

**CHALLENGES FACED BY LEARNERS WITH EPILEPSY IN SELECTED
PRIMARY SCHOOLS IN DRAJINI SUB COUNTY
YUMBE DISTRICT**

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**A RESEARCH REPORT SUBMITTED TO THE INSTITUTE OF OPEN AND
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DECLARATION

I Avako Jannet, declare to the best of my knowledge that this is my own original work; it has never been presented to any institution at higher learning to the award of a bachelors degree in education.

Signature.....AV..... Date.....19/09/09.....

AVAKO JANNET

APPROVAL

This is a report on **challenges faced by learners with epilepsy in selected primary schools in Drajini Sub County Yumbe district** and was submitted for examination purpose with my approval as University supervisor.

Signature.....

Date.....19/09/09.....

Mrs. TALIGOOOLA DEBORAH
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DEDICATION

The research is dedicated to my father Mr. Abiriga Charles and late Mum Ezati Angela, my beloved daughter Mercy, Geraldin and lastly to my dear beloved brothers and sisters.

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TABLE OF CONTENTS

DECLARATION.....	i
APPROVAL.....	ii
DEDICATION	iii
ACKNOWLEDGEMENT	iv
TABLE OF CONTENTS	v
LIST OF TABLES.....	vii
ABSTRACT.....	viii
CHAPTER ONE.....	1
1.0 Introduction	1
1.1 Background of the study	2
1.2 Statement of the problem	3
1.3 Purpose of the study	3
1.4 Objectives of the study	3
1.5 Scope of the study.....	4
1.6 Significance of the study	4
1.7 Limitations.....	4
CHAPTER TWO.....	6
REVIEW OF RELATED LITERATURE	6
CHAPTER THREE	11
RESEARCH METHODOLOGY	11
3.0 Introduction	11
3.1 Research design.....	11
3.2 Study area and population	11
3.3 Sample size and sampling technique.....	12
3.4 Research instruments.....	12

3.5	Data collection procedure.....	13
3.6	Data processing and analysis.....	13
CHAPTER FOUR		14
DATA PRESENTATION, ANALYSIS AND INTERPRETATION		14
4.0	Introduction	14
4.1	Attitudes of teachers towards children with epilepsy during learning	15
4.2	How epilepsy affects the child's learning	16
4.3	Challenges which teachers face when controlling epileptic children in classroom situation.....	18
4.4	Solutions adopted for the problem of epilepsy	20
CHAPTER FIVE		21
SUMMARY OF FINDINGS, CONCLUSION AND RECOMMENDATIONS		21
5.0	Introduction.....	21
5.1	Summary of findings	21
5.1.1	Attitudes of teachers towards learners with epilepsy during learning	21
5.1.2	Challenges faced by teachers while controlling epileptic children in the learning situation	22
5.1.3	Effects of epilepsy on the child's learning.....	23
5.1.4	Solution adopted for the problem of epilepsy	24
5.2	Conclusion.....	24
5.3	Recommendations	25
REFERENCES		26
APPENDICES.....		28
Appendix A: Questionnaires for Teachers.....		28
Appendix B: Interview Guide for Parents.....		33

LIST OF TABLES

Table 1: Selection of sample.....	12
Table 2: Presents the number of people who responded and those who did not respond	14
Table 3: Presents the attitude of teachers towards children with epilepsy.....	15
Table 4: Presents how epilepsy affects the child's learning	17
Table 5: Presents challenges teachers face when controlling epileptic children in a classroom situation	19
Table 6: Showing solutions adopted for the problem of epilepsy.....	20

ABSTRACT

This study aimed at investigating teacher's attitudes towards learners with epilepsy in classroom situation. The instruments used for collecting data were questionnaires and interview. A total number of sixteen respondents were involved in the study. These respondents included the teachers and parents. The study investigated the attitudes of teachers towards children with epilepsy during learning; how epilepsy affects the child's learning; challenges teachers face when controlling epileptic children in classroom situation.

The findings of the study revealed that children with epilepsy have adverse effects on academic performance due to reasons like over dosage of drugs to control seizure or damages in the brain caused by the epilepsy.

The rights of children with epilepsy have been abused and their self-esteem reduced or lowered

CHAPTER ONE

1.0 Introduction

Epilepsy is a medical condition which causes a sudden malfunction in the brain which in turn leading to seizure it is therefore an illness just like any other disease and needs a doctor's attention right from its initial state.

Pupils with epilepsy are increasing everyday, month or year as women give birth as also the number of special needs learners increase. It is not very clear to tell when did the problem of learners with epilepsy are timely to be affected in their learning abilities as a result of this disease.

It's true that learners with epilepsy can have the same learning abilities like a normal learner, however their abilities may differ (learners with epilepsy) depending on the type of the disease, the symptoms the society or school, the teacher's attitude, parental factors and other factors.

Kibuda (2002) state that epilepsy is a condition where there is abnormal discharge of electrical energy in some brain cells, the discharge spreads to near by cell and the results form abnormal discharge of brain cells. The existence of epilepsy has showed that learners with epilepsy do not differ from those without epilepsy in their learning abilities since the disease does not happen every time or every day. This therefore brings in a question as to whether it's epilepsy that affects their abilities to learn or its other factors which exist with or without epilepsy.

Many authors like Kaplan and Saddock (1985) have written on learning abilities or have commented on learners with epilepsy that aggressive behavior is a problem which is aroused by physical pain, they further said that anger, an

increased irritability are frequent during vessels as they affect the brain directly, learners with epilepsy become much involved in repeated aggressive encounters as they lack basic social skills.

Gelder (1988) also said that an epileptic patient who has an abnormal personality and shows aggressive outbursts is difficult to control in a classroom situation, learners with epilepsy normally suffer from regular pain like neck, feeling dizzy they also have heart problems like when they raise their hands up to tell answer in a class the heart beats, they also fear being laughed at.

The most common symptom of learners with epilepsy is falling down immediately anywhere where the learner is at anytime. This falling down normally comes as a result of seizure, which comes in different ways to different pupils depending on the type of disease, commonly many begin by shaking and then fall down but others do not fall down.

1.1 Background of the study

In Yumbe district education is the fundamental aspect due to universal primary education (UPE) a government policy. Parents are attempting to send ordinary children to schools however the government has put across policy of education to all that is why special needs education centers are opened to cater for such cases of disabilities such as visual impairment physical handicapped epileptic however, the researcher is much concerned with epilepsy, which has given great concern to parents, teachers and general public. Epileptic children are cut off from normal free interaction with the general public.

They are abused and may be deprived of their rights for instance education, employment, the children with epilepsy are identified at homes, churches and schools.

A person with epilepsy is considered to have been cursed perhaps because of quarrel amongst the grand parents or possibly a bewitching because of the grudge against the family.

1.2 Statement of the problem

A number of children with epilepsy are not attending school, nobody appears to be concerned with their education and health. Sometimes they have been shunned by their peers at school and have often been laughed at because of their conditions.

Furthermore they have been denied a chance of fully participating in classroom activities and co-curricular activities and this affects their learning thus psyche hence making their problems much more pronounced than it would have been.

1.3 Purpose of the study

The purpose of this study is to investigate the challenges that learners with epilepsy face while in schools in Drajin Sub County Yumbe district.

1.4 Objectives of the study

The objectives of the study are;

- To find out the attitudes of teachers towards children with epilepsy during learning
- To assess how epilepsy affects the child's learning in schools
- To find out challenges teachers face when controlling epileptic children in a classroom situation

1.5 Scope of the study

This study was carried out in Drahini Sub County in Yumbe district where five primary schools were involved in addressing the problems affecting education and learning process of epileptic children. The study addressed the issues concerning special needs education focusing specifically on the attitudes of teachers towards epileptic children in ordinary schools.

1.6 Significance of the study

The significances of the study are;

It will be a source of information, useful to sensitize parents, teachers, the community and teachers attitudes towards epileptic children and let them learn.

The study would help future researchers to get information about the teachers attitudes towards epileptic children in classroom situation.

Epileptic children will be treated equally like other children as far as educational opportunities are concerned parents, teachers and the community will be able to impart knowledge and skills which in turn will be useful to the community.

1.7 Limitations

The researchers study was non exceptional from other types of work, the researcher meant numerical problems:

Shortage of funds to facilitate the researcher in terms of transport, stationary, therefore making it difficult to carry out the research.

Language problems since most respondents do not understand English hence making it very difficult to administer the questions.

Lack of statistical data in both ministries of education and health concerning the number of epileptic children in schools has made it very hard to carry out the research.

Failure by the teachers to identify the epileptic children with ease since many of them take less attention in the plight of those children.

Score information about the epileptic children in school, and homes because most people believed these children are possessed by evil spirits.

Limited time to carry out the research. This is so because a limited time has been allocated for this research yet more time needed to do it since it's not easy to get information from local people about epilepsy.

CHAPTER TWO

REVIEW OF RELATED LITERATURE

Introduction

In this chapter an effort is made to discuss what other writers or authors have written related to the study at hand. The attitudes of teachers towards children with epilepsy during learning;

Epilepsy Association of Australia (2002) argues that teacher's attitudes are both positive and negative in the part of the positive attitude, he said that independence and social acceptance are important. This encourages pupil with epilepsy lead a normal life possible hence balancing safely and common sense verses risks.

George and Schur (2003) similarly observed with a concern that teachers regard epileptic children as second hand and non-performers in academic activities. They cater for any the so called normal children forgetting that epileptic attack comes and leaves the learners at once.

They emphasized that a person with epilepsy is not very welcome and his family is also unfortunate, unlucky and social life is restricted, isolated and rejection was and is still seen as a natural result of epilepsy both for the sufferer and the family.

The researcher's view about the attitude of teachers towards children with epilepsy is that they find themselves neglected and deprived of education by not accepting them in school because when the cases of attack comes , teachers tend to send them home.

Donald and Duck (1990) further ascertain the teachers positive attitudes may influence the extend to which student with epilepsy participate in sports and extra curricular activities, which he must no do alone and restrictions to the patient should be discussed with the student and family.

Like any other vulnerable groups, epileptic patient need close attention, allow them to socialize freely and participate in activities to reduce isolation, low self esteem and lack of communication skills.

Steel and Boutte (1992) that often times teachers have negative attitudes towards children with epilepsy and devalue them in school because of their behaviors regardless of their achievement and intellectual performances in class and outside.

In the researcher's view, many different attitudes developed concerning epileptic seizures because they were explicable and unpredictable, these negative attitudes vary from tribe to tribe but there were also many common beliefs, possessions, curses, witchcraft was thought to be the primary reasons why persons suffered from epilepsy.

How epilepsy affects the child's learning?

The person with epilepsy is often at social disadvantage. That is why many writers have discussed how epilepsy affects the child's learning.

Jeavouns and Aspinal (1985) discovered that the absence seizures which are brief, lapses of awareness may disrupt the child's concentration particularly if they are repetitive and if the teacher is unaware or not knowledgeable of the situation. The further described such children as inattentive day dreamers and they argued that seizures will disrupt the child's performance temporarily if such lasting they interference with the child's education will be minimal.

The damage will considerably be greater if the child is sent home each time he/she has a fit, particularly if the parent insists on maintaining the child at home. However, epilepsy comes for a short time and goes away hence leaves the child's brain intellectual competent for classroom activities.

Ellenberg (1985) further argued that intellectual deterioration occur in children with epilepsy due to medication or the undergoing pathological/process causing the seizure.

This is supported by the researcher, it is true that children with epilepsy do not reason things or issues clearly hence the drop out of school and if they continue in school they perform poorly. Therefore, epilepsy affects the brain of the child.

Curbett (1986) in the same way argues that intellectual changes do occur, but the significant etiological factors are likely to be brain damage. The adverse affects of anti-epileptic drugs given in high doses or even in doses optimal for the control of seizure cause poor concentration and memory during class times and periods of abnormal electrical activity.

Stores (1986) similary raises a concern that learning problem are more common in children with epilepsy than in non-epileptic children. This may possibly happen because of poor school attendance and the general social difficulties of being epileptic.

Gelder and Gath (1988) commented that the epileptic seizure with a sudden on set of several minutes to a patient is non arousal, which disturbs the brain to reason things properly. They added that many causes of epileptic attacks are known and their frequency varies with age.

Many different authors as Richman McCarthy and Yarbrough (1995) suggested that teachers must be aware that seizures of any type may interfere with the child's attention in class or continuity of education.

Ovuga and Buga (1996) ascertain that valuable learning time may be lost because of interruption caused by the seizure itself. They further argued that if the child is then sent home further time is lost because a child who is sent home on Thursday is unlikely to return to school before the following Monday.

The researchers view is summary is that poor concentration and memory has a social impact on relationship, education and work of the child with epilepsy in a school.

Challenges teachers face when controlling epileptic children in a classroom situation

Hallahan and Kauffman (2000) have noted with concern that researchers have no knowledge on the management of children with epilepsy and they are ignorant about the causes of seizures and first aid which are among the most common misconceptions about epilepsy.

The above view is supported by the researcher because it seems teachers, parents and the community do not have a close of managing children with epilepsy when the sudden attack comes.

Freeman et al (1994) observed that children with epilepsy or seizure disorders have emotional behavioral problems more often than most ordinary children to teachers.

However, the school adjusts students or pupils with seizure disorders to be improved dramatically if they are properly assessed, placed, counseled and given appropriate work assignments.

Spiegel (1996) similarly raised that teachers need to help dispel ignorance, superstitions and prejudice toward pupils who have seizures and provide clam management for the occasional seizure that children may have or experience at school.

Kaplan and Saddock (1985) commented that aggressive behavior is a problem, which aroused by physical pain. They further said that anger, an increased irritability are frequent during classes as they affect the brain directly. These patients become much involved in recited aggressive encounters as they lack basic social skills.

Harold et al (1985) said that drug treatment is another problem advanced by teachers in class in the shortest period of an attack with his or her reach hence no drugs for some population of epileptic cases.

Puri and Laking (1985) argue that during an episode that affected person suddenly stops whatever he/she is doing and adopts a frozen vacant appearance and she/he can injure himself/herself on desks, tables in the class.

Gelder (1988) further said that an epileptic patient who has an abnormal personality and shows aggressive out bursts is difficult to decide to control in a classroom situation.

According to the researchers view many people with epilepsy have a greater challenge to overcome because they often have additional attention and concentration.

CHAPTER THREE

RESEARCH METHODOLOGY

3.0 Introduction

This chapter is focused on the methodological aspect such as research design, study area and population, sample size and sampling research instruments, data collection procedure, data analysis procedure.

3.1 Research design

This research was carried out using the research approach of qualitative method. Charles (1998) describes qualitative research method as that which relies on numerical data. Enon (1998) further said that qualitative means the data to be obtained are not ordinary expressed in numerical terms but the description is emphasized.

3.2 Study area and population

Becker (1989) and Seitz (1976) clearly stated that in many cases a complete coverage of the population is not possible. They further said that complete coverage might not offer substantial advantage of sample survey. Therefore, the researchers main objective during the study was involved directly in the teachers attitudes towards learners with epilepsy.

The categories of the respondents include the following; teachers and parent of epileptic children. Three (3) teachers from each school were randomly sampled which made the total of twelve (12) teachers. The researcher sampled ten (10) parents of children with epilepsy.

The research was generally conducted in Drajini Sub County with an area of 1634km which has twenty three (23) primary schools with three hundred forty four teachers (344) and twenty three (23) head teachers.

3.3 Sample size and sampling technique

The selection of the subject was simple random sampling technique which was preferred because it gave chance for everybody to be selected. The researcher selected the following schools; Nyori primary school, Kenyanga primary school, Demonstration primary school, and Dramba primary school respectively. The categories of the respondents included teachers and parents of children with epilepsy.

Table 1: Selection of sample

Target group	Number of respondents
Teachers	06
Parents of children with epilepsy	08
Total	14

Source: Field data 2009

This study has involved case study method the reason for choosing case study was because it focuses on naturally occurring behavior or events that is to say it was collected close to a specific situation.

It is rich and holistic that is data is very descriptive and can reveal details about the situation; it is powerful for assessing how and why things happen as they do. Emphasizes on people's live experiences and it is also important for collecting and locating the meanings people place on certain things.

3.4 Research instruments

The researcher used questionnaires and interview guide to the respondents

3.5 Data collection procedure

The procedure taken in data collection was as follows;

The researcher was issued with the Introduction letter from Kampala International University (KIU) first to the school where the research was carried out.

The researcher carried out data collection physically first by designing research questions for the respondents. She administered questionnaires to the following categories; teaches and interview guide were used for the parent of epileptic children. The research has pre-visited all the respondents and then questionnaires were taken to them later as well as parents. This was done in order to create report between the researcher and the respondents to avoid disappointments.

3.6 Data processing and analysis

Qualitative data involved three sets of activities which included; editing, coding and frequency tabulations. Editing was done by looking through each of the field responses from interview guides ascertaining that every applicable question has an answer and all errors eliminated for the completeness, accuracy and uniformity.

The researcher then proceeded onto coding the various responses given to particular questions that lack coding frames, she then established how many times each alternative response category was given an answer using tally marks which was later added up.

Data were then presented in frequency tabulations rendering it ready for interpretation. Quotations and field notes made were also included.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND INTERPRETATION

4.0 Introduction

In this chapter the data collected is analyzed and interpretation of data is based on the formulated research objectives and the findings are presented in tables below are the objectives;

- To find out the attitudes of teachers towards children with epilepsy during the learning
- To assess how epilepsy affects the child's learning in schools
- To find out challenges teachers face when controlling epileptic children in a classroom situation

Table 2: Presents the number of people who responded and those who did not respond

Respondents	Expected number of respondents	Those who responded	Did not respond	Percentage
Teachers	10	06	04	33
Parents	10	08	2	17
Total	20	14	06	100

Source: Field data 2009

Table 2 reveals that subjects who responded among the two (2) categories of respondents were fourteen (14) out of twenty (20) representing 80% of the total expected number of respondent. Four teachers never responded due to too much work in their classes. Two parents never responded because they were not available at that material time.

4.1 Attitudes of teachers towards children with epilepsy during learning

George and Schurr (2003) observed with a concern that teachers regard epileptic children as second hand and non-performers in academic activities. They cater for only the so called normal children forgetting that epileptic attack comes and leaves the learners at once. They emphasized that a person with epilepsy is not very welcome and his family is also unfortunate, unlucky and social life is restricted. Isolation and rejection was and is still seen as a natural result of epilepsy both for the sufferer and the family.

Table 3: Presents the attitude of teachers towards children with epilepsy

Response	Frequency	Percentage
Different learning areas	3	11
Helping the epilepsy	05	18
Sympathetic	06	21
Physical torture of personality	07	25
Treatment of epilepsy patient	07	25
Total	28	100

Source: Field data 2009

As noted, the results in table three vary with regard to attitudes of teachers towards children with epilepsy.

Seven of the respondents said that no treatment and physical torture of personality of epilepsy patients brings about negative attitudes towards learners or children with epilepsy during learning because of frequent attacks and learners are physically tortured when attack comes. Six respondents stated that they felt, sympathetic towards learners with epilepsy.

Five respondents said that helping the epileptic children is very important to avoid injuries and accidents to the parents or clients while three respondents said that the learners with epilepsy should learn differently from the normal children; this eradicate disturbance of lesson periods.

It is very true that teachers attitude towards learners with epilepsy is not good even in a classroom they do not involve them like giving answer what they know as teachers is that they can not perform even in out door activities the epileptic children are left behind hence makes the epileptic children to loss independence and social acceptance. Teachers since they do not have knowledge about the disease they feel if the help such a child the disease can be transmitted to him or her that is why they have negative attitudes towards epileptic children and that is why they intend to send them home for sometime may be until the feel better. Further more teachers feel their time for teaching is wasted and they lose class control at that material time.

4.2 How epilepsy affects the child's learning

Jeavons and Aspinall (1985) discovered that the absence seizures, which are brief, lapses of awareness, may disrupt the child's concentration, particularly if they are repetitive and if the teacher is unaware or not knowledgeable of the situation. They further described such children as inattentive day dreamers and they argued that seizures will disrupt the child's performance temporarily. If such lasting they interference with the children's education will be minimal.

The damage will considerable be greater if the child is sent home each time hee/she has a fit particularly if the parent insists on maintaining the child at home. However, epilepsy comes for a short time and goes away hence leaves the child's brain intellectual competent for classroom activities.

From the above evidence a person with epilepsy is often at social disadvantage in such a way that the friends or peers do isolate him or her sometimes when the seizures comes the friends tend to run away and leaves them alone not knowing that the fits are brief, lapses of awareness which makes him or her not to reason at that material time of the seizure. They also have learning problems which is common than non epileptic children, epilepsy also affects the child's learning in a way that epileptic seizures with a sudden on set of several minutes to a patient is non-arousable which disturbs the brain to reason things properly. Many causes of epileptic attacks are known and their frequency varies with age. Further more their valuable learning time may be lost because of interruption caused by the seizure itself; in that if the child is then sent home further time is lost because a child who is sent home on Thursday is unlikely to return to school before the following Monday.

Table 4: Presents how epilepsy affects the child's learning

Response	Frequency	Percentage
Patient not associative	2	7
Disorders the body system	3	11
Disabilities in the body	3	11
Poor performance	4	14
Abstract the recalling power of brain	5	18
Advice and treatment of drugs	5	18
Time of learning wasted	6	21
Total	28	100

Source: Field data 2009

As indicated in the table 4, teachers and parents gave various ways how epilepsy affects the child's learning. Six respondents out of twenty eight said that time learning is wasted during epileptic attacks and this caused fear in some other

ordinary learners. Five respondents said that abstraction of the recalling power of brain is affected and another five again noted that advice and treatment or administering of drugs is essential to the learners with epilepsy.

Results indicated that four respondents commented that the poor performance of learners with epilepsy might be as a result of overdose of drugs or frequent attacks. Three respondents said that disabilities in the body and the other three said disorders of the body system affect the child's learning. However two members said that the patients are not associative to their friends, peers and the community around.

4.3 Challenges which teachers face when controlling epileptic children in classroom situation

Freeman et al (1994) observed that children with epilepsy or seizure disorders have emotional or behavioral problems more often than most ordinary children to teachers. However the school adjusts students or pupils with seizure disorders to be improved dramatically if they are properly assessed, placed, counseled and given appropriate work assignments.

Quite evidence from the above findings is that indeed teachers are facing a number of challenges not only when the epileptic children experience seizures but also when in class with their peers. It also shows that negative influence of culture on negative towards epilepsy is indeed active. It also highlights that teachers have not been prepared to cater for the diverse needs of learners including epilepsy interrelation adopted.

Table 5: Presents challenges teachers face when controlling epileptic children in a classroom situation

Response	Frequency	Percentage
Special attention	02	7
Lesson time washed	03	11
Poor class control during attacks	04	14
Traditional beliefs	04	14
Monitoring personalities	05	18
Providing immediate help/first aid	10	36
Total	28	100

Source: Field data 2009

According to the findings in table 5, 10 respondents said that providing immediate help or first aid is a very great challenge faced when controlling epileptic children in a classroom situation.

Five respondents noted that monitoring personalities of children with epilepsy is another big challenge to them. Four respondents out of twenty eight had their complaint about traditional beliefs and another respondent noted poor class control during fits or seizures being challenges teachers face when controlling epileptic children in a classroom. As per full participation three members of the categories who responded noted that the lesson times are being wasted. However, two respondents said that the learners with epilepsy need special attention at school, at home and in any other activities.

4.4 Solutions adopted for the problem of epilepsy

Table 6: Showing solutions adopted for the problem of epilepsy

Response	Frequency	Percentage
Give remedial work to the learners	02	07
Educate/sensitize the community	04	14
Avoid hard/over working them	04	14
Monitor them with keen interest	05	18
Advise parent to take children with epilepsy for treatment	13	46
Total	28	100

Source: Field data 2009

According to table 6, 13 respondents said that enough advice should be given to parents, to take children with epilepsy for treatment which can stop other problems, 5 members said that monitoring the children with epilepsy with keen interest is another trend to avoid problems. As per the findings of table 6, 4 respondents said that education and sensitization of the community should be carried out. While the other in classroom situation or at home, 2 respondents commented that there must be maximum provision of remedial work to the learners with epilepsy.

The above finding is correct in such away that when you advise parent of what to do for the children who are suffering from epilepsy they do it because parent do nit have knowledge about the disease. When the epileptic patient is treated timely sometimes the attack does not come frequently. In that education and sensitization of the community plays a big role so that teachers can help them when the attack comes in classroom or outside the class.

CHAPTER FIVE

SUMMARY OF FINDINGS, CONCLUSION AND RECOMMENDATIONS

5.0 Introduction

In this chapter the data presented in chapter four is discussed, conclusions are drawn and possible recommendations and suggestions are made according to the formulated objectives.

5.1 Summary of findings

5.1.1 Attitudes of teachers towards learners with epilepsy during learning

The findings or results in table 2 indicated that there is need to treat epileptic learners. This is in conformity with George and Shurr (2003) who stated that teachers regard learners (epileptic cases) as second hands and non performers in academic activities.

Similarly the epilepsy association of Austria (2002) stressed that teacher's attitudes are both positive and negative where he further said that independence and social acceptance are important.

Laidlaw and Laidlaw (1980) confirms that the attitudes of he public to the patient are not good, they said the historical myth about epilepsy, which goes back to biblical times and associated fits with supernatural powers, whether divine or demonical. The patient was considered as the subject of away which contains an element of fear but more particularly of differences.

Laidlaw and Laidlaw (1980) in the same way further said considerable number of those with severe brain damage are resulting mental deficiency have generalized

convulsions. The fits are dramatically obvious they are just the same as those of the patient without brain damage that is not surprising that the public quite wrongly, may think of epilepsy in terms of the convulsing village idiots.

In the same way, the results revealed that learners with epilepsy have physical torture of their personality. It is in the researchers view that different attitudes develop concerning epileptic seizures because they were applicable and unpredictable. The children with special needs especially children with epilepsy face problems and pressure from their peers and the community they live in such as nicknaming them and isolating them in community.

This is in conformity with Halkihan and Kauffman (2000) who stated that teachers have no knowledge on the management of children with epilepsy and most of them are ignorant about the causes of seizures and first aid for epileptic child.

Ovuga and buga (1996) commented that valuable learning times may be lost because of interruption caused by seizure and they further said that after the sudden epileptic attack the child is then sent home and more time is lost.

Poor performance of the child may come because of over medication for the control seizure.

5.1.2 Challenges faced by teachers while controlling epileptic children in the learning situation

Data analysis in table 5 indicated that providing immediate help of first aid is approving to learners with epilepsy in primary school to avoid other problems. This is in line with Hallaham and Kauffman (2000) who said that teachers should have knowledge on management of children with epilepsy and they should know the causes of seizures.

In the researchers view for teachers to help these children with epilepsy in classroom situation there should be need to organize work shops about the management/causes of seizures to teachers and many more special teachers are to be trained. The findings in the 5 again shows that monitoring the personalities of learners or children with epilepsy is important to know it with start and end.

In the same way Spiegel (1996) said that teachers need to help dispel ignorance, superstition and prejudice towards pupils who have seizure and they should provide calm management for the occasional seizure that children may have or experience at school.

5.1.3 Effects of epilepsy on the child's learning

The results in table 3 revealed that there is abstraction in the recalling power of the brain.

According to the researcher, the learner with epilepsy may sustain injuries due to sudden attacks hence this can cause damages and pain making the child not to recall things learnt very well.

Many authors argued the findings in different perspectives as Jeavons (1983) confirmed by highlighting that the absence seizure which are brief lapses of awareness may disrupt the child's concentration particularly if the seizures are repetitive and if the teacher is unknowledgeable of the situation.

On the same line another author Corbett (1986) said that intellectual deterioration, etiological factors are likely to be brain damage the adverse effects in anti-epileptic drugs given in high doses or even in doses optimal for the control of seizure cause poor concentration and memory during class time.

The time for learning is wasted during the attacks and interrupts other ordinary pupils learning times are wasted for giving first aid and managing the poor class control during attacks and traditional beliefs are of same as results.

According to the researchers view epilepsy attacks disrupt lesson and coward children because of fear many tend to run out of the classroom hence accidents may occur and in the same way traditionally epilepsy is considered to be contagious when a person is having a seizure and that touching the urine feces and body at the time could also give a person epilepsy and sharing utensils at meal time was also contagious.

5.1.4 Solution adopted for the problem of epilepsy

Research findings in table 6 indicated that advice to be given to parents to take children with epilepsy for treatment. This can eradicate other problems the child may encounter and treatment can reduce the frequency of seizures.

The results revealed that parents and the community around should be educated and sensitized to show positive attitude towards learners with epilepsy so that the learners should not be given hard work or over worked for that matter.

The findings indicated that there must be maximum provision of remedial work to the learners with epilepsy.

5.2 Conclusion

The researcher concluded here by saying that epilepsy is a disease which can be controlled if treatments are given frequently. Teachers, parents of epileptic children and the community at large should be educated about the disease since they do not have knowledge about the epilepsy and they make sure these epileptic children should be helped in the process of fits to avoid injuries and accidents.

Teachers should not have low attitude towards epileptic children but should encourage them that you also like any other child. It has been true that teachers face challenges in controlling the epileptic children that they feel their time is wasted but still the seizures come for brief lapse and go away therefore teachers should manage time well.

The researcher ended up saying teachers, parents of epileptic children and the community should forget that epilepsy is a traditional belief therefore it has no treatment they should work hard that it's what comes and at brief moments therefore it can be controlled.

5.3 Recommendations

The researcher presents the following recommendations;

The ministry of education and sports should organize massive training of teachers in the field of special needs.

This can best work by increasing annual intake of students in former UNISSE for diploma in special needs education. Other solution to realize reasonable number of special needs teachers by Uganda Government to put in place Diploma course in all the National teachers Colleges for special needs education.

Parent of children with epilepsy and the community should be sensitized to create positive attitude towards children with epilepsy. Seminars, workshops and awareness so as to reduce the degree of negative attitude in them.

Teachers should be taught skills of management of epilepsy in classroom and avoid fearing the epileptic child because of the beliefs of epilepsy being contagious.

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APPENDICES

Appendix A: Questionnaires for Teachers

Dear Respondents,

I am carrying out a research study on children with epilepsy and how their learning is affected in Yumbe district. The researcher has purposely selected you to participate in the study. All information given is strictly for purposes of this study and you are assured of maximum confidentiality. The study will be of paramount importance for the education of children with epilepsy.

Profile of respondents

What is your professional qualification?

- General education ☐
- Special needs education ☐
- Early childhood education ☐

What is your teaching experience?

- 0-2 years ☐
- 2-5 years ☐
- 5-7years ☐
- 10years and above ☐

Do you have knowledge about epilepsy?

- Yes ☐
- No ☐

Do you have children with epilepsy in your class?

Yes ☐

No ☐

Do not know ☐

If yes, how many?

.....

Attitude of teachers towards children with epilepsy in the class

Do you think these children should study with other children?

Agree ☐

Disagree ☐

Not sure ☐

Should these children be allowed to participate in co-curriculum activities

Yes ☐

No ☐

Do not know

If no, give reasons

.....

.....

.....

What is the head teachers attitude towards epileptic children?

Negative ☐

Positive ☐

No interest ☐

None ☐

Challenges teachers face when controlling epileptic children in a classroom situation

How often do you counsel these children?

Once a week ☐

Everyday ☐

When I feel I have time ☐

Not at all ☐

What advice do you give to parents who fee their children are not useful in the community?

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How many parents come to school to see their children's performance?

One ☐

Two ☐

All ☐

None ☐

How do you involve parents in the learning of children with epilepsy?

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.....

Are parents interested in their children's education?

Yes ☐

No ☐

Do not know ☐

As a classroom teacher, do you think these children affecter your teaching?

Agree ☐

Disagree ☐

Not sure ☐

If yes, give reasons

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.....

What is your way forward to the government in such inclusive setting?

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Do teachers involve children with epilepsy in outdoor activities?

Yes

No

Sometimes

If yes, which activities are they involved in?

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If no, give reasons

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What challenges do teachers face when controlling epileptic attacks in a classroom situation?

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How do you attempt to solve the problems?

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Appendix B: Interview Guide for Parents

Dear Respondents,

I am carrying out a research study on children with epilepsy and how their learning is affected in Yumbe district. The researcher has purposely selected you to participate in the study. All information given is strictly for purposes of this study and you are assured of maximum confidentiality. The study will be of paramount importance for the education of children with epilepsy.

Profile of respondents

What is your name?

.....

How old are you?

20-30 years ☐

30-35 years ☐

35-40 years ☐

Educational background

Which level are you?

Primary education ☐

Secondary education ☐

University ☐

None ☐

Do you have knowledge about epilepsy?

Yes ☐

No ☐

If yes, does he or she go to school?

Yes ☐

No ☐

Sometimes ☐

If no, why?

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.....

What are the attitudes of other children or the community towards your child?

Good ☐

Bad ☐

Do not know ☐

In case of a seizure state what emergency help they receive from those around?

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.....

What issues do you discuss with your child to be self-reliant in future?

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.....

Do you treat the child as any other children in the family?

Yes ☐

No ☐

Sometimes ☐

If no, why?

.....

.....

Do you take this child to traditional doctors?

Yes ☐

No ☐

Sometimes ☐

Give your view as to why you choose to visit traditional healer

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.....

.....

Challenges faced by parent when controlling epileptic children in their homes.

What is the child's sex?

Male ☐

Female ☐

Do you involve the child in home activities?

Yes ☐

No ☐

Sometimes ☐

If yes, what activities do you involve the child in?

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If no, why?

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What do you think are the causes of epilepsy?

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What are the challenges do children with epilepsy face?

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What do you think are some possible solutions to the challenges?

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Effects caused by children with epilepsy to their parents

Is this child happy when he or she is interacting with his or her siblings?

Yes ☐

No ☐

Sometimes ☐

If no, why?

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Office of the Director

24th April 2015

TO WHOM IT MAY CONCERN:

Dear Sir/Madam,

RE: INTRODUCTION LETTER FOR MS/MRS/MR. AVAKO JANNET

REG / BED/17213/71/DU

The above named is our student in the Institute of Open and Distance Learning (IODL), pursuing a Diploma/Bachelors degree in Education.

He/she wishes to carry out a research in your Organization on:

CHALLENGES FACED BY LEARNERS WITH
EPILEPSY IN SELECTED PRIMARY SCHOOLS
IN DRAJIN SUBCOUNTY YUMBE
DISTRICT

The research is a requirement for the Award of a Diploma/Bachelors degree in Education

Any assistance accorded to him/her regarding research will be highly appreciated.

Yours Faithfully,

MUHWEZI JOSEPH
HEAD, IN-SERVICE