being offered in the programme. Thereafter, opportunities for play and peer interactions will be discussed and how the current findings fill the knowledge gap and inform SLT practice. Lastly, the study implications will be listed as well as strengths, limitations, and a conclusion for the current study.

5.2 Framing communication support for the centre-based programme

The centre-based programme values are critically important as it focuses on the child's capability in relation to supporting communication. In other words, the centre focuses on the abilities of the child and the ways in which they can build on that to develop communication. When framing communication supports, the programme draws on available resources and the environment to support early multilingual communication development (Sen, 1992; Mitra, 2006). The values are a key part of the centre's resources which translates into the ways in which the activities and opportunities are designed, and stakeholders engage in the programme to support communication. In the following section, communication supports in relation to capabilities will be discussed with specific reference to the activities and opportunities that are being created in the programme.

5.2.1 Supporting communication by valuing capabilities

SLTs traditionally engage with communication through the medical model which seeks to understand communication using a pathology lens (Smart, 2009). As part of understanding disorder, the medical model presumes a normative framing. As demonstrated in the introduction and literature review in Chapter Two, sight is assumed to be a 'normal' part of communication development (Mosca, Kritzinger, & Van der Linde, 2015). As such, the literature emphasised the need to compensate for the lack of eye gaze and joint attention needed for early communication skills (Rattay & Zeedak, 2005). Including skills required for social interaction given this normative framing (Rettig, 1994). However, the programme at LOFOB offers opportunities to support communication that challenges how children with VI/B are

typically viewed. They value the child and what they are capable of doing as stated by the teacher ‘teaching the child and not the blindness’.

In contrast to the literature, the programme specifically emphasises the child’s capabilities for communication development. The programme values the child’s capabilities to support and develop communication, engaging in opportunities that support the child’s existing abilities. Thus, creating opportunities that support the child’s communication development. In so doing, communication support is being offered in the programme which is translated into activities developed and the ways in which language is supported. In the following sections, these two themes will be unpacked in more detail.

5.2.1.1 Activities creating opportunities for communication support

Activities are developed to create opportunities for tactile and auditory sensory support, repetitions, detailed descriptions, and developing a routine. Typically, these activities and opportunities are not a significant part of communication development. Rather the focus often relies on sight in order to engage with communication caregivers and develop early communication skills (Buckley, 2003; Bryant, 2009). In contrast to this, the programme activities emphasise creating routine and repeated opportunities to support communication. Accompanied by detailed descriptions, making use of associations, ‘Nice Thembi, keep trying… Lulonke you have circle… A circle is round like a five-rand coin…’ Activities with repeated opportunities and creating routines are known to benefit children who are learning new skills, including language and communication skills (Hamilton, 2001).

Verbal descriptions were often discussed in the literature as a way to support learning and communication for children with VI/B (Hamilton, 2001). What the programme has offered is the use of associations to further strengthen their understanding during activities and support communication. In the programme, communication support often includes sensory-based activities, particularly tactile and auditory. The narrative is illustrated throughout programme activities: ‘I talk them through the puzzle every now and then but don’t get involved, it's good for them to feel and explore.’ Other sensory strategies included taste and smell: ‘During this kind of activity, we talk about taste, flavour and smell.’ The use of these sensory strategies is found to help children learn and remember, strengthening neural connections and encouraging them to build a wide range of skills, including communication skills (Smith, 2019).

Sensory strategies or Sensory Integration techniques are typically used by Occupational Therapists (OTs) to support children with sensory processing difficulties (Smith, 2019). The

purpose of these techniques is to manage over- or under-stimulation of sensory inputs in the environment. As the programme values the children's capabilities, activities that increase sensory input are used to support communication. Team-based sensory integration approaches that include both OTs and SLTs were found to benefit children who have communication difficulties and sensory related challenges (Kashman & Mora, 2002). Children were more likely to produce words, phrases and sentences, especially when stimulated by physical movement (Kashman & Mora, 2002). These types of activities are also part of the programme, '"Lulonke *hamba* (go), in… out… in and out…yay… good!" Teacher Amanda challenges Lulonke and Thembi by letting them hop on one leg in and out of the hoop.' Using language to instruct them and offer opportunities for multilingual communication support.

5.2.1.2 Multilingual communication support

During their activities the teachers draw on all available languages in the programme. The inclusion of home languages values what each child brings to the programme. The programme seeks to support language development for all the children through the practice of translanguaging. Translanguaging provides access to multiple languages spoken in the classroom which includes code-switching or code-mixing between dominant languages of teaching and mother tongue languages spoken by learners (Makalela, 2015). Translanguaging is seen as a communicative and pedagogical principle that draws on all linguistic features available to enhance classroom participation and academic engagement (Kerfoot & Simon-Vandenbergen, 2015). The programme at LOFOB, offers translanguaging is in classroom activities to enhance their participation in morning ring. As well as activities outside of the classroom as mentioned above in movement-based tasks:

> '"Lulonke what song next?" Lulonke turns her head to Thembi and starts to slowly beat on her drum "*chekeleza* (go round)…" I join in "a*maweeli amabus chekeleza* (wheels on the bus go round and round) …Hanah sing…*Die wiele van die bus draai om draai om draai om* (the wheels on the bus go round and round)…"'

South Africa's Language in Education Policy recognises and supports multilingualism in the classroom (DoE, 1999); however, the Language of Learning and Teaching (LoLT) is often English or Afrikaans (de Wet, 2002). Translanguaging pedagogies (García, et. al., 2012; García, et al., 2017), or the use of multilingual practices in the classroom, challenge these traditional monolingual ideologies indebted to racist and imperialist systems. In doing so, they recognise the existence of multiple languages in the classroom, attempting to leverage off all

linguistic features available to make meaning and learn (Kirsch, 2020). The inclusion of African languages over more dominant English or Afrikaans mediums creates equitable opportunities for children gaining access to knowledge (Kerfoot & Simon-Vandenbergen, 2015). Translangauging practices thus benefit learners whose home language does not match the LoLT and increased learning opportunities.

Translanguaging was found to be an effective strategy for supporting young children's multilingual development, along with employing interaction-promoting strategies such as responding positively when a child uses a different language, encouraging conversation and supporting multilingual language skills by introducing relevant vocabulary (Gort & Pontier, 2013). These practices align with the opportunities provided by the programme to support a multilingual communication development preschool programme. The children therefore had access to more than one language in the programme, creating opportunities that do not rely on a single language of instruction. In valuing the child's language abilities, opportunities to support communication were strengthened. Through practices of translanguaging, children drew on their own language capabilities to support language learning opportunities in the classroom.

5.2.2 Stakeholders committed to supporting all children

Valuing capabilities, activities and opportunities in the centre-based programme allow for communication support. The stakeholders are committed to supporting all the children in the programme and, in doing so, they value care and inclusion. The themes of care and inclusion are discussed in the below sections. Including concepts relating to care i.e., the Ethics of care and examples of how this is shown by the stakeholders in the programme. Following the discussion of care, inclusion and how it is being practiced in the programme by the stakeholders will be unpacked.

5.2.2.1 Skilled stakeholders who value care

The commitment and skills offered by the stakeholders strengthen the programme supports. They support families, develop relationships, and engage in quality collaborative team practices. As the literature suggests, these foundational practices were found to benefit infants and toddlers with VI (Ely & Ostrosky, 2018). The literature also highlights how skilled teachers who are culturally and linguistically diverse better meet the needs of families with young children with VI/B in diverse contexts (Dote-Kwan, Chen & Hughes, 2001). Within the context of the programme, the children benefited from the skilled and linguistically diverse

stakeholders. As they create opportunities for multilingual communication support, the teacher reflects on these opportunities in the narrative when describing the role of the social worker:'…even the ones who don't speak isiXhosa as a home language try to use isiXhosa to engage with him.'

The skilled stakeholders are informed by their own knowledge and experience. As the programme co-ordinator states her years of experience with the programme, 'I've been managing for over 10 years'. Many of the stakeholders have accumulated years of experience with the programme and are committed to their roles. A significant part of their role is committing to caring for the child with VI/B. The teaching assistant adds: 'You need to handle them with care.' The teacher values caring for children which includes listening to them and caring for them: '…children come with little stories, and you need to listen to these stories, and you need to take note because it can be them trying to tell you what is affecting them at the end of the day.'

The ethics of care views care as both a value and a practice, recognising the common humanity of both able-bodied and disabled persons (Morris, 2001). People are viewed as relational to one another instead of self-sufficient independent individuals. Highlighting the fact that dependency is a necessary part of life especially when people are young, reach old age, or inevitably become ill (Kittay, 2011). Children are dependent on the care provided by the stakeholders in the programme. Stakeholders practice care through interdependency, relationship, and responsibility (Held, 2006). As stated by the teaching assistant: 'It's a great pleasure to work with them. You feel nice because you do a good job and I'm happy with what I'm doing. It was challenging at first, but I learnt a lot with the blind children.' In doing so, they establish relationships to enable communication support in the programme. Wood (2015) highlights that care-centred values of interdependence and interconnections for early childhood programmes creates a foundation of inclusion.

5.2.2.2 Practicing inclusion to support all children in the programme

Along with skilled stakeholders who practice and value care, inclusion is a key value in supporting communication in the programme. The concept of inclusion aims to provide support to all children in educational settings which is a theme embraced by national policies in South Africa (Republic of South Africa, 2015). As such the practice of IE is core to educational policy in South Africa (Department of Education, 2001), where the children will be accessing special or inclusive schools. The stakeholders value including each child regardless of their

communication abilities or home language. Illustrated in the teacher's narrative and by the teaching assistant: '…Okay today is fine; tomorrow is fine and maybe, you know, children don't open up immediately. It takes time for them, so we have patience. When you ready, when you feel alright then we allow them to be themselves.'

While the centre-based programme focuses on establishing an inclusive environment for children with VI/B to receive support, it does not include sighted peers. The centre and its stakeholders foster attitudes of inclusion and social integration toward disability aligning with the social model of disability (Barnes, 2019). Stated by the programme co-ordinator and social worker respectively: 'I also feel very strongly about inclusion because that's where disability is and that is what we are working towards.' 'For me you know every child has the right to be included in society.' However, as the programme is solely for children with VI/B, there are limited opportunities for children to integrate amongst peers who are sighted. Peer and social interaction are a significant focus in the literature for children with VI/B (Zanandrea, 1998; D'Allura, 2002; Ozaydin, 2015). Inclusive preschool settings allow all children to co-exist in learning environments and create opportunities where all children can develop skills, including social communication (Chen & Dote-Kwan, 2021).

Zanadrea (1998) argued that when programmes are inclusive of both sighted and non-sighted peers, children become more actively engaged with tasks and learn to problem solve alongside one another. Allowing them an opportunity to socialise with their peers where they can initiate and maintain interactions especially during play activities (Ozaydin, 2015). Inclusive spaces create opportunities for children with VI/B to become integrated and promote social inclusion. Inclusive practice for children with VI/B is valuable in combating negative attitudes towards disability relating to stigma and social exclusion (Barnes, 2019). As they navigate sighted world, it is significant for children with VI/B to integrate with everyone in society. Inclusive interactions help support this integration that can create an environment that supports social communication.

In preparation for a sighted world, as well as the South African education system (Department of Education, 1999), the programme environment largely relies on structured teacher- or stakeholder-led interactions. While these interactions are inclusive of multiple languages, English is the predominant language of instruction. Sighted stakeholders provide and initiate structured activities and opportunities in the programme that supports communication. Sighted activities are used to support their communication and opportunities are provided based on

their capabilities. This includes play activities in the programme, where stakeholders lead interactions especially amidst changes in the programme environment. The stakeholders became even more involved over this time in directing communication supports.

While the programme shifted to indirect communication supports during the pandemic, initiation of play and communication between peers was infrequent upon physical return to the classroom. Safety became a priority over this time, where fewer children attended the programme and were encouraged to be distanced from one another. As illustrated in the narrative, mats being distanced and ‘hula hoops' are used to maintain distance. As such, fewer opportunities to initiate play in the classroom amongst peers are created. In a 2021 study by O’Keeffe and McNally, the impact the pandemic had on play in early childhood classrooms was investigated in Ireland. It was found that teachers struggled with play as children returned to the classroom with little support offered on how to facilitate play and learning amidst restrictions and safety protocols. Teachers in the centre-based programme naturally direct activities and play for children. However, opportunities for peers to interact with one another became reduced more so during play activities. Limiting opportunities where communication between peers can occur.

5.3 Opportunities to extend communication support

Thus far the programme values of capabilities, care and inclusion have been discussed. Specifically, how these values have been translated into practices that support communication in the programme. The literature indicated opportunities to extend communication support through play and peer interaction. The following section will discuss how using the programme values could potentially apply to play and peer interaction. Offering potential opportunities to further support communication in the preschool programme.

5.3.1 Opportunities available through play activities

Play as discussed in the introduction is a primary context for preschool children to develop essential skills, including language, communication, and social skills (Sheridan, Howard & Alderson, 2010). Play is offered in the programme within a structured teacher-led environment. As the narrative suggests, children are often being directed by the teacher to engage in specific tasks as part of the routine or schedule. The structured support from the teacher supports their ability to engage play. However, play activities are seldom child-led or without a clear goal or intention. Indicated by how the social worker facilitates play: 'Play therapy is mainly pretend,

free play that is facilitated by our social worker… The purpose being for the child to almost re-enact real life scenarios to delve deeper into social issues potentially related to the child's life.'

While children with VI/B do benefit from guidance of adults during play, it is important that children are given opportunities to explore play independently (Thommen, Ray-Kaeser & Besio, 2017). In doing so, children are given the opportunity to direct play in ways that interest them and their desires. As SLTs we know the benefits of child-directed play during intervention practices where language opportunities can be enhanced and supported (Yang, 2000). Giving children the opportunity to direct free play would be especially significant in this context where capabilities are valued. The programme activities and opportunities already value what a child with VI/B is capable of. By allowing for more child-directed play, children will be given opportunities to truly explore their own capabilities within the programme. Leading to numerous possible opportunities to extend play in ways that value their capabilities and support communication.

5.3.2 Increasing peer interaction to support communication

In the literature, play with peers is an important part of supporting their social communication development (Rettig, 1994). The programmes in the literature highlight supports during play and peer interaction where children were taught skills to help them engage with their sighted peers (D'Allura, 2002; Ozaydin, 2015). These interactions led to more inclusive peer interactions and increased play opportunities, drawing on the value of inclusion. While the programme does not include sighted peers, there is an opportunity for peers to interact more frequently between one another. Peer interactions can be extended during child-directed play, more specifically to enhance interactions between peers who have VI/B. This creates more opportunities based on their capabilities to extend play and peer interactions, allowing for increased opportunities for language and communication support.

There are opportunities for stakeholders in the programme to facilitate peer interactions throughout programme activities and opportunities. As they value inclusion, there are opportunities for all peers to interact during small group activities. Opportunities supporting multilingual communication development were often in small group settings by teacher-led activities. As the narrative includes: 'I always try to use what the children like … in our morning ring time. "Lulonke what song next?" Lulonke turns her head to Thembi and starts to slowly beat on her drum "*chekeleza* (go round)" …' Multilingual opportunities could be

extended to more opportunities for children to engage with one another. This could lead to richer and spontaneous opportunities to support multilingual communication development.

5.4 How the programme values and practices can inform SLT practice

As identified in Chapter Two, there is a gap in the literature for SLT practice with children who have VI/B. The programme provides insight that could inform our practice in general when offering communication support, more importantly, inform our practice with for children with VI/B.

5.4.1. Shifting our traditional practices to include capabilities

The programme offers an approach that challenges SLTs traditional focus on pathology. All children with VI/B are viewed as capable in relation to the available resources and environment. The shift in focus from individual pathology to what the child is capable of, allows for increased multilingual communication supports. This creates opportunities for communication supports to expand from what we traditionally understand from a pathology point of view. The pathology lens limits us to only viewing the impairment that lies with the individual and how communication is not typically developing. Whereas a capabilities lens shifts to the availability of resources and the environment that can enable communication. Thus, expanding on opportunities being made available for multilingual communication supports such as the inclusion of sensory support as part of how we design interventions for all children to enhance communication support.

As SLTs our practice is largely informed by the global north (Pillay & Kathard, 2015) whereas the practices at LOFOB support children in the global south. The practices of the programme offer insight into supporting marginalised communities. The children are offered several opportunities by a supportive group of stakeholders who adapt simple sighted activities to support their communication in the programme. This is valuable to a marginalised context where there may be a lack of available resources to directly support learning and development (Mariga, McConkey & Myezwa, 2014). Furthermore, the support of the team of stakeholders demonstrates the significance of collaborative team practices to support a child's communication development. Stakeholders emphasise how practices of communication support benefit from a team-based approach that draws on all available resources to support the child in this context.

5.4.2 Our practice with children with VI/B

As mentioned above, the programme informs our practice with children with VI/B by shifting to a capabilities approach. Valuing what the child with VI/B is capable of achieving in order to support communication development. In utilising a capabilities approach, SLTs could offer activities that include sensory supports, particularly the use of tactile and auditory supports. Communication supports could focus on creating repeated opportunities to support communication accompanied by a routine. The use of verbal descriptions could offer associations to support language and communication development. In the literature, SLTs only become involved when children with VI/B present with multiple disabilities (Chen, Klein & Minor, 2009). However, the programme demonstrates several opportunities where SLTs could support communication for all children with VI/B.

As suggested by the available literature our practice with VI/B is mainly secondary to other primary diagnosis (Chen & Dote-Kwan, 2021). The inclusive focus of the programme provides opportunities to support all children in the programme. Particularly highlighting opportunities for multilingual communication support; practices that are not currently included in the literature. In valuing capabilities and practicing inclusion, all languages are being included and supported. Furthermore, children in the programme are provided with multilingual opportunities, in group settings with their peers. Highlighting the value of peer and social interaction in supporting language development as well as social communication. While the programme does not offer many opportunities for children to interact with their peers, the literature emphasises the value of peer interaction (Zanandrea, 1998; D'Allura, 2002; Ozaydin, 2015). Children with VI/B benefit from inclusive play interactions, thus practices of inclusion could be extended to include all peers in supporting communication development. Informing our practice with some key values and practices that could serve to benefit all children with VI/B.

5.5 Implications

The current study has implications for LOFOB, the Speech-language therapy community, and for research. The following sections will discuss the implications of LOFOB's support to the children in the programme, opportunities to extend these practices to other community-based programmes, and how practices could be further enhanced to provide communication support. Thereafter, implications for the Speech-language therapy community and research will be explored.

5.5.1 LOFOB

LOFOB has established and maintained an important resource for children with VI/B in the form of the centre-based preschool programme. The programme is a key resource to community members accessing it because of how communication is being valued and supported. The programme at LOFOB could serve as a model for other programmes based at a centre in a community to offer communication support. The programme practices could serve to benefit other community-based organisations with similar resources that are currently underserved by SLTs. As discussed above, the programme could offer extended supports that include increase play and peer interaction. In order to further enhance communication supports, the programme could offer more opportunities drawing on the values of capabilities and inclusion.

5.5.2 Speech-language therapy community and research

The Speech-language therapy community would benefit from re-thinking the focus on pathology and instead focus on how all children with VI/B are capable in relation to their resources and environment. In doing so, SLTs can expand how communication supports are traditionally offered, to shift practice toward capabilities and inclusion. As discussed above this has implications for general practice while also informing our practice with children with VI/B. The current study offers guidance to communities being underserved by SLTs, especially marginalised communities with limited resources. The focus on capabilities and inclusions ensures that all the children in the programme receive communication support. Shifting to a more equitable form of practice that helps SLTs better serve groups of people. Allowing us to possibly rethink our individual-based approach and introduce practices that are better suited to serving populations. This becomes useful for serving underserved communities and marginalised groups.

The implications of the study being conducted during the pandemic should be considered in further research. Possibly re-examining programme supports post-COVID-19 lockdowns, comparing interactions of peers post pandemic. Furthermore, research could further examine groups of both sighted and non-sighted children as they interact and learn alongside one another. The experiences of children with VI/B could be explored in more detail as the current study only allowed for observations. Therefore, it would be valuable to document first-hand experiences from children with VI/B developing communication skills. This could give us a better indication of what supports help them develop communication in a sighted world.

5.6 Strengths and limitations

The current study's strengths include the use of a key informant living with VI to assist in interpreting results. Her input during the research process, enhanced the researcher's understanding of VI/B in order to interpret the study findings. Providing perspectives to help guide the researchers understanding of living with VI/B in a sighted world, and what this means in relation to communication. The study also contributes to filling a knowledge gap within the field of Speech-language therapy by informing SLT practices for children with VI/B, providing us with an opportunity to rethink how communication is being understood in relation to pathologies. In this way challenging normative framing to expand on what capabilities already exist for children with VI/B and offering SLTs insight into how children with VI/B could benefit from our services and support.

The study is limited to the researcher's experience as a novice researcher with the case study methodology. The researcher struggled to shift the focus to communication supports in order to create a framework representative of communication support for children with VI/B. They could have foregrounded historical and political issues related to the South African context to highlight how these issues impact on our SLT practice in South Africa. However, the research focusses on informing our knowledge gap as SLTs for children with VI/B. While VI/B is a new area of research to the researcher, other limitations of the study relate to the experiences of predominantly sighted individuals included in the study. Their experiences are limited to working and supporting children with VI/B. More insight from families and caregivers of VI/B children could have been included in the study to further integrate their role as stakeholders.

5.7 Conclusion

The current study concluded that the centre-based preschool programme supports early multilingual communication development by valuing capabilities. The programme's approach values the child's capabilities and creates opportunities to support the child's full communication potential. Practices are shaped by the values, knowledge and skills of the stakeholders involved in the programme where communication supports are being offered in a supportive environment. The study's findings have implications for SLT practice to shift its views from individual pathologies to focus on possible capabilities. In doing so, there is opportunity for SLTs to support communication for all children with VI/B.

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Appendix 1

The Faculty of Health Sciences Human Research Ethics Committee (HREC) approval

UNIVERSITY OF CAPE TOWN
Faculty of Health Sciences
Human Research Ethics Committee

Room G50- Old Main Building
Groote Schuur Hospital
Observatory 7925
Telephone [021] 406 6492
Email: hrec-enquiries@uct.ac.za
Website: www.health.uct.ac.za/fhs/research/humanethics/forms

24 February 2020

HREC REF: 849/2019

Prof H Kathard
Division of Communication Sciences & Disorders
Health & Rehab, F45
OMB

Dear Prof Kathard

PROJECT TITLE: A CASE STUDY OF A CENTRE – BASED PRESCHOOL PROGRAMME SUPPORTING EARLY MULTILINGUAL COMMUNICATION DEVELOPMENT OF CHILDREN WHO ARE BLIND/VISUALLY IMPAIRED (MSC DEGREE - MS LAYLA KAMEDIEN)

Thank you for your response letter dated 11 February 2020, addressing the issues raised by the Faculty of Health Sciences Human Research Ethics Committee (HREC).

It is a pleasure to inform you that the HREC has **formally approved** the above-mentioned study.

Approval is granted for one year until the 28 February 2021

Please submit a progress form, using the standardised Annual Report Form if the study continues beyond the approval period. Please submit a Standard Closure form if the study is completed within the approval period.
(Forms can be found on our website: www.health.uct.ac.za/fhs/research/humanethics/forms)

The HREC acknowledge that the student: - Ms Layla Kamedien will also be involved in this study.

Please quote the HREC REF in all your correspondence.

Please note that the ongoing ethical conduct of the study remains the responsibility of the principal investigator.

Please note that for all studies approved by the HREC, the principal investigator **must** obtain appropriate institutional approval, where necessary, before the research may occur.

Yours sincerely

PROFESSOR M BLOCKMAN
CHAIRPERSON, FHS HUMAN RESEARCH ETHICS COMMITTEE

Federal Wide Assurance Number: FWA00001637.

HREC 849/2019a

Appendix 2

Organisational consent

Organisational consent for a study documenting the practices of the early childhood programme at LOFOB

Dear Sir/Madam

I am currently a master's student conducting research in the Division of Communication Sciences and Disorders at the University of Cape Town. The current study aims to understand how children with visual impairments/blindness communication are being supported in an early childhood programme at LOFOB. Looking particularly at describing the practices of the programme and how it enables multilingual learning for this popalation.

My research proposal has been approved by the Faculty of Health Sciences, Human Research Ethics Committee - study approval number is REF: 849/2019. As stated in my proposal I would like to obtain formal consent from the organisation to conduct research activities. These activities will include classroom observations, semi-structured interviews, focus groups (if need be) and reviewing of relevant documents pertaining to the preschool programme at LOFOB.

Thank you for your time and consideration.

Yours faithfully,
Layla Kamedien
(Kmdlay001@myuct.ac.za, 0795617758)

Should you have any questions, please do not hesitate to contact me at the above details or my supervisor Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w) 021 406 6401

Please sign indicating consent from the organisation to conduct research activities.

Name/title/role: SHAHIEMAH EDWARDS DIRECTOR: OPERATIONS signature: Edwards

Organisation stamp:

LEAGUE OF FRIENDS OF
THE BLIND
P.O. BOX 31010
GRASSY PARK 7888
TEL (021) 705-3753

Appendix 3A

Participant consent form

Information letter/Consent form for semi-structured interviews (teachers, teacher assistants and social worker)

Dear Sir/Madam

Participation in a study documenting the practices of the early childhood programme at LOFOB

I am currently a master's student conducting research in the Division of Communication Sciences and Disorders at the University of Cape Town.

Why is the research being done?

Communication is a crucial part of early childhood development. Speech-language therapists work towards supporting communication development and providing intervention for populations at risk for impaired communication development. The current study aims to understand how children with visual impairments/blindness communication are being supported in an early childhood programme at LOFOB. Looking particularly at describing the practices of the programme and how it enables multilingual learning for this population.

What is the purpose of the research?

In order for the profession of speech-language therapy to better understand the needs of children with visual impairments/blindness, we need to understand the current practices that are shaping their early communication learning. The current study therefore aims to explore and describe (1) The knowledge, underpinning values and the principles that inform the programme, (2) The skills required to implement the program, (3) Activities included in the curricula to support and monitor communication and multilingual learning, and the (4) Opportunities available for communication development and multilingual learning.

Why are you being invited? What is expected of you?

As a key role player of the early childhood programme, with experience working with the children, you are hereby invited to participate in this study in which you will be **interviewed** to further understand your experience of the early childhood programme at LOFOB. A suitable date, time and location will be arranged with you personally at your convenience. I anticipate that it will take you approximately 30 to 60 minutes. The interview will be audio-recorded and transcribed by a research assistant. Following the interview, you will be provided with the transcribed interview for you to determine if the information recorded was accurate. A follow-

up interview may be required to clarify information or to further explore certain topics discussed.

My research proposal has been approved by the Faculty of Health Sciences, Human Research Ethics Committee - study approval number is XXX.

Risks and benefits…

Participation in this study will not benefit you directly nor cause you harm in any way. Through engaging with the data collection process, you may become more aware of the role you play in the early childhood programme at LOFOB. Thus, bringing deeper insight and understanding to your contribution to the early childhood programme.

Privacy and confidentiality…

In terms of confidentiality, codes will be used to ensure that you are not personally identifiable. If research assistants are used, they will be asked to sign a consent form, which ensures that they will respect the confidentiality of all participants. Confidentiality will also be protected by not revealing anything leant to other participants or community members. I will not identify you in any publication of the study, however the name of the institution will be included in the final publication.

It should be noted that complete privacy and confidentiality cannot be ensured. Through reading the findings of the study, participants may be identifiable through contextual information such as the description of the programme and name of a site.

What are your rights as a participant?

Participation in this study is voluntary and you may withdraw from this study at any time, without penalty and without having to give a reason for doing so. All interview material you provided will be discarded. If you would like to receive a copy of the results of the study, your contact details will be kept to inform you of the results.

Thank you for your time and consideration.

Yours faithfully,

Layla Kamedien

(Kmdlay001@myuct.ac.za, 0795617758)

Should you have any questions, please do not hesitate to contact me at the above details or my supervisor Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w) 021 406 6401

Please sign the consent form indicating your wish to participate in the study.

Consent form

I, _____ (*full name in print*) have read the information letter and understand my rights as a research participant. I give permission to the researcher to interview me about my experiences related to early childhood programme at LOFOB. I also give permission for the interview to be audio-recorded. I have had an opportunity to ask questions and have these answered. I am aware that I may withdraw from the study at any time if I so wish, without having to provide an explanation. I understand that I can contact the researcher to inform her of my withdrawal from the study. Withdrawal from the study will have no negative implications for me. I voluntarily consent to participate in this study.

Participant's Signature: _____ Date: _____

Researcher's Signature: _____ Date: _____

Would you like to be informed of the results of the study? Circle. YES/NO

If yes, provide email address:

_____

Should you have any questions please do not hesitate to contact me or my supervisor:

Layla Kamedien: Kmdlay001@myuct.ac.za (0795617758)

Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w): (021) 406 6401 65

Information letter/Consent form for semi-structured interviews (Organisation co-ordinators, programme co-ordinators and NGOs/ community workers)

Dear Sir/Madam

Participation in a study documenting the practices of the early childhood programme at LOFOB

I am currently a master's student conducting research in the Division of Communication Sciences and Disorders at the University of Cape Town.

Why is the research being done?

Communication is a crucial part of early childhood development. Speech-language therapists work towards supporting communication development and providing intervention for populations at risk for impaired communication development. The current study aims to understand how children with visual impairments/blindness communication are being supported in an early childhood programme at LOFOB. Looking particularly at describing the practices of the programme and how it enables multilingual learning for this population.

What is the purpose of the research?

In order for the profession of speech-language therapy to better understand the needs of children with visual impairments/blindness, we need to understand the current practices that are shaping their early communication learning. The current study therefore aims to explore and describe (1) The knowledge, underpinning values and the principles that inform the programme, (2) The skills required to implement the program, (3) Activities included in the curricula to support and monitor communication and multilingual learning, and the (4) Opportunities available for communication development and multilingual learning.

Why are you being invited? What is expected of you?

As a key role player of the early childhood programme, with an understanding of the programme and how it is implemented, you are hereby invited to participate in this study in which you will be **interviewed** to further understand your experience of the early childhood programme at LOFOB. A suitable date, time and location will be arranged with you personally at your convenience. I anticipate that it will take you approximately 30 to 60 minutes. The interview will be audio-recorded and transcribed by a research assistant. Following the interview, you will be provided with the transcribed interview for you to determine if the information recorded was accurate. A follow-up interview may be required to clarify information or to further explore certain topics discussed.

My research proposal has been approved by the Faculty of Health Sciences, Human Research Ethics Committee - study approval number is XXX.

Risks and benefits…

Participation in this study will not benefit you directly nor cause you harm in any way. Through engaging with the data collection process, you may become more aware of the role you play in the early childhood programme at LOFOB. Thus, bringing deeper insight and understanding to your contribution to the early childhood programme.

Privacy and confidentiality…

In terms of confidentiality, codes will be used to ensure that you are not personally identifiable. If research assistants are used, they will be asked to sign a consent form, which ensures that they will respect the confidentiality of all participants. Confidentiality will also be protected by not revealing anything leant to other participants or community members. I will not identify you in any publication of the study, however the name of the institution will be included in the final publication.

It should be noted that complete privacy and confidentiality cannot be ensured. Through reading the findings of the study, participants may be identifiable through contextual information such as the description of the programme and name of a site.

What are your rights as a participant?

Participation in this study is voluntary and you may withdraw from this study at any time, without penalty and without having to give a reason for doing so. All interview material you provided will be discarded. If you would like to receive a copy of the results of the study, your contact details will be kept to inform you of the results.

Thank you for your time and consideration.

Yours faithfully,

Layla Kamedien

(Kmdlay001@myuct.ac.za, 0795617758)

Should you have any questions, please do not hesitate to contact me at the above details or my supervisor Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w) 021 406 6401

Please sign the consent form indicating your wish to participate in the study.

Consent form

I, _____ (*full name in print*) have read the information letter and understand my rights as a research participant. I give permission to the researcher to interview me about my experiences related to early childhood programme at LOFOB. I also give permission for the interview to be audio-recorded. I have had an opportunity to ask questions and have these answered. I am aware that I may withdraw from the study at any time if I so wish, without having to provide an explanation. I understand that I can contact the researcher to inform her of my withdrawal from the study. Withdrawal from the study will have no negative implications for me. I voluntarily consent to participate in this study.

Participant's Signature: _____ Date: _____

Researcher's Signature: _____ Date: _____

Would you like to be informed of the results of the study? Circle. YES/NO

If yes, provide email address:

_____

Should you have any questions please do not hesitate to contact me or my supervisor:

Layla Kamedien: Kmdlay001@myuct.ac.za (0795617758)

Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w): (021) 406 6401 65

Information letter/Consent form for classroom observations (teachers)

Dear Sir/Madam

Participation in a study documenting the practices of the early childhood programme at LOFOB

I am currently a master's student conducting research in the Division of Communication Sciences and Disorders at the University of Cape Town.

Why is the research being done?

Communication is a crucial part of early childhood development. Speech-language therapists work towards supporting communication development and providing intervention for populations at risk for impaired communication development. The current study aims to understand how children with visual impairments/blindness communication are being supported in an early childhood programme at LOFOB. Looking particularly at describing the practices of the programme and how it enables multilingual learning for this population.

What is the purpose of the research?

In order for the profession of speech-language therapy to better understand the needs of children with visual impairments/blindness, we need to understand the current practices that are shaping their early communication learning. The current study therefore aims to explore and describe (1) The knowledge, underpinning values and the principles that inform the programme, (2) The skills required to implement the program, (3) Activities included in the curricula to support and monitor communication and multilingual learning, and the (4) Opportunities available for communication development and multilingual learning.

Why are you being invited? What is expected of you?

As a key role player of the early childhood programme, with experience working with the children, you are hereby invited to participate in this study in which your class will be **observed** to further understand your experience of the early childhood programme at LOFOB. A suitable date, time and location will be arranged for the classroom observation. I anticipate that it will take approximately 1 hour to complete a single observation which will be recurring over time of the data collection period (approximately 6 weeks). You will be expected to run your routine activities while being observed within the context of the classroom. An observation tool and field notes will be used to capture data accordingly.

My research proposal has been approved by the Faculty of Health Sciences, Human Research Ethics Committee - study approval number is XXX.

Risks and benefits…

Participation in this study will not benefit you directly nor cause you harm in any way. Through engaging with the data collection process, you may become more aware of the role you play in the early childhood programme at LOFOB. Thus, bringing deeper insight and understanding to your contribution to the early childhood programme.

Privacy and confidentiality…

In terms of confidentiality, codes will be used to ensure that you are not personally identifiable. If research assistants are used, they will be asked to sign a consent form, which ensures that they will respect the confidentiality of all participants. Confidentiality will also be protected by not revealing anything leant to other participants or community members. I will not identify you in any publication of the study, however the name of the institution will be included in the final publication.

It should be noted that complete privacy and confidentiality cannot be ensured. Through reading the findings of the study, participants may be identifiable through contextual information such as the description of the programme and name of a site.

What are your rights as a participant?

Participation in this study is voluntary and you may withdraw from this study at any time, without penalty and without having to give a reason for doing so. All interview material you provided will be discarded. If you would like to receive a copy of the results of the study, your contact details will be kept to inform you of the results.

Thank you for your time and consideration.

Yours faithfully,

Layla Kamedien

(Kmdlay001@myuct.ac.za, 0795617758)

Should you have any questions, please do not hesitate to contact me at the above details or my supervisor Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w) 021 406 6401

Please sign the consent form indicating your wish to participate in the study.

Consent form

I, _____ (*full name in print*) have read the information letter and understand my rights as a research participant. I give permission to the researcher to observe me during classroom sessions at the early childhood programme at LOFOB. I have had an opportunity to ask questions and have these answered. I am aware that I may withdraw from the study at any time if I so wish, without having to provide an explanation. I understand that I can contact the researcher to inform her of my withdrawal from the study. Withdrawal from the study will have no negative implications for me. I voluntarily consent to participate in this study.

Participant's Signature: _____ Date: _____

Researcher's Signature: _____ Date: _____

Would you like to be informed of the results of the study? Circle. YES/NO

If yes, provide email address:

_____

Should you have any questions please do not hesitate to contact me or my supervisor:

Layla Kamedien: Kmdlay001@myuct.ac.za (0795617758)

Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w): (021) 406 6401 65

Information letter/Consent form for semi-structured interviews (Parent/caregiver)

Participation in a study documenting the practices of the early childhood programme at LOFOB

Dear Sir/Madam

I am currently a master's student conducting research in the Division of Communication Sciences and Disorders at the University of Cape Town.

Why is the research being done?
Communication is a crucial part of early childhood development. Speech-language therapists work towards supporting communication development and providing intervention for populations at risk for impaired communication development. The current study aims to understand how children with visual impairments/blindness communication are being supported in an early childhood programme at LOFOB. Looking particularly at describing the practices of the programme and how it enables multilingual learning for this population.

What is the purpose of the research?
In order for the profession of speech-language therapy to better understand the needs of children with visual impairments/blindness, we need to understand the current practices that are shaping their early communication learning. The current study therefore aims to explore and describe (1) The knowledge, underpinning values and the principles that inform the programme, (2) The skills required to implement the program, (3) Activities included in the curricula to support and monitor communication and multilingual learning, and the (4) Opportunities available for communication development and multilingual learning.

Why are you being invited? What is expected of you?
As a key role player of the early childhood programme and parent/caregiver of a child attending the programme, you are hereby invited to participate in this study in which you will be **interviewed** to further understand your experience of the early childhood programme at LOFOB. A suitable date, time and location will be arranged with you personally at your convenience. I anticipate that it will take you approximately 30 to 60 minutes. The interview will be audio-recorded and transcribed by the researcher. A follow-up interview may be required to clarify information or to further explore certain topics discussed.
My research proposal has been approved by the Faculty of Health Sciences, Human Research Ethics Committee - study approval number is REF: 849/2019.

Risks and benefits…
Participation in this study will not benefit you directly nor cause you harm in any way. Through engaging with the data collection process, you may become more aware of the role you play in the early childhood programme at LOFOB. Thus, bringing deeper insight and understanding to your contribution to the early childhood programme.

Privacy and confidentiality…

In terms of confidentiality, codes will be used to ensure that you are not personally identifiable. If research assistants are used, they will be asked to sign a consent form, which ensures that they will respect the confidentiality of all participants. Confidentiality will also be protected by not revealing anything leant to other participants or community members. I will not identify you in any publication of the study, however the name of the institution will be included in the final publication.
It should be noted that complete privacy and confidentiality cannot be ensured. Through reading the findings of the study, participants may be identifiable through contextual information such as the description of the programme and name of a site.

What are your rights as a participant?
Participation in this study is voluntary and you may withdraw from this study at any time, without penalty and without having to give a reason for doing so. All interview material you provided will be discarded. If you would like to receive a copy of the results of the study, your contact details will be kept to inform you of the results.

Thank you for your time and consideration.

Yours faithfully,
Layla Kamedien
(Kmdlay001@myuct.ac.za, 0795617758)

Should you have any questions, please do not hesitate to contact me at the above details or my supervisor Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w) 021 406 6401
Please sign the consent form indicating your wish to participate in the study.

Consent form

I, _____ (*full name in print*) have read the information letter and understand my rights as a research participant. I give permission to the researcher to interview me about my experiences related to early childhood programme at LOFOB. I also give permission for the interview to be audio-recorded. I have had an opportunity to ask questions and have these answered. I am aware that I may withdraw from the study at any time if I so wish, without having to provide an explanation. I understand that I can contact the researcher to inform her of my withdrawal from the study. Withdrawal from the study will have no negative implications for me. I voluntarily consent to participate in this study.

Participant's Signature: _____ Date: _____
Researcher's Signature: _____ Date: _____

Would you like to be informed of the results of the study? Circle. YES/NO
If yes, provide email address: _____

Should you have any questions please do not hesitate to contact me or my supervisor:

Layla Kamedien: Kmdlay001@myuct.ac.za (0795617758)

Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w): (021) 406 6401 65

Appendix 3B

Caregiver consent form

Information letter/Consent form for classroom observations (parents/caregivers)

Dear Sir/Madam

Participation in a study documenting the practices of the early childhood programme at LOFOB

I am currently a master's student conducting research in the Division of Communication Sciences and Disorders at the University of Cape Town.

Why is the research being done?

Communication is a crucial part of early childhood development. Speech-language therapists work towards supporting communication development and providing intervention for populations at risk for impaired communication development. The current study aims to understand how children with visual impairments/blindness communication are being supported in an early childhood programme at LOFOB. Looking particularly at describing the practices of the programme and how it enables multilingual learning for this population.

What is the purpose of the research?

In order for the profession of speech-language therapy to better understand the needs of children with visual impairments/blindness, we need to understand the current practices that are shaping their early communication learning. The current study therefore aims to explore and describe (1) The knowledge, underpinning values and the principles that inform the programme, (2) The skills required to implement the program, (3) Activities included in the curricula to support and monitor communication and multilingual learning, and the (4) Opportunities available for communication development and multilingual learning.

Why are you being invited? What is expected of you?

As your child is currently part of the preschool early childhood programme, you are hereby invited to consent their participation in this study in where they will be **observed** in the classroom setting to further understand the practices of the early childhood programme at LOFOB. A suitable date, time and location will be arranged will be arranged with LOFOB. I anticipate that it will take approximately 1 hour to complete a single observation which will be recurring over time of the data collection period (approximately 6 weeks). An observation tool and field notes will be used to capture data accordingly.

My research proposal has been approved by the Faculty of Health Sciences, Human Research Ethics Committee - study approval number is XXX.

Risks and benefits…

Participation in this study will not benefit your child directly nor cause them harm in any way. By participating in this study your child will be observed by a qualified speech-language therapist who may identify areas of potential therapeutic intervention. Through observations the researcher will be able to gain a better understanding of how to provide communication intervention for children with visual impairments/blindness.

Privacy and confidentiality…

In terms of confidentiality, codes will be used to ensure that no one is personally identifiable. If research assistants are used, they will be asked to sign a consent form, which ensures that they will respect the confidentiality of all participants in the classroom being observed. I will not identify your child in any publication of the study, however the name of the institution will be included in the final publication.

It should be noted that complete privacy and confidentiality cannot be ensured. Through reading the findings of the study, participants may be identifiable through contextual information such as the description of the programme and name of a site.

What are your rights as a parent/caregiver consenting on behalf of your child?

Participation in this study is voluntary and you may withdraw your child from this study at any time, without penalty and without having to give a reason for doing so. All material provided will be discarded. If you would like to receive a copy of the results of the study, your contact details will be kept to inform you of the results.

Thank you for your time and consideration.

Yours faithfully,

Layla Kamedien

(Kmdlay001@myuct.ac.za, 0795617758)

Should you have any questions, please do not hesitate to contact me at the above details or my supervisor Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w) 021 406 6401

Please sign the consent form indicating your wish for your child to participate in the study.

Consent form

I, _____ (*full name in print*) have read the information letter and understand my rights a parent/caregiver consenting on behalf of my child as a research participant. I give permission to the researcher to observe experiences related to early childhood programme at LOFOB in my child's classroom. I have had an opportunity to ask questions and have these answered. I am aware that I may withdraw from the study at any time if I so wish, without having to provide an explanation. I understand that I can contact the researcher to inform her of my withdrawal from the study. Withdrawal from the study will have no negative implications for me or my child. I voluntarily consent for my child to participate in this study.

Parent/caregiver's Signature: _____ Date: _____

Researcher's Signature: _____ Date: _____

Would you like to be informed of the results of the study? Circle. YES/NO

If yes, provide email address:

_____

Should you have any questions please do not hesitate to contact me or my supervisor:

Layla Kamedien: Kmdlay001@myuct.ac.za (0795617758)

Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w): (021) 406 6401 65

Appendix 3C

Translated consent form in isiXhosa

Ileta yolwazi / ifom yemvume yokujonga eklasini

(Abazali / abagcini babantwana)

Mnumzane / Nkosikazi Ebekekileyo

Ukuthatha inxaxheba kuphando lokubhala okwenziwa kwenkqubo yobuntwana kwase-LOFOB

Njengangoku ndingumfundi ophambili owenza uphando kwiCandelo leNzululwazi zoNxibelelwano kunye neNxaki kwiDyunivesithi yaseKapa

Kutheni le nto kwenziwa uphando?

Unxibelelwano yinto ebaluleke kakhulu kuphuhliso lwabantwana abancinci. Iingcali ezisebenzisa ulwimi nokuthetha zisebenzela ukuxhasa uphuhliso lonxibelelwano kunye nokubonelela ngongenelelo lwabantu abasengozini yokuphuhliswa konxibelelwano olungalunganga. Isifundo esikhoyo sijongise ekuqondeni ukuba abantwana abanengxaki yokubona / ukunxibelelana nokungaboni baxhaswa njani kwinkqubo yabantwana abancinci e-LOFOB. Ukujonga ikakhulu ekuchazeni iinkqubo zenkqubo kunye nendlela ekuvumela ngayo ukuba kufundwe iilwimi ezininzi kuluntu.

Yintoni injongo yophando?

Ukuze ubuchule kunyango lolwimi nokuthetha luqonde ngcono iimfuno zabantwana abanengxaki yokubona / ukungaboni, kufuneka siqonde izinto ezikhoyo ezithi ziqulathe ukufunda kwabo kunxibelelwano kwangoko. Isifundo esikhoyo ngoku sijolise ekuphononongeni nasekuchazeni (1) Ulwazi, iinqobo ezisisiseko kunye nemithetho-siseko eyazisa le nkqubo, (2) Izakhono ezifunekayo ukuphumeza inkqubo, (3) Izinto ezibandakanyiweyo kwikharityhulamu yokuxhasa nokubeka iliso kunxibelelwano kunye ukufunda iilwimi ezininzi, kunye (4) namathuba afumanekayo ophuhliso lonxibelelwano kunye nokufunda iilwimi ezininzi.

Kutheni umenyiwe? Yintoni elindelekileyo kuwe?

Njengomntwana wakho okwangoku njengenxalenye yenkqubo yesikolo sabantwana abasaqalayo, uyacelwa ukuba uvume inxaxheba yabo kolu phando apho baya kujongwa khona kwigumbi lokufundela ukuze baqonde ngakumbi iinkqubo zenkqubo yobuntwana yase-LOFOB. Umhla ofanelekileyo, ixesha kunye nendawo ziya kulungiswa kunye ne-LOFOB. Ndilindele ukuba kuya kuthatha malunga neyure enye ukugqiba ukubonwa okukodwa okuya kubakho rhoqo kwixesha lokuqokelelwa kwedatha (malunga neeveki ezi-6). Isixhobo sokujonga kunye neenqaku zensimu ziya kusetyenziselwa ukufaka idatha ngokufanelekileyo.

Isindululo sophando sam sivunyiwe liCandelo lezeNzululwazi ngezeMpilo, iKomiti yezeMpilo yoPhando lwaBantu-inombolo yokuvunywa kwesifundo ngu-849.

Ingozi kunye nezibonelelo…

Ukuthatha inxaxheba kolu phando aluyi kumnceda umntwana wakho ngqo okanye kumonzakalise nangayiphi na indlela. Ngokuthatha inxaxheba kolu phando umntwana wakho uya kujongwa ngugqirha ofanelekileyo wolwimi olunokuchonga iindawo ezinokuthi zingenelele kunyango. Ngokujonga okuphengululiyo umphandi uya kuba nakho ukuqonda ngcono indlela yokubonelela ngongenelelo ngonxibelelwano lwabantwana abanengxaki yokubona / ukungaboni.

Imfihlo kunye nokugcinwa kwemfihlo ...

Malunga nokugcinwa kwemfihlo, iikhowudi ziya kusetyenziswa ukuqinisekisa ukuba akukho mntu uphawula ukuba ngubani. Ukuba kusetyenziswa abancedisi bophando, baya kucelwa ukuba batyikitye iphepha yokuvuma, neya kuqinisekisa ukuba bayakuhlonipha ukugcinwa kwemfihlo kwabo bonke abathathi-nxaxheba kwigumbi lokufundela elibonwayo. Andizukuchonga umntwana wakho kulo naluphi na upapasho lofundo, nangona kunjalo igama leziko liya kubandakanywa kupapasho lokugqibela.

Kufuneka kuqatshelwe ukuba imfihlo epheleleyo kunye nokugcinwa kwemfihlo akunakuqinisekiswa. Ngokufunda okufunyenweyo kuphando, abathathi-nxaxheba banokuchongwa ngolwazi olunembeko enje ngenkcazo yenkqubo kunye negama lendawo.

Athini amalungelo akho njengomzali / umnakekeli wokuvuma egameni lomntwana wakho?

Ukuthatha inxaxheba kolu phando kukuzithandela kwaye ungamrhoxisa umntwana wakho kwesi sifundo nangeliphi na ixesha, ngaphandle kwesigwebo kwaye ungakhange unike sizathu sokwenza oko. Zonke izinto ezibonelelweyo ziya kulahlwa. Ukuba ungathanda ukufumana iphepha leziphumo zophononongo, iinkcukacha zonxibelelwano ziya kugcinwa ukukwazisa ngeziphumo.

Enkosi ngexesha lakho kunye nengqwalaselo.

Owenu othembekileyo,

U-Layla Kamedien

(Kmdlay001@myuct.ac.za, 0795617758)

Ukuba unemibuzo, nceda ungathandabuzi ukuqhakamshelana nam kwezi nkcukacha zingentla okanye umphathi wam uProf. Harsha Kathard: harsha.kathard@uct.ac.za (w) 021 406 6401

Nceda usayine iphepha yemvume ebonisa ukuba unqwenela ukuba umntwana wakho athathe inxaxheba koluphando.

---------- ---------- ----------

Ifom yemvume

Mna, _____ (igama elipheleleyo eliprintiweyo) ndiyifundile ileta yolwazi kwaye ndiyawaqonda amalungelo wam njengo mzali / umnakekeli ovumayo egameni lomntwana wam njengomthathi-nxaxheba koluphando. Ndinika imvume kumphandi ukuba abukele amava anxulumene nenkqubo yobuntwana kwasekuqaleni eLOFOB kwigumbi lokufundela lomntwana wam. Ndifumene ithuba lokubuza imibuzo kwaye yaphendulwa. Ndiyazi ukuba ndingarhoxa esifundweni ngalo naliphi na ixesha ukuba ndinqwenela, ngaphandle kokuchaza. Ndiyaqonda ukuba ndinganxibelelana nomphandi ukuba amazise ngokurhoxa kwam esifundweni. Ukurhoxa esifundweni akuyi kuba neempembelelo ezimbi kum okanye kumntwana wam. Ndiyavuma ngokuzithandela ukuba umntwana wam athathe inxaxheba kolu phando.

Ukutyikitya komzali / umnakekeli: _____

Umhla: _____

Ukutyikitya komphandi: _____ Umhla: _____

Ngaba ungathanda ukwaziswa ngeziphumo zophando? Bhala isangqa ku. EWE /HAYI

Ukuba ewe, nikezela ngedilesi ye-imeyile:

_____

Ukuba unayo nayiphi na imibuzo nceda ungathandabuzi ukuqhakamshelana nam okanye umphathi wam:

U-Layla Kamedien: Kmdlay001@myuct.ac.za (0795617758)

Prof. Harsha Kathard: harsha.kathard@uct.ac.za (w): (021) 406 6401 65

Appendix 4A

Interview schedule

Semi- structured interview questions (staff)

OPENING

Establishing rapport – Introductions

Purpose – Why do I want to conduct the interview?

Scope of the interview – What will be discussed in the interview?

Timeline – length of the interview

Confidentiality – Information will be recorded for transcription and analysis.

[Providing of the information letter and consent forms]

We can start with some general questions about yourself.

Demographic questions

- age, education/training, position, level of experience

QUESTIONS FOR INTERVIEWS

How would you describe the pre-school early childhood programme at LOFOB?

What do you think informs these practices?

How do you go about facilitating communication development in the programme?

What type of activities are included in the classroom?

How is multilingualism supported in the classroom?

What opportunities facilitate communication development and multilingual learning?

Describe your role in the early childhood programme.

Who else plays a role in the running of the early childhood programme?

What has allowed for the successful running of the programme?

Impact of covid19 on the classroom environment?

How has your programme changed due to the new protocols?

How you think this has impacted the children?

CONCLUSION

Summary of discussion

Maintenance of rapport – Thanking for contribution. Anything else would like to add?

Follow up – Any other follow up questions.

How to contact.

Thanks.

Appendix 4B

Interview schedule

Semi- structured interview questions (parent)

OPENING

Establishing rapport – Introductions

Purpose – Why do I want to conduct the interview?

Scope of the interview – What will be discussed in the interview?

Timeline – length of the interview

Confidentiality – Information will be recorded for transcription and analysis.

[Providing of the information letter and consent forms]

We can start with some general questions about yourself.

Demographic questions

- Where you currently reside, other children, employment, home environment

QUESTIONS FOR INTERVIEWS

How would you describe the pre-school early childhood programme at LOFOB?

What are your thoughts on how the programme is run- organised/ structured/informative?

How do you think your child's communication development is supported in the programme?

What type of activities are included in the classroom?

How is multilingualism supported in the classroom?

What opportunities facilitate communication development and multilingual learning?

Describe your role in the early childhood programme.

Who else plays a role in the running of the early childhood programme?

What has allowed for the successful running of the programme?

Impact of covid19 on the classroom environment?

How has the programme changed due to the new protocols?

How do you think this has impacted your child?

CONCLUSION

Summary of discussion

Maintenance of rapport – Thanking for contribution. Anything else would like to add?

Follow up – Any other follow up questions.

How to contact.

Thanks.

Appendix 5

Observation tool

2012
BETTER
COMMUNICATION
RESEARCH
PROGRAMME

Developed by CsC Team:
Dockrell, J. E., Bakopoulou, I., Law, J., Spencer, S. & Lindsay, G.

Communication Supporting Classroom Observation Tool

The Communication Trust
Every child understood

2012
BETTER COMMUNICATION RESEARCH PROGRAMME

School .....

Date ..... Start time ..... Finish time .....

Completed by ..... Class ..... No of pupils .....

Overview of the Communication Supporting Classrooms Observation Tool

This tool was developed as part of the Better Communication Research Programme (BCRP) in 2012. The BCRP was a 3 year research programme that was part of the Government's response to the 2008 Bercow Review of provision of services for children with speech, language and communication needs (SLCN).

The Communication Trust are supporting the BCRP to share their findings.

Information about the tool:

- The observation tool is designed to be used in an observation of a classroom or a learning space by someone other than the adult working with the children.
- The observation tool can be used in Reception, Year 1 and Year 2 classrooms and other Early years learning spaces.
- The average length of time necessary to collect a representative sample of behaviour is approximately one hour. Some of the items of the first dimension (Language Learning Environment) can be done during break time or prior to the start of the school day.
- It is recommended that the observation takes place during a regular classroom session (usually a morning session starting with the class register).
- The language learning dimensions are recorded as either present or absent. For some items, there is a record of a Language Learning Opportunity being 'Present' and being 'Used during the Observation'.
- For the dimensions of 'Language Learning Opportunities' and 'Language Learning Interactions', each different occurrence is recorded up to a maximum of 5 times during the observation period. Each recorded observation is a new/ different occurrence of the behaviour/ activity.
- There is space when recording language learning interactions to note which staff use specific ways of talking with the children.

The tool is designed to profile the oral language environment of the classroom. It is not expected that all items will appear on all observations.

The Communication Trust
Every child understood

Language Learning Environment This dimension involves the physical environment and learning context				
		Not Seen	**Observed**	**Comments**
1	The classroom is organised to emphasise open space.			
2	Learning areas are clearly defined throughout the classroom.			
3	Learning areas are clearly labelled with pictures/words throughout the classroom.			
4	Space for privacy/quiet areas where children can retreat to have 'down time' or engage in smaller group activities. These areas are less visually distracting.			
5	Children's own work is displayed and labelled appropriately.			
6	Some classroom displays include items that invite comments from children.			
7	Book specific areas are available.			
8	Literacy specific areas are available.			
9	Background noise levels are managed consistently throughout the observation, and children and adults are able to hear one another with ease.			
10	Transition times are managed effectively, so that noise levels are not excessive and children know what to expect next.			

11	There is good light.				
12	The majority of learning resources and materials are labelled with pictures/words.				
13	Resources that are available for free play are easily reached by the children or easily within their line of vision.				
14	An appropriate range of books is available in the book area (e.g, traditional stories, bilingual/dual language books and a variety of genres and books related to children's own experiences).				
15	Non-fiction books, books on specific topics or interests of the children are also available in other learning areas.				
16	Outdoor play (if available) includes imaginative role play.				
17	Good quality toys, small world objects and real/natural resources are available.		Present:	Used:	
18	Musical instruments and noise makers are available.		Present:	Used:	
19	Role play area is available.		Present:	Used:	
Total Score	**/19 Notes:**				

Language Learning Opportunities This dimension involves the structured opportunities that are present in the classroom to support language development								
		Not Seen	**Observed (5 times)**					**Comments**
1	Small group work facilitated by an adult takes place.							
2	Children have opportunities to engage in interactive book reading facilitated by an adult (for example: asking predictive questions, joining in with repetitions, story packs etc.).							
3	Children have opportunities to engage in structured conversations with teachers and other adults.							
4	Children have opportunities to engage in structured conversations with peers (Talking partners).							
5	Attempts are made to actively include all children in small group activities.							
Total Score	**/25 Notes:**							

Language Learning Interactions This dimension involves the ways in which adults in the setting talk **with** children.									
		Not Seen	**Observed**					**Observed by all staff in classroom**	**Comments**
1	Adults use children's name, draw attention of children.								
2	Adults get down to the child's level when interacting with them.								
3	Natural gestures and some key word signing are used in interactions with children.								
4	Adults use symbols, pictures and props (real objects) to reinforce language.								
5	Pacing: Adult uses a slow pace during conversation; give children plenty of time to respond and take turns in interacting with them.								
6	Pausing: Adult pauses expectantly and frequently during interactions with children to encourage their turn-taking and active participation.								
7	Confirming: Adult responds to the majority of child utterances by confirming understanding of the child's intentions. Adult does not ignore child's communicative bids.								

8	Imitating: Adult imitates and repeats what child says more or less exactly.								
9	Commenting: Adult comments on what is happening or what children are doing at that time.								
10	Extending: Adult repeats what child says and adds a small amount of syntactic or semantic information.								
11	Labelling: Adult provides the labels for familiar and unfamiliar actions, objects, or abstractions (e.g. feelings).								
12	Adult encourages children to use new words in their own talking.								
13	Open questioning: Adult asks open-ended questions that extend children's thinking (what, where, when, how & why questions).								
14	Scripting: Adult provides a routine to the child for representing an activity (e.g. First, you go up to the counter. Then you say "I want milk..") and engages the child in known routines (e.g. "Now it is time for circle time. What do we do first?").								
15	Adult provides children with choices (for example: "Would you like to read a story or play on the computer?").								

16	Adult uses contrasts that highlight differences in lexical items and in syntactic structures.								
17	Adult models language that the children are not producing yet.								
18	Turn-taking is encouraged.								
19	Children's listening skills are praised.								
20	Children's non-verbal communication is praised.								
Total Score	**/100** **Notes:**								

Appendix 6

Updated approval from HREC for online interviews

UNIVERSITY OF CAPE TOWN
Faculty of Health Sciences
Human Research Ethics Committee

Room G50 Old Main Building
Groote Schuur Hospital
Observatory 7925
Telephone [021] 406 6492
Email: hrec-enquiries@uct.ac.za
Website: www.health.uct.ac.za/fhs/research/humanethics/forms

27 January 2021

HREC/REF: 849/2019

Prof H Kathard
Division of Communications Sciences & Disorders
F-45, OMB
Email: Harsha.kathard@uct.ac.za
Student: Kmdlay001@myuct.ac.za

Dear Prof Kathard

Project Title: A CASE STUDY OF A CENTRE – BASED PRESCHOOL PROGRAMME SUPPORTING EARLY MULTILINGUAL COMMUNICATION DEVELOPMENT OF CHILDREN WHO ARE BLIND/VISUALLY IMPAIRED (MSC DEGREE - MS LAYLA KAMEDIEN)

Thank you for your email to the Faculty of Health Sciences Human Research Ethics Committee (HREC) dated 20 January 2021.

The HREC has **granted approval** for interviews to be conducted via telephonic /online methods with reference to the above study.

Please note that the ongoing ethical conduct of the study remains the responsibility of the principal investigator.

Please quote the HREC REF 849/2019 in all your correspondence.

Yours sincerely

PROFESSOR M BLOCKMAN
CHAIRPERSON, FACULTY OF HEALTH SCIENCES HUMAN RESEARCH ETHICS COMMITTEE

HREC/REF:849/2019ea

Appendix 7

Updated approval from HREC for 2021

Letter of request for commencement of research activities as requested by the Human Research Ethics Committee

12 November 2020

To whom it may concern
Letter of request for study 849/2019

My research proposal received approval in February 2020 and research activities were planned for late March and April. Due to the nationwide lockdown and subsequent closing of the research site, research activities could not commence. As of October the research site has allowed for scheduled research related activities. Onsite research activities will adhere to protective measures as advised by the World Health Organisation (WHO) in reducing the spread of COVID-19, this will include and not be limited to;

- Wearing a face mask
- Maintaining social distancing of at least 1 meter distance
- Frequent washing and sanitizing of hands
- Avoiding close contact and interacting in large groups

All research activities onsite will be planned and scheduled beforehand to ensure the adherence to the above mentioned safety measures. The researcher will be responsible for planning and liaising with the site.

Yours faithfully,
Layla Kamedien
(Kmdlay001@myuct.ac.za, 0795617758)

Prof. Harsha Kathard
(harsha.kathard@uct.ac.za (w) 021 406 6401)

UNIVERSITY OF CAPE TOWN
FACULTY OF HEALTH SCIENCES
HUMAN RESEARCH ETHICS COMMITTEE
DOCUMENTATION / REQUEST
APPROVED
COMMENT: Subject to 2 weekly HREC ratification
SIGNATURE OF CHAIR / DESIGNEE
DATE: 13/11/2020

Appendix 8

Document review schedule

Document Review Department of Basic Education (2009). The National Early Learning Development Standards (NELDS) National integrated early childhood development policy (2015) The South African National Curriculum framework (NCF) (2015) LOFOB Daily programme (2020)			
Aim/Objective	**Documents/sections**	**Data Extraction**	**Analysis**
The underpinning values and the principles that inform the programme			
The skills required to implement the programme			
Activities included in the curricula to support and monitor communication and multilingual learning			
Opportunities available for communication development and multilingual learning			
The barriers and facilitators of communicative support			