

## **Improving Access to Basic Education for Deaf Children Through Family Communication**

The oral method of education emphasizes the use of spoken language as a medium of instruction for deaf children at school. However to be deaf means not to hear. By implication, however, deaf children cannot access information through spoken language. Lack of access to information excludes the deaf child from the education process. This explains why deaf children in Kenya do not have access to basic education beyond the primary school level. The visual method of education on the other hand emphasizes the use of sign language as a medium of instruction for deaf children at school. Sign language is the mother tongue of deaf children. Through the use of this language, the deaf child increases his vocabulary, self awareness and the capacity to communicate in a spoken language. Such capacitating leads to active participation of deaf children in the education process.

Exclusion and participation characterizes oral and visual methods in the education of deaf children. This suggests that in the struggle of families to provide deaf children with access to basic education in Kenya, it is communication and not speech that should matter most.

Given that the medical approach to deafness has dominated the policies of governments concerning the education of deaf children, the question then arise: How does family communication improve deaf children's access to basic education in Kenya?

The strategies for achieving the goals of our national basic education programme focuses on three main areas: Strengthening institutions; identification and consolidation of basic education programmes; and creation of learning environment. This assumes that government support is translated into a strong policy on basic education and its language or languages of instruction; availability of relevant statistics on basic education through needs assessment surveys; a national basic education commission, rural urban education disparities is narrowed; the educational base is strong; trained and qualified education personnel; and reading materials and audio-visual media.

There is congruence between the basic education hypothesis and family communication. Parents with deaf children in Kenya belong to different groups; the members of the groups lack awareness about the deafness and linguistic identity of their deaf children; they have limited access to sign language training opportunities; they also lack fellowship among themselves; and they do not associate with the groups of deaf youths and adults. Consequently, the groups of parents with deaf children in Kenya are not united; they also find it difficult to advocate for the right of their deaf children to have access to sign language as a medium of instruction at school; similarly they find it difficult to communicate with their deaf children at home; they also do not meet together to share experiences and exchange ideas about the early childhood education of the deaf; and they find it difficult to cooperate and work together with deaf youths and adults to advocate for the recognition of deaf children as a linguistic minority group.

In view of this family communication should focus on: establishment of committee; identification and visits to relevant parents and families; group meetings; and discussions on alternative options for early childhood education of the deaf.

More specifically it should involve: appointment of a facilitator and procurement and of training materials and logistics; community awareness raising and survey; parents training and joint workshops between parents, teachers, and deaf youths and adults.

Through these activities, families with deaf children in Kenya will be able to recognize and accept the rights of their deaf child to communicate in the language of his or her own choice organize resources

and support the development of services that ensure deaf children's equal access to basic education.