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**FALSEHOODS AND MYTHS
ASSOCIATED WITH
PERSONS WITH SPECIAL
NEEDS (PSNS)
BRIEF**

FALSEHOODS AND MYTHS ASSOCIATED WITH PERSONS WITH SPECIAL NEEDS (PSNS) AND COVID 19 AFFECTING LEARNERS WITH DISABILITIES EDUCATION IN NAKIVALE, RHINO CAMP AND ADJUMANI REFUGEE SETTLEMENTS IN UGANDA

Communication in refugee settlements in COVID 19 era

COVID 19 being a deadly disease with a dearth of knowledge, while the government, development partners and media focused on popularizing ways of preventing COVID 19 there were so many falsehoods tied around it[1]. The same message was spread with in the refugee settlements of Uganda but there were no messages countering the falsehoods and myths about COVID 19 spread with in these communities' affecting education of the learners with disabilities[2]. The refugee communities present complexity of communication needs. Ineffective communication systems are a serious barrier to reducing negative education and health outcomes, especially in precarious times like these of COVID 19[3].

Windle International Uganda (WIU) conducted research on COVID 19 and learners with disabilities in Nakivale, Rhino Camp and Adjumani refugee settlements. The study assessed their adaptation and transformation of the new strides presented to them by occurrence of the deadly pandemic. The study documented their lived experiences, their knowledge on COVID 19, the sources of information on COVID 19, the challenges they faced with home learning, coping strategies, their current situation in schools and opportunities for learning continuity for the learners with disabilities amidst the challenges present by COVID 19.

WIU's PSN study was qualitative and reached 70 participants including learners with disabilities, parents of learners with disabilities, head teachers, government officials, OPM, and NGOs. Sharing key recommendations and opportunities for change to over come the falsehoods and myths affecting PSN education as a result of COVID 19.

Key Findings

1. Generally, the participants including learners with disabilities expressed knowledge of how COVID 19 was spread with in their communities. The learners further highlighted that they got this information mainly from school, their parents, peers, partners and radios. Beyond spread, they were also aware of how COVID 19 is prevented and were aware it is a very deadly disease. However, some sources of information had falsehoods around the messages they share which affected how the learners with disabilities associate with their peers and school re-entry.

[1] <https://www.who.int/docs/default-source/searo/thailand/12myths-final099bfbf976c54d5fa3407a65b6d9fa9d.pdf>

[2] <https://www.pearson.com/international-schools/covid-19-support.html>

[3] https://globalcompactrefugees.org/sites/default/files/2021-04/progress_under_threat.pdf

1. "... We got to know about COVID 19 when they told us to leave school and go home... schools were closed for so long and we were at home... we were stopped from moving to prevent COVID 19." _ Senior 1_Deaf student Nakivale. *"... Information was widely shared through radios, televisions, community structures and church leaders... and use of cars informing them about COVID 19 and how they can prevent it." _KII OPM official.*
2. There were falsehoods and myths around COVID 19 and PSNs that made learners with disabilities victims affecting their association with peers and education. Even with negatives that came with them, these were not demystified by the sources of information and knowledge of COVID 19. Some of the falsehoods and myths include learners with disabilities can easily spread COVID 19 given their physical and mental disabilities, they have a weak immune system and COVID 19 is meant for weak people like them affecting their home learning during the lock down and re-entry in schools since they are now open. *"... I was given books to read and other home learning materials from school... I did not use them because I did not have any support...there were no educated people at home...people in the community isolate me because they do not want to repeat themselves... I have a hearing difficulty... they think I can easily get and spread COVID 19." _ IDI Primary 5 pupil, Nakivale.*
3. Parents of learners with disabilities also shared that their children were not allowed to participate in small group learning during the lock down. This resulted from the belief that their underlying health issues intensify the gravity of COVID 19 which they will spread to their children. Therefore, they were cautioned by the community to keep their children at home. When this happened, many parents kept their children at home and when schools reopened, they requested the teachers to keep them in their former classes as automatic placement in new classes will be very difficult for them to catch up. Some learners with disabilities shared that staying in their former classes was demotivating and thus stand a risk of dropping out of school because they have outgrown these classes.
4. Due to these falsehoods and myths, some parents have chosen to keep their children at home because of the general community belief that they can easily catch and spread COVID 19. This has affected the enrollment numbers of learners with disabilities as currently many of them are not in school. *"... My daughter is not back yet because she is sick, she needs a surgery to remove water from her head... but I also fear when she goes, she will get COVID 19 and spread it." _IDI with parent, Adjumani.*
5. Currently, learners with disabilities that have returned to school find it very challenging to socialize with other learners. This disassociation is informed by the myths and falsehoods of their nature and COVID 19. They live with the fear of catching and spreading COVID 19 at school and with in their communities. Teachers reported that this kind of living is affecting their performance in class and there is need to sensitize people on COVID 19 beyond its signs, prevention and how it is spread.

6. Learners with great difficulty in seeing and hearing have been affected the most because the communication sources and materials are not favorable for their ways of living. The WIU PSN study found that these learners did not have full understanding of the COVID 19 pandemic and they were left at the mercy of community and their beliefs which turned out to have falsehoods tied to them.

Recommendations

1. There is an urgent need to design inclusive materials disregarding the falsehoods and myths around COVID 19. This should be done by the government through Ministry of Health and the partners after thorough consultation with the communities and recipients of the messaging.
2. The go back to school campaigns should include messages specifically targeting learners with disabilities and their parents. This will encourage them rejoin school and reducing on the number of drop outs as a result of COVID 19 falsehoods and myths among PSNs.
3. There is need to invest and apply in education innovations like teaching at Teaching at the Right Level (TaRL), Double Shift Schooling System (DSSS), and Accelerated Education Programme (AEP) among others. This is because some learners are being discouraged and at risk of dropping out as a result of not participating in home learning and are required to stay in their former classes before the lockdown.
4. There is need to design communication material specifically for learners with a lot of difficulty in seeing and hearing. These enables them cope with challenges at hand from an informed point of view because they have a right to information too.

Conclusion

These beliefs cut across different socio-demographic categories like gender and age – majority of the refugee community believes the same thing, and many of them live severely constrained lives on many fronts. However, it was very clear that learners with disabilities are perhaps among the most affected in terms of lacking accurate information in this era of COVID. With this abundance of both risk and falsehoods around it, what should be done? First, considering PSN as being at high risk of COVID-19 would be challenging to the information control efforts and needs special attention. Risk communication and community engagement efforts should consider regional and refugee variations of myths and false assurances. It should also fully understand information needs, design local initiatives that enhance community ownership of the control of the virus, and thereby support engagement in standard precautionary measures. All forms of community communication should be properly used and regulated to disseminate credible information while filtering out myths and falsehoods.

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