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To cite this article: Eman K. Al-Zboon (2016): Current state of the curriculum in Jordanian kindergartens for children with hearing impairments, Early Child Development and Care, DOI: 10.1080/03004430.2016.1187604

To link to this article: http://dx.doi.org/10.1080/03004430.2016.1187604

Published online: 19 Jul 2016.
Current state of the curriculum in Jordanian kindergartens for children with hearing impairments

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ABSTRACT

An appropriate curriculum for children with hearing impairments (HIs) is vital in establishing effective educational programmes for such children. This study aimed to describe the current status of the kindergarten (KG) curriculum for children with HIs in Jordan. Content analysis was applied to the curriculum plans and weekly schedules and in-depth interviews with 15 teachers were conducted. The findings revealed confusion and concern regarding the curriculum for children with HIs. One major recommendation is a comprehensive reform process to enhance the current state of the curriculum for children with HIs in Jordanian KGs.

ARTICLE HISTORY

Received 11 April 2016
Accepted 5 May 2016

KEYWORDS

Special education; disabilities; childhood

Introduction

Early childhood is an important stage of learning. Kindergarten (KG) provides children with the opportunity to acquire basic learning skills before entering the school setting (Ma, Shen, & Krenn, 2014; Wildenger & McIntyre, 2012). This stage influences how a child performs later, both academically and socially (Pianta & Kraft-Sayre, 2003). The start of primary schooling is considered one of the most important transitions in a child’s life and a major challenge of early childhood (Vinila, Ravichandran, Prakash, Prakash, & Narender, 2013); it can be a critical factor determining how a child adjusts to the demands of the school environment and affecting their future progress (Ghaye & Pascal, 1989). This is especially relevant to children with hearing impairments (HIs): without special training, speech and language development may be delayed (Gearheart, Weishahn, & Gearheart, 1996). The acquisition of speech skills by children with HIs requires early intervention (Akcamete & Kargin, 1996). HI affects a child’s ability to process linguistic information through hearing; this in turn affects her/his educational performance. Although the intellectual abilities of children with HIs are similar to those of their peers without disabilities (Williams & Finnegan, 2003), there may be a relationship between HIs and language ability, which could lead to low achievement (Kuder, 2003). The average reading age of adult persons who are deaf is estimated to be approximately eight or nine years (Traxler, 2000). El-Zraigat (2007) reported that students with HIs had poor expressive writing skills; in another study, El-Zraigat (2011) revealed that students with HIs lacked adequate reading skills in general.

HIs not only make it difficult for children to communicate with other people, but also slow or even prevent the learning process. Hence, children with HIs require special help to learn (Messaria, 2002). HIs may also put children at risk for cognitive and social development (Schick et al., 2013) by making it difficult for them to access experiences and information that enhance academic and literacy performance and social–emotional development (Goldin-Meado & Mayberry, 2001).
Children with HIs often lack ease in communication and opportunities for social interaction, which is important in developing a positive self-concept. They are also deprived of the opportunity to learn social skills incidentally. As a result, there may be significant gaps in the social–emotional development of children with HIs. It has been estimated that, for an individual without HIs, 80% of information learned is acquired incidentally, and any type of HI interrupts this automatic path to gaining information. Incidental information must thus be delivered directly to children with HIs (Denzin & Luckner, 1998).

An appropriate curriculum, focused on the needs of children with HIs, is vital in establishing effective educational programmes for such children (Luetke-Sthlm & Luckner, 1991). There is no recipe for adapting a general curriculum (GC) to meet each student’s needs, and GCs need not always be modified (Fisher & Frey, 2001).

Al-Zboon (2013) indicated that a curriculum for children with HIs includes several components. First, individual educational planning (IEP) is pivotal to special education planning and constitutes an important phase in the chain of actions aimed at securing the right to special education (Nilsen & Herlofsen, 2012). The Office of Special Education and Rehabilitative Services (July 2001) reported that the IEP process is one of the most critical tools in ensuring effective teaching, learning and increased achievement for all students with disabilities (Thompson, Thurlow, Quinemoen, Esler, & Whetstone, 2001). According to IEP, students between 3 and 21 years of age with HIs who have a documented need for special education services are considered ‘eligible individuals’ for receiving such services (Iowa Department of Education, 2013). Most teachers without specialized training in HI are not qualified to address the unique needs of these students. Therefore, IEP team collaboration with educational audiologists and teachers of students with HIs is necessary to address the academic and social instruction and the assessment of these domains (Denzin & Luckner, 1998). The second component is the GC, developed specifically for children without disabilities. In Jordan, El-Zraigat and Smadi (2012) reported that students with HIs in the deaf school study the same curriculum designed for students without disabilities.

The third component is the expanded core curriculum (ECC) for children with HIs. This component is considered a resource for IEP team members when developing educational plans for a student with HIs, and is designed to enable teachers of children with HIs and educational audiologists to deal with domains that either are not taught or require specific and direct teaching. For example, the Iowa ECC identifies essential skills and concepts for all KG children, which are absent in the GC. They include audiology, functional skills, self-determination and advocacy, social–emotional skills and technology. The Iowa Core identifies essential skills and concepts for all students KG-12, including literacy, mathematics, science, social studies and twenty-first century skills, and is aligned with the state-wide core content standards (Iowa Department of Education, 2013).

There have traditionally been three main kinds of communication style that schools utilize in the education of students with HIs: auditory–oral methods (in which the focus is on speech, listening and/or a speech reading), bimodal methods (in which artificial sign systems are utilized to represent spoken language, for example, Signed English), and natural sign languages, such as British Sign Language (Swanwick & Gregory, 2007).

Studies on the curriculum for children with HIs are scarce. Nevertheless, a few exist. Al-Zboon (2016) describes a KG curriculum for children with HIs, from the perspective of their teachers. The study identifies a collection of proposed curriculum components: a general framework and outcomes document; textbooks for children, including on sign language; textbooks for teachers; and attached learning resources. In evaluating the national general KG curriculum for children with HIs from their teachers’ perspectives, Al-Zboon (2015) reported that this curriculum is inappropriate and a modified curriculum is needed. The teachers have suggested some corrections to the curriculum, in order to render it more appropriate for children with HIs. El-Zraigat and Smadi (2012) reviewed current special education programmes and curricula as they relate to students with HIs. The results revealed that educating students with HIs is challenging but that, nevertheless, students with HIs study the same curriculum as those without disabilities.
Otis-Wilborn, Winn, Griffin, and Kilgore (2005) examined the attempts of special education teachers to enhance access to the GC and participation in general education programmes. The special teachers reported that they struggled to gain access to comparable curricular tools that were provided to the general educators, and taught in classrooms segregated from the general education classrooms and curricula (Roach, Chilungu, La Salle, Talaputra, & Vignieri, 2009). Al-Dosari (2006) investigated the effects of applying the GC to language development in first-grade students with HIs. The results revealed significant differences in the language development of students pre- and post-test. In addition, Al-Matrody (1995) explored the curricula for children with HIs in Saudi Arabia. The results revealed a lack of an appropriate special curriculum for auditory and speech training.

Most previous studies focused primarily on school curricula; studies on KG curricula are more rare. The main aim of this study is thus to explore the KG curriculum, which presents information in a national context that is underrepresented in the literature on the education of children with HIs. It is hoped that this study will provide knowledge that could help in the development and improvement of curricula for HI children. The current study also contributes valuable knowledge to the field of special education in Jordan. This is an important study in light of increasing worldwide attention to curricula and the lack of studies on curricula for children with HIs. The Ministry of Education (MOE) and curriculum planners will find this study a resource for improving the curriculum for children with HIs. Consequently, this study aims to describe the current status of the KG curriculum in Jordan and the educational experiences of children with HIs.

**Jordanian context**

KG was integrated into the Jordanian educational system in 1988 as a result of educational reform convention (MOE, 2010). In 1999, Jordan established an official KG for children between the ages of four and six years of age (Slioa, 2005). In 2003, the MOE launched ‘Education Reform for the Knowledge Economy’. This process consists of four components, with the fourth focusing on KG (MOE, 2013a). In 2004, MOE developed the national interactive curriculum for KG. In 2013, MOE released a modified outcomes document for KG to be suitable for children with HIs and to help teachers design activities and experiences for such children (MOE, 2013b).

Jordanian preschool education includes children from the age of three years and eight months to five years and eight months. Preschool is non-compulsory and is offered by both private organizations and the state (International Bureau of Education, 2010/2011).

El-Zraigat and Smadi (2012) maintain that students with HIs in Jordan (a) are taught by general teachers who were prepared to teach students without disabilities and who mostly teach in general schools supervised by the MOE, (b) study the same curricula as students without disabilities, or (c) study at schools unprepared and not designed for students with HIs.

Currently, there are 10 segregated schools – the Al-Amal Schools – for children with HIs in Jordan. They serve more than 755 students from KG to Grade 6. Approximately 145 teachers provide specialized services. Special education is provided in a dedicated unit in the school, participating with their peers in arts and sports activities and spending breaks with their schoolmates. There are special primary schools and special classes in many of the general schools for children with HIs (Abu-Hamour & Al-Hmouz, 2013). Seven of these schools have KGs (MOE, 2014). These KGs apply the ‘National Interactive Kindergarten Curriculum’, which was developed based on developmental standards for Jordanian children without disabilities (MOE, 2010). In addition, these KGs apply the ‘General Framework and General and Specific Outcomes for KG Curriculum of Children with HIs’, developed in 2013 (MOE, 2013b). El-Zraigat and Smadi (2012) reported that MOE assumed full responsibility of educating students with HIs and established The Directorate of Special Education, with 10 schools to meet the special needs of this group of students.
Method

Sample

The sample consisted of 15 female KG teachers holding full-time teaching positions in deaf schools in Jordan. Such a predominance of females is characteristic of the early childhood educational sector in Jordan. The 15 plans and class schedules were analysed in terms of content representing each of the curriculum experiences. Ethical approval for the study was obtained from Institutional Review Board at the Hashemite University.

Data collection

Multiple data collection methods were used during this study. First, the researchers requested a copy of the teacher’s weekly schedule and an instructional plan. Second, the researchers conducted a semi-structured interview protocol consisting of questions about the participants’ perceptions of the curriculum, its components, academic experiences, the daily schedule, and ECC domains. The interview lasted between 30 and 60 minutes. ECC domains were identified based on the ECC for students with HIs issued by the Iowa Department of Education (2013). Third, field observations were made of KG practices in relation to the curriculum, such as learning resources, daily routine, learning environment and the corner system.

Data analysis

Qualitative content analysis was used to analyse the data. For each piece of data, the initial coding consisted of creating in vivo codes, or codes containing verbatim utterances from teachers. These codes were then reviewed and compared across several pieces of data and several sources, leading to identification of themes in the curriculum (Marshall & Rossman, 2006). Coding was checked for substantive significance (Patton, 2002) and triangulation across participants and documents was conducted before themes were finalized. All stages of data analysis proceeded using the Arabic language and only the emerging themes and some selected exemplary excerpts were translated into English. The multiple data sources were triangulated to enhance validity and reliability (Gay, Miles, & Airasian, 2009). Prior to analysis, transcripts were given to participants for member checking (Marshall & Rossman, 2006).

The content analysis of the plans and class schedules involved carefully scrutinizing each of their texts for evidence of curriculum content. Each incidence was recorded. Descriptive analysis was then used to produce percentages and frequencies.

Research findings

Data were codified according to specific categories. Four themes were identified from the data analytic process: state of confusion in relation to the curriculum, learning domains, ECC, GC, corner system, and teachers’ concerns about the curriculum.

State of confusion in relation to the curriculum

Analysis of the interviews revealed that there is a state of confusion, inconsistency and heterogeneity among KGs in relation to the curriculum. Teachers reply regarding their own experience in imparting the curriculum content. No general framework exists whereby the KGs are organized and coordinated and there is no reference book, teacher guidebook or ECC for instructing children with HIs. Although there is a document entitled Outcomes for KG of Children with HIs, developed by MOE in 2013, most of
the schools do not receive it or it remains abandoned in school stores or bookcases. They receive neither training nor even an instructive meeting with MOE.

Some KGs depend on the outcomes document; others, on their plans. Few depend on the GC. In general, none uses IEP or IIP, considering these to be burdens. They fail to admit their importance as a cornerstone of programmes for children with HIs. In addition, examination of the plans in each KG revealed that all KGs used general plans, similar to those used in regular KGs. One KG lacked even a weekly schedule, with instruction depending solely upon the teacher. Teachers are free in their schedules.

The following excerpts exemplify participants’ sentiment on these issues.

Suha indicated: ‘I need support, I need someone tell me about which road I should follow. I feel that I am lost.’  
Salma said: ‘There are some plans and papers which I collected through my career history. However, they are not sufficient at all’.
Laila related the following: ‘ECC?! We don’t develop it; we depend on our own plans. We develop our learning material and resources.’

**Learning domains**

Data analysis of weekly schedules revealed that types of academic learning experiences varied slightly among Jordanian KGs. Table 1 shows the time (in number of weekly periods) assigned for each domain in each KG.

The results indicate that, overall, non-academic experiences accounted for 36.6% of the day. Of that, the most time, 40%, was devoted to language experiences, while the least time, 23.3%, was devoted to academic experiences (Table 1).

The results indicate that 26.6% of time periods are devoted to speech treatment. Art, and science accounted for 10% of the day. Writing, Physical Education, and English accounted for 6.6% of the day. Mathematics accounted for 13.3% of the day, whilst the least time, 3.3%, was devoted to Hearing Training, Religion, Speaking, Social Sciences, playing, and free activity (Table 2).

Field observation and plans analysis revealed that writing is used in most of the instruction. All subjects have linked material with printed words.

Analysis of instruction plans and field observation revealed the nature of academic learning experiences. Almost all KGs are similar in their approach to teaching language. The teachers teach reading and writing Arabic letters, the shapes of each letter, short and long syllables, tracing practices to draw shapes, reading and writing simple words, such as a child’s name, and expressing phrases for self and directions. In mathematics, they teach pre-mathematics or readiness concepts, such as tall/short, shapes, times concept, colours and numbers (such as number concept, automatic counting, reading and writing numbers and number ordering).

For English, teachers teach children minimal skills. Most KGs do not teach English as a second language. For Islamic religion education, teachers teach children short verses from the Quran in print format and SL, Islamic greeting and the importance of thanks to God. KGs that teach science include lessons on natural phenomena, such as the seasons, clouds, familiar animals, plants and

<table>
<thead>
<tr>
<th>Domain</th>
<th>Frequencies (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic</td>
<td>7 (23.3%)</td>
</tr>
<tr>
<td>Non-academic</td>
<td>11 (36.6%)</td>
</tr>
<tr>
<td>Language</td>
<td>12 (40%)</td>
</tr>
</tbody>
</table>
plant life cycles. In the speaking domain, some KGs teach scientific concepts, such as body parts, atmosphere, vegetables, fruits and animals. Other KGs teach children useful sentences in communication, such as the child’s sex, places and how to follow directions.

In speech treatment, children are taught how to pronounce letters and simple words. In hearing training, children are trained in breathing control, voice awareness, intensity and tone of voices, feeling and awareness of pronunciation parts, voice production, improving residual hearing, voice discrimination and voice direction. In the social sciences, teachers teach children about family, their country and the rational consumption of resources. Analysis did not reveal the nature of experiences in physical education, art, playing and free activity. However, these four domains are mentioned in weekly schedules.

### Expanded Core Curriculum

Findings from analysis of the interviews, plans analysis and weekly schedules revealed that these types of ECC experiences are scarce in the KGs studied here. There is no systematic instruction of ECC domains. Teachers teach some domains of ECC based on their personal experience. Teachers were surprised when asked about ECC, and requested an explanation about the meaning of ECC. This is true for most of its domains: Audiology, Career Education, Communication, Family Education, Functional Skills for Educational Success, Self-Determination and Advocacy, Social-Emotional Skills and Technology (Iowa Department of Education, 2013).

The findings from instruction plan and field observation analysis revealed the nature of ECC experiences. First, Audiology: children are taught to understand and accept their hearing loss by focusing on being thankful to God. In relation to Amplification Management, teachers reported that they record the number and the kind of amplification aids, teach the child to recognize their hearing aid, and guide them on what to do if it is lost or if the battery runs flat. In relation to Environmental Management, the child trains by accidents based on degree of hearing; this is applied only in the school.

Second, Career Education: children are taught the roles of family members, group work, dealing with money and daily skills. Third, Communication: children are taught non-verbal communication, finger spelling, body language, speaking and investment of residual hearing. Fourth, Family Education: there are difficulties in his domain; however, KGs conduct meetings at the beginning of the year, then monthly. There is a lack of family involvement. Families are generally unaware of sign language or of how to communicate with their child and they do not adequately assist their child to progress.

Fifth, Functional Skills for Educational Success: children receive training on only language concepts, such as self-concept (me, I), questions and answers, performing some actions and

<p>| Table 2. Types of learning experiences occurring in KGs and the time allotted in number of weekly periods for each learning experience. |
|-----------------|-----------------|</p>
<table>
<thead>
<tr>
<th>No.</th>
<th>Subject</th>
<th>Frequencies (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Writing</td>
<td>2 (6.6%)</td>
</tr>
<tr>
<td>2</td>
<td>Hearing training</td>
<td>1 (3.3%)</td>
</tr>
<tr>
<td>3</td>
<td>Physical education</td>
<td>2 (6.6%)</td>
</tr>
<tr>
<td>4</td>
<td>Science</td>
<td>3 (10%)</td>
</tr>
<tr>
<td>5</td>
<td>Religion</td>
<td>1 (3.3%)</td>
</tr>
<tr>
<td>6</td>
<td>Math</td>
<td>4 (13.3%)</td>
</tr>
<tr>
<td>7</td>
<td>Art</td>
<td>3 (10%)</td>
</tr>
<tr>
<td>8</td>
<td>Speaking</td>
<td>1 (3.3%)</td>
</tr>
<tr>
<td>9</td>
<td>Social sciences</td>
<td>1 (3.3%)</td>
</tr>
<tr>
<td>10</td>
<td>Playing</td>
<td>1 (3.3%)</td>
</tr>
<tr>
<td>11</td>
<td>English</td>
<td>2 (6.6%)</td>
</tr>
<tr>
<td>12</td>
<td>Free activity</td>
<td>1 (3.3%)</td>
</tr>
<tr>
<td>13</td>
<td>Speech treatment</td>
<td>8 (26.6%)</td>
</tr>
</tbody>
</table>
communicating. Sixth, Self-Determination and Advocacy: this domain is significantly lacking. Children are taught to advocate their rights appropriately, such as taking back their property from their classmates. Seventh, Social-Emotional Skills: KGs concentrate on this domain, training children to treat with others with respect and to build friendships. Eighth, Technology: this domain is lacking. KGs do not possess technology devices. Teachers do not know the concept of assistive/adaptive technology for children with HIs.

In general, results revealed that there is a shortage in teaching ECC for children with HIs. However, ECC experiences are introduced to children by accident. The domains most lacking include self-determination, family education and technology.

**General curriculum**

Interviews revealed that not all teachers implement the GC. Many use picture cards and curriculum textbooks as activity papers. Two teachers indicated that they never consulted the GC. All teachers reported lacking sufficient knowledge related to all GC components and link this with the activity books only. For example, Shadia reported: ‘We sometimes used GC, its picture cards and letter cards’. Amal said, ‘I don’t use GC at all; I develop my own curriculum’.

**Corners system**

Field observation revealed that none of the classes used the corners system in implementing curriculum experiences. These methods are considered as classes for older students; tables and chairs are used to direct instruction. One KG has a separate room called the Corners Room, which is considered as a resource room and contains bookcases with aids, games and toys. Teachers have weekly slots to use the room to teach children.

**Teacher concerns related to the curriculum**

Interview analysis revealed that teachers have concerns about the curriculum of children with HIs. These include the absence of a suitable curriculum, having to depend upon personal experience in developing curriculum material, insufficient training related to the curriculum, and a shortage of specialized supervision – most supervisors are not specialized in teaching HIs or in special education. Other concerns include the unsuitability of GC for HIs, and the lack of technology and resources that assist in curriculum implementation. Supportive services, such as speaking treatment from specialized professionals, are lacking, although some teachers do introduce this service. Another concern is the lack of follow-up from families, which slows curriculum development.

**Discussion**

The aim of the current study was to conduct an in-depth investigation of the state of the KG curriculum for children with HIs in Jordan. A state of confusion about the curriculum was revealed. Teachers depend upon their own experiences in developing the curriculum. There is no general framework according to which to coordinate KG curricula. These results are consistent with previous studies, which indicate confusion in relation to curricula in the field of deaf education (Al-Matrody, 1995; Matar, 2004). It is a challenge to educate students with HIs, a challenge often exacerbated by a lack of remedial and educational programmes, as well as instructional and assessment tools (El-Zraigat & Smadi, 2012).

Teachers reported that they did not use IEP or IIP in teaching. All KGs used general plans, similar to those implemented in regular KGs. Teachers considered IEP and IIP a burden. This is consistent with Al-Zboon (2016), who reported that teachers did not consider IEP a curriculum component for children with HIs. However, many studies reveal a problem with the IEP practices of teachers.
example, El-Zraigat and Smadi (2012) reported that teachers are not well trained in the IEP domain. Fisher and Frey (2001) found a disconnection between the information of the students’ IEPs and the actual curriculum and instruction provided to students with HIs. Rittenhouse (2004) indicated that teachers of children with HIs often lack the skills necessary to develop IEP; however, the IEP process is a critical tool for ensuring that effective learning and increasing achievement occur for all students with disabilities (Thompson et al., 2001). In order for IEPs to serve as the primary means of facilitating curricular access and to improve student academic outcomes for students with disabilities, educational systems need to provide professional development and increase IEP quality monitoring to ensure that the goals and services outlined in the IEP are monitored and implemented as planned (Roach et al., 2009). From another perspective, Theeb, Mehedat, and Al-Zboon (2014) suggested that pre-service teachers believe in the importance of IEP. Research is required in the field of teacher competency in IEP preparation.

Furthermore, results showed that, overall, most time was devoted to the language experiences in deaf KG. Little time was devoted to writing, physical education, art, English, mathematics, hearing training, religion, speaking, the social sciences, playing and free activity. This is not unexpected, as HI affects a child’s ability to process linguistic information through hearing; this in turn affects his/her educational performance. The acquisition of speech skills by children with HIs requires early intervention with regard to speech development (Akcamete & Kargin, 1996). Lartz and Litchfield (2005) argued that speech and hearing training is the primary need for children with HIs, and that other subjects can receive less attention. Huish (2014) reported that more is expected from children with HIs in the subjects of mathematics and science.

This is consistent with a previous study of a regular KG, which found that KGs emphasized academic experiences (e.g. reading, writing and mathematics) rather than non-academic experiences, such as playtime (Ahmad, Fayez, & Al-Zboon, 2014). They also revealed that academic experiences accounted for 70% of the school day. Of that time, the most, 21%, was devoted to teaching Arabic, whereas the least, 10%, was devoted to teaching science. Daily, Burkhauser, and Halle (2012) indicated that one of the challenges in training young children is a high focus on language and mathematics and often exclusion of domains such as social–emotional development.

Field observation and plans analysis revealed that writing is used in most of the instruction. All subjects have linked material with printed words. This practice is consistent with recent research (e.g. Hoffeister & Caldwell-Harris, 2014), which describes a theoretical model of how children could, in principle, acquire a language via reading and writing. The model describes the stages of learning, which represent the successive, conceptual insights necessary for the second/foreign language learning via print. The model highlights the logical difficulties present when one cannot practise a language outside of reading/writing, such as the necessity of translating to a first language, the need for explicit instruction, and the difficulty that many children who are deaf experience in understanding figurative language. Language acquisition is thought to require social interaction, with meaning cued by extra-linguistic context. Therefore, the ability of some persons who are deaf to acquire language through print represents an overlooked human achievement worthy of greater attention by cognitive scientists.

Analysis revealed some ignorance of vital domains considered a main characteristic of the KG phase, such as physical education, art, playing, free activity and the corners system. However, modern trends in KG depend on playing, activity and the corners system in implementing the curriculum (Katz & Schery, 2006). El-Zaigat and Smadi (2012) reported that schools for students with HIs are inappropriately designed and ill-equipped. Most schools exist in normal buildings designed for housing and lack the facilities required by students with HIs.

The results revealed that ECC experiences are scarce in these KGs. There is no systematic instruction of ECC domains. Teachers teach some domains of ECC, based on their personal experience. This is consistent with El-Zaigat and Smadi (2012), who revealed that the planning and implementing extended curricula are generally inadequate.
Surprisingly, the results revealed that teachers do not implement GC, in conflict with modern accepted practices in the field of deaf education (e.g. Fisher & Frey, 2001; Roach & Elliot, 2006). Currently, there is a general consensus that, to the greatest extent possible, the curriculum for students with HIs should be the same as that of students without disabilities (Iowa Department of Education, 2013; Moores, 2001; Roach & Elliot, 2006).

Furthermore, the results reveal that teachers have many concerns related to the current KG curriculum for children with HIs. These concerns include the absence of a suitable curriculum, having to rely on their personal experiences in developing curriculum materials, insufficient training related to the curriculum, and a shortage of specialized supervision, as most of the supervisors are non-specialists in teaching HIs or special education. This is consistent with the findings of El-Zraigat and Smadi (2012), who reported that teacher require training in order to develop and acquire the skills needed for working with children with HIs, and that The Directorate of Special Education does not offer any kind of supervision to teachers working at schools for students with HIs.

Another concern is the lack of technology and resources currently available to assist with curriculum implementation. There are no supportive services, such as speech therapy with specialized professionals. Some teachers introduce this service. However, these domains are identified as vital in the education of those with HIs (e.g. Iowa Department of Education, 2013).

Another vital concern is the lack of follow-up from families, which undermines curriculum progress. This result is consistent with Al-Khateeb (2011) and Baarat and Zureiqat (2012), who reported that parental involvement remains relatively limited in programmes for children with disabilities. There is evidence in the education literature (e.g. Abdullah, 2003; Smadi, 2001) of the efficacy of the programme with the participation of the family: their roles were supportive in the implementation and success of programmes for children with disabilities. Nationally, the MOE and the US Agency for International Development have launched a call for the parental involvement invitation in 2003 to improve parenting skills (Kaga, 2007). However, results of this study indicate that KGs for children with HIs might be ignored in parental involvement programmes.

Conclusion

There is confusion about the state of the KG curriculum for Jordanian children with HIs, and a comprehensive reform process is required. This process should emphasize many areas. First, MOE should include IEP and IIP, GC access (academic and non-academic aspects) and ECC domains in the education of children with HIs. Second, MOE should emphasize the vital domains considered main features of the KG phase, such as art, playing, free activity and the corners system. Third, MOE should deal with teachers’ concerns related to the curriculum of children with HIs. MOE should provide sufficient training in relation to the curriculum, specialized supervision, technology and resources helping in curriculum implementation, supportive service and parental involvement programmes.

A limitation of the current study is its dependence on written plans in determining the type and time allotted for curriculum experiences. Further research is required to determine the differences between these written experiences and actual experiences. Future studies could use the observation technique to observe daily routines and identify experiences, instead of relying upon the content analysis of plans and interview data.

Note

1. All names are pseudonyms.

Disclosure statement

No potential conflict of interest was reported by the author.


Notes on contributor

Eman K. Al-Zboon is an assistant professor at Queen Rania Faculty for Childhood. She received her PhD in Special Education from the University of Jordan in 2012. Her research interests focus on children, women with disabilities, and current trends in special education.

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