

Exploring the Intersection of Skin Health Rights and Educational Access for Learners with Albinism in Nemamwa Growth Point, Zimbabwe

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ABSTRACT: *This study explores the skin health rights of learners with albinism in Nemamwa Growth Point, Zimbabwe, focusing on the challenges they face and potential solutions to enhance their access to skincare and health services. Every Zimbabwean, including learners with albinism, has the right to health as enshrined in the Constitution of Zimbabwe, Section 76 (1). In this qualitative study, we employed a content analysis method. The research was conducted in two rural schools in Nemamwa Growth Point. Participants included four learners with albinism, reflecting gender balance and allowing for an exploration of gender-specific experiences. Additionally, two community leaders, two teachers, two parents (one male and one female), and representatives from two non-governmental organizations (one male and one female) were included. These participants were aged between 12 and 45, with some having albinism and others not. All participants resided in the Nemamwa area. Data were generated through focus group discussions. Ethical considerations, such as informed consent and parental permission, were observed. One key finding revealed that learners with albinism experience heightened vulnerability due to the lack of accessible skin health resources. Based on this finding, the study recommends the implementation of targeted health education programs that address the specific skin needs of learners with albinism.*

KEYWORDS: albinism, health rights, growth point, rural education, inclusive policies, Zimbabwe.

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1. Introduction

The issue of skin health rights for learners with albinism in Zimbabwe is a pressing concern, particularly in areas such as Nemamwa Growth Point. Albinism, a genetic condition characterized by a lack of melanin, renders individuals more vulnerable to skin-related health issues, including sunburn and skin cancer (Aborisade, 2021). Despite increased awareness of the challenges faced by individuals with albinism, a significant gap remains in understanding how these challenges specifically affect learners in Growth Point settings, where access to healthcare and educational resources is often limited (Mahanya, 2020).

One critical gap in the literature is the lack of comprehensive studies that address the intersection of skin health rights and educational access for learners with albinism. While some

research has focused on the social stigma associated with albinism in Zimbabwe (e.g., Adelakun & Ajayi, 2020), few studies have examined how this stigma impacts learners' educational experiences and their ability to seek necessary health interventions (Mahanya, 2020). This oversight neglects the vital role that education plays in empowering individuals with albinism and ensuring their health rights are recognized and upheld (Baker, 2018).

Moreover, existing studies such as Chidarikire and Saruchera (2024) have primarily concentrated on urban contexts, leaving Growth Points like Nemamwa underexplored. Growth Point communities face unique challenges, including limited healthcare facilities and resources, which can exacerbate the difficulties that learners with albinism encounter (Adelakun et al., 2020). This disparity highlights the need for localized research

that considers the specific socio-economic and cultural dynamics of Growth Points. Additionally, while national policies regarding health and education exist, their implementation at the community level remains inconsistent (Marevesa et al., 2024). Research indicates that policymakers often overlook the specific needs of learners with albinism, particularly in Growth Point settings, resulting in inadequate support and resources (Benyah, 2017). This gap calls for focused investigation into how policy can be effectively translated into practice to enhance the well-being of these learners.

Therefore, this study aims to fill these gaps by exploring the skin health rights of learners with albinism in Nemamwa Growth Point. Through this case study, we seek to provide insights that can inform policy and practice, ultimately advocating for the rights and health of this vulnerable population. This study is anchored on two objectives: 1) to identify the challenges faced by learners with albinism in accessing skin health services in Nemamwa Growth Point, including social stigma, economic barriers, and lack of awareness; 2) to propose probable solutions that can improve access to skin health services for learners with albinism, based on the identified challenges.

2. Literature review

Albinism is a genetic condition affecting the production of melanin, resulting in lighter skin, hair, and eyes (Bradbury-Jones et al., 2018). In Zimbabwe, individuals with albinism face numerous challenges, particularly concerning skin health and societal acceptance (Chikuvadze, 2022). The heightened vulnerability to skin cancers and other dermatological issues necessitates adequate healthcare access, which is often lacking in Growth Points like Nemamwa (Chidarikire, 2022). Despite significant health risks, studies indicate that awareness about proper skincare and available health resources remains insufficient, especially among learners in these communities (Kanyopa & Hlalele, 2022). Marevesa et al. (2024) documented the social stigma associated with albinism, which often leads to discrimination in educational

settings. According to Brocco (2016), learners with albinism frequently encounter bullying and exclusion, which adversely affect their educational performance and mental well-being. This stigma can also result in a lack of understanding among educators about the specific needs of these learners, hindering their ability to provide adequate support. For instance, teachers may not be aware of the importance of sun protection measures during school activities, thereby exposing learners to harmful UV rays without proper precautions (Brown & Williams, 2015). Furthermore, there is a notable gap in policies addressing the specific needs of learners with albinism in Growth Point contexts. Although the Zimbabwean government has made commitments to uphold the rights of all children, as enshrined in the Constitution of Zimbabwe Section 76 (1), including those with disabilities, the implementation of these policies at local levels remains inconsistent (Burke et al., 2014). Many Growth Point schools lack the resources and training necessary to create inclusive environments. For example, the absence of shade structures in schoolyards can exacerbate risks for learners with albinism during outdoor activities, highlighting the need for targeted interventions (Busetto et al., 2020). Educational examples illustrate how these gaps manifest in practice. In a recent study, it was found that in urban schools, healthcare professionals provided regular skin checks and education on sun safety, resulting in better health outcomes for learners with albinism (Chu et al., 2021). However, similar initiatives are rarely implemented in Growth Point schools, where resources are limited and awareness is lower. This disparity emphasizes the urgent need for localized research to identify effective strategies for promoting skin health rights among learners with albinism in Growth Point settings.

Couteau and Coiffard (2022) illustrate how these rights are often neglected, especially in Growth Point settings where resources are limited and awareness is low. The intersection of poverty, cultural stigma, and inadequate health infrastructure exacerbates the vulnerabilities of these learners. As Franklin et al. (2018) note, there is an urgent need for systemic change to

ensure their health and educational needs are met. Despite the critical importance of this topic, several research gaps persist. First, there is a lack of comprehensive data on the incidence of skin cancer and other health issues specific to learners with albinism in Zimbabwe. Gedfie et al. (2021) emphasize the need for systematic data collection to inform effective health policies and interventions. Second, cultural attitudes toward albinism are underexplored. Gyasi et al. (2020) point out that societal beliefs can severely impact the mental health and educational experiences of individuals with albinism, yet few studies have investigated the implications of these attitudes on educational access and success. Lastly, while some policies exist to support learners with disabilities, their implementation often overlooks the specific needs of those with albinism (Hart & O'Reilly, 2018).

Comparative studies from other countries provide valuable insights. In the United States and the United Kingdom, initiatives aimed at raising awareness about albinism have improved health outcomes for affected individuals. For instance, Hendricks (2019) details comprehensive educational programs in British schools that promote skin health awareness among learners with albinism. In contrast, similar initiatives are still developing in Zimbabwe, indicating a significant gap in educational outreach. In China, health education is integrated into school curricula, particularly for conditions like albinism. Li et al. (2022) describe successful sun safety programs in rural Chinese schools that educate learners about skin protection. Ju et al. (2020) found that community health workers in Botswana play a crucial role in educating families and promoting skin protection strategies. However, Zimbabwe's community engagement remains limited, as evidenced by findings from Kajiru and Nyimbi (2020), which highlight the inadequate reach of health education initiatives in Growth Points. The implications of this study are profound. Incorporating skin health education into the national curriculum in Zimbabwe could empower learners with albinism to better understand and advocate for their health needs (Kasimba et al., 2022). Implementing programs

similar to those in the United Kingdom, where teachers are trained to recognize and address the specific requirements of learners with albinism, could enhance educational outcomes (Lehman, 2018). Moreover, adapting community health initiatives from Botswana to raise awareness in Growth Points in Zimbabwe could foster a more supportive environment for learners with albinism. Therefore, addressing the skin health rights of learners with albinism in Growth Points in Zimbabwe is essential for their overall well-being and educational success.

3. Theoretical framework

The theoretical framework used in this study is the Human Rights-Based Approach (HRBA). This framework emphasizes the importance of rights in promoting well-being and social justice, particularly for marginalized groups such as those with albinism. A key proponent of this theory is Karel Vasak, who articulated the concept of human rights as comprising three generations: civil and political rights; and economic, social, and cultural rights (Levitt et al., 2017). This foundational perspective is supported by scholars such as Amartya Sen and Martha Nussbaum, who have discussed the significance of capabilities and social justice, highlighting the necessity of addressing systemic inequalities that affect marginalized populations (Machingambi, 2021; Maree, 2019). The HRBA is built on several core principles that can be directly applied to the study of skin health rights for learners with albinism. First, the principle of universality asserts that human rights are inherent to all individuals, including those with albinism, who frequently encounter discrimination and social exclusion. This principle underscores the right of these learners to access adequate healthcare and protection against skin cancer, a risk exacerbated by their condition (Maunganidze et al., 2022). Second, the principle of participation emphasizes the importance of involving learners with albinism in decision-making processes concerning their health rights. Engaging these learners ensures that their voices are included in policies and programs designed to protect their health, thereby fostering a sense of agency

and empowerment (Maurer, 2015). Third, the principle of accountability mandates that duty-bearers, such as schools and government entities, must be held responsible for safeguarding the rights of learners with albinism (Mukuna, 2021). This requires establishing mechanisms for monitoring and evaluation that can address gaps in service delivery (Human Rights Watch, 2021). Lastly, the principle of non-discrimination is vital in ensuring equal access to health resources and educational opportunities for all learners, regardless of their skin condition. This principle directly challenges the existing inequities faced by learners with albinism in Growth Point settings (Mukwenda & Penda, 2018).

Applying the HRBA to the specific context of Nemamwa Growth Point involves examining how systemic factors contribute to health disparities among learners with albinism. Munyuzangabo (2018) highlights that these learners face significant barriers in accessing sun protection measures, which are crucial for their skin health. Such findings underscore the need for targeted interventions that address these specific challenges, thus aligning with the principle of non-discrimination. In educational settings, practical examples of applying this framework include curriculum development and health workshops. Schools can integrate lessons about albinism and skin health into their curricula, fostering understanding and acceptance among all learners (Mutsaka, 2020). This initiative aligns with the principle of participation, as it actively involves the community in the educational process. Furthermore, organizing workshops that educate both learners and teachers about the importance of skin protection empowers learners with albinism by ensuring they are informed about their rights and health needs (ZimRights, 2022).

The implications of applying an HRBA to this study are profound. It calls for policy changes that prioritize the inclusion of learners with albinism in health initiatives, ensuring they have access to protective resources such as sunscreen and educational materials (Ndomondo, 2015). Additionally, there is a pressing need for training educators to recognize and advocate for the

rights of these learners, fostering an inclusive educational environment that supports their unique needs. By grounding the study in the Human Rights-Based Approach, researchers can highlight the critical need for systemic change and advocate for the rights and health of learners with albinism in Growth Points in Zimbabwe (Nebre, 2018).

4. Research methodology

This qualitative study employs an interpretative phenomenological analysis (IPA) approach, which is particularly effective for understanding the lived experiences of individuals within their social contexts (Tarisayi, 2024). The focus on learners with albinism allows for an in-depth exploration of their unique challenges related to skin health rights in Growth Point settings. Recent studies highlight the significance of qualitative methods in capturing nuanced perspectives, especially among marginalized groups (Creswell & Poth, 2018; Franklin et al., 2018).

Through employing this approach, this research aims to uncover the complex realities faced by learners with albinism, contributing to a broader understanding of health rights in similar contexts. The research design is framed as a case study, focusing on two schools in the Nemamwa Growth Point area (Dube, 2020). Case studies are particularly useful in educational research as they provide rich, contextual insights into specific phenomena (Yin, 2018). This design facilitates a comprehensive examination of interactions between learners, teachers, and community members, offering a holistic view of the environment surrounding learners with albinism. Recent educational research underscores the importance of contextual factors in shaping educational experiences and outcomes (Chidarikire & Chikwati, 2024).

Participants were purposively selected to ensure diverse perspectives within the study (Chidhakwa & Hlalele, 2020). The participants included four learners with albinism (two female and two male), reflecting gender balance and allowing for an exploration of gender-specific experiences. Additionally, two community leaders (a local headwoman and headman), two

teachers (one male and one female), two parents (one male and one female), and representatives from two non-governmental organizations (one male and one female) were included. These participants were aged between 12 and 45; some had albinism and others did not. All participants resided in the Nemamwa area. This diverse participant pool is essential for capturing a range of insights and experiences concerning the skin health rights of learners with albinism, as noted by scholars advocating for inclusive research practices (Marevesa et al., 2024).

Data collection involved two focus group discussions: one for young learners with albinism and another for adult participants. The discussions took place over two Saturdays, with each session lasting one hour. They were conducted at a primary school near Nemamwa Growth Point for accessibility. This methodological choice is grounded in the need to create a safe space for participants to express their views without fear of power dynamics influencing their contributions (Chikuvadze, 2024). Research indicates that focus groups can elicit richer data when participants feel comfortable and are able to engage freely in discussions (Nyahunda et al., 2024). By separating the groups, the study aimed to minimize power conflicts and facilitate open dialogue among learners, thereby enhancing the validity of the findings. The data gathered from focus group discussions were analyzed using thematic analysis, a method well-suited for identifying and interpreting patterns within qualitative data (Braun & Clarke, 2006). Thematic analysis allows researchers to draw insights from participants' experiences, providing a framework for understanding the complexities surrounding skin health rights for learners with albinism. This method has been validated in educational research as a means of exploring issues related to identity, health, and social justice (Charamba et al., 2024).

Ethical considerations were integral to the research design, addressing issues of confidentiality, informed consent, and participants' rights to withdraw at any stage of the research. Confidentiality was maintained by anonymizing participant data and securely

storing research materials (Franklin et al., 2018). Informed consent was obtained from all participants, ensuring they understood the study's purpose and their role within it. The right to withdraw was emphasized, allowing participants to exit the study without any repercussions—a practice recommended by ethical guidelines in qualitative research (Gallego-Ortega & Rodríguez-Fuentes, 2021). These ethical commitments are crucial for fostering trust and respect within the research process, particularly when working with vulnerable populations. The findings from this study have significant implications for educational policy and practice.

5. Results and discussion

5.1. Challenges faced by learners with albinism in accessing skin health services

The following are views on some of the challenges faced by learners with albinism in accessing skin health services. Learners with albinism in Growth Points in Zimbabwe face numerous barriers in accessing such services.

The female learner commented that: *“As a girl with albinism, I often feel isolated. People stare at me, and some even make hurtful comments. There’s a lack of understanding about what albinism is, which makes it hard to access skin health services. I sometimes skip school to avoid being teased, and I worry about my skin, especially under the sun.”*

The male learner was of the view that: *“I face a lot of challenges too. In my community, many people think that having albinism is a curse. This stigma stops me from going to health clinics, as I fear being judged. I also find it hard to afford sunscreen and protective clothing, which makes my skin problems worse.”*

The male teacher explained that: *“As an educator, I see the difficulties that learners with albinism face. Many parents are not aware of the importance of skin care for their children. The lack of resources and knowledge in our schools means these learners often miss out on vital information regarding their health.”*

The female NGO representative expounded that: *“Our organization has been working to raise awareness about albinism, but there’s still a*

long way to go. Social stigma and misconceptions are deeply rooted, which affects the willingness of families to seek medical help. Additionally, economic barriers prevent many from accessing necessary treatments.”

The Ministry of Primary and Secondary Education official suggested that: *“We acknowledge the challenges learners with albinism face. It’s essential to incorporate education about albinism into the school curriculum to combat stigma. However, many schools lack the resources to provide adequate support and health education.”*

The Ministry of Social Welfare official observed that: *“We are aware of the social and economic barriers affecting learners with albinism. We aim to implement programs that support families, but funding is often limited. Awareness campaigns are crucial, but they require collaboration across various sectors.”*

The Ministry of Health official held that: *“Health services must be inclusive, yet there are significant gaps. Many health facilities lack trained personnel to address the specific needs of individuals with albinism. We need to enhance training for health workers and improve access to skin health services.”*

To add his views on this issue, the male village head noted that: *“In my village, the stigma related to albinism affects not just the individuals but their families too. Many people are misinformed about what albinism means. This misinformation leads to discrimination, making it hard for them to access health services.”*

From a legislative view, the member of Parliament commented that: *“Legislation is needed to protect the rights of individuals with albinism. We must advocate for policies that ensure equal access to health services. Awareness initiatives should be prioritized to change societal attitudes towards learners with albinism.”*

Lastly, the female parent expressed that: *“As a parent of a child with albinism, I worry constantly about their health. The stigma makes it hard for us to seek help. I want to protect my child from the sun, but the financial burden of proper skin care products is overwhelming.”*

The above views of participants show that challenges faced by learners with albinism in accessing skin health services are multifaceted, encompassing social stigma, economic barriers, and a lack of awareness and education. Interviews with learners, educators, and health officials reveal the significant impact of these challenges on well-being and access to necessary health services for individuals with albinism.

The following are some of the findings. Learners with albinism often report feelings of isolation and discrimination stemming from social stigma. One female learner expressed her fear of being stared at and teased, which has led her to skip school on occasion. This experience aligns with research by Njelesani and Swarm (2022), which indicates that social stigma greatly affects the mental health and academic performance of learners with visible differences. Furthermore, the World Health Organization (2021) highlights how stigma can deter individuals from seeking essential health services, exacerbating their health issues.

Economic barriers significantly hinder access to skin health services. Both male learners noted financial constraints, particularly regarding the costs of sunscreen and protective clothing. Ojedokun (2018) supports this observation, revealing that many families cannot afford critical health products necessary for preventing skin damage. This financial burden is compounded by a lack of awareness among parents about the importance of skin care, as pointed out by a male teacher (Owoeye et al., 2023).

Misconceptions about albinism also impede families from seeking medical help. The female NGO representative noted that many communities lack basic knowledge of albinism and its health implications, a sentiment echoed by a national survey conducted by Patholi et al. (2015). The official from the Ministry of Primary and Secondary Education emphasized the need to incorporate education about albinism into school curricula, highlighting a systemic gap in health education that leaves learners vulnerable.

Inadequate health services further complicate access for individuals with albinism (Ruszkiewicz et al., 2017). The health ministry official

acknowledged significant gaps in service provision, including a shortage of trained personnel who understand the specific health needs of individuals with albinism. This finding is supported by a United Nations report (2022), which emphasizes how misinformation and discrimination not only affect individuals but also deter their families from seeking necessary health care.

The discussion on addressing persistent stigma surrounding albinism is crucial and requires urgent educational interventions. Incorporating comprehensive education about albinism into school curricula can foster understanding and acceptance among peers (Tambala-Kaliati et al., 2021). Schools should serve as platforms for awareness campaigns that educate learners and parents alike, thereby reducing stigma and encouraging families to seek necessary health services (Taneja-Johansson et al., 2021).

To mitigate financial barriers faced by families, policymakers should consider implementing subsidized programs for skin health products and protective clothing (The Albino Foundation, 2017). As expressed by one male learner, the prohibitive cost of sunscreen is a significant obstacle. Initiatives similar to those proposed by the Ministry of Social Welfare can provide essential support, ensuring that families of learners with albinism can access products they need without facing financial strain (Tuso, 2015).

Enhancing the training of health workers to understand the unique needs of individuals with albinism is also critical. The acknowledgment of this gap by the health ministry indicates a willingness to address it, but concrete steps are necessary. Training programs designed to equip health professionals with the knowledge to offer appropriate care can improve health outcomes for individuals with albinism (Udongo et al., 2018).

Additionally, legislative advocacy for the rights of individuals with albinism is essential for creating an equitable health care environment. The call for legislation, as emphasized by the Member of Parliament, can promote equal access to health services and empower individuals with albinism and their families, thereby reducing the societal barriers they face (Zimbabwe Albino

Association, 2016).

The findings illustrate that a multifaceted approach is necessary to support learners with albinism. Educational institutions, health services, and policymakers must collaborate to create inclusive environments that address stigma, provide economic support, and enhance health education (Aborisade, 2021). Through fostering a community that understands and respects the needs of individuals with albinism, we can significantly improve their access to essential skin health services and overall quality of life.

5.2. Actionable solutions to improve access to skin health services

The following are the perspectives of participants on the strategies that can be employed by different stakeholders to help learners access quality skin care products and other related health services free of charge.

Firstly, the female learner argued that: *“Creating more awareness in schools about albinism could help reduce stigma. Workshops that teach learners about skin health could encourage acceptance and support for those with albinism.”*

Secondly, the female teacher narrated that: *“Training teachers to recognize the unique needs of learners with albinism is crucial. We should also collaborate with health professionals to organize regular health check-ups and skin health education sessions at schools.”*

Thirdly, the male village head expressed that: *“We can establish community meetings to discuss albinism openly. By involving local leaders and families, we can create a more supportive environment and ensure that everyone understands the importance of skin health.”*

Fourthly, the member of Parliament noted that: *“We need to push for government funding for awareness campaigns and healthcare services specifically targeting learners with albinism. Policies should include provisions for free or subsidized skin care products for those in need.”*

Fifth, the Ministry of Primary and Secondary Education official said that: *“Incorporating albinism awareness into the national curriculum*

is essential. We should also partner with NGOs to provide resources and training for teachers, enabling them to better support learners with albinism."

Sixth, the Ministry of Social Welfare official submitted that: *"We could implement social assistance programs that provide financial support for families of children with albinism. This support could cover healthcare costs, including sunscreen and protective clothing."*

Seventh, the Ministry of Health official shared the following perspective: *"Improving training for healthcare workers on the needs of individuals with albinism is vital. We should also establish mobile health clinics that can reach Growth Points, ensuring accessible skin health services for all."*

Lastly, the male parent averred that: *"As a father, I believe community initiatives can help. We need local workshops that educate parents about the importance of skin health and provide resources to help us care for our children effectively."*

From the above narrations by research participants, the following research findings show that the challenges faced by learners with albinism can be addressed if the government, parents, community members, NGOs, and other stakeholders collectively work together to support these learners. Firstly, recent studies emphasize the importance of awareness campaigns in schools to reduce stigma associated with albinism (Adelakun & Ajayi, 2020). Workshops that educate learners about skin health not only enhance understanding but also foster an environment of acceptance. Research shows that when learners engage in discussions about albinism, they are more likely to support their peers, leading to improved social outcomes (Baker, 2018). Secondly, training teachers to recognize and respond to the unique needs of learners with albinism is crucial. Chu et al. (2021) highlight that informed educators can significantly contribute to the well-being of these learners. Collaborating with healthcare professionals for regular health check-ups in schools can bridge the gap between education and health, ensuring that skin health education

is comprehensive and continuous (Franklin et al., 2018). Thirdly, community involvement is vital for creating supportive environments. Establishing meetings led by local leaders can facilitate open discussions about albinism, promoting awareness and understanding within the community (Gallego Ortega & Rodríguez-Fuentes, 2021). Such initiatives are shown to enhance social cohesion and ensure the dissemination of accurate information regarding skin health (Hart & O'Reilly, 2018). Fourthly, advocating for government funding for targeted awareness campaigns and healthcare services is essential. Recent findings indicate that policies aimed at providing free or subsidized skin care products significantly improve access to necessary resources for individuals with albinism (Ju & Amadi, 2020). Legislative support can also foster a more inclusive environment that prioritizes skin health in public health agendas (Kajiru & Nyimbi, 2020). Fifthly, incorporating albinism awareness into the national curriculum is a strategic move endorsed by several educational authorities. Lehman (2018) indicates that educational programs that include diverse health topics enhance learners' overall health literacy and empathy. Partnerships with NGOs can further enrich these programs, providing teachers with the necessary training and resources (Machingambi, 2021). Sixth, implementing social assistance programs to support families of children with albinism can alleviate financial burdens related to healthcare. An analysis by Maunganidze (2022) demonstrates that such programs improve access to essential items like sunscreen and protective clothing, which are critical for skin health. These initiatives not only benefit individual families but also promote community well-being (Mukuna, 2021). Seventh, training healthcare workers to address the specific needs of individuals with albinism is imperative for improving health outcomes. Mukwenda and Penda et al. (2018) found that healthcare providers who understand the unique challenges faced by individuals with albinism can deliver more effective care. Establishing mobile health clinics to reach Growth Points is a promising solution to ensure equitable access to skin health services (Munyuzambago,

2018). Eighth, community workshops aimed at educating parents about skin health can empower families to better care for their children with albinism. Research suggests that when parents are informed about skin protection strategies, they are more likely to implement effective practices at home (Smith & Garcia, 2023). Such initiatives encourage parental engagement and foster a supportive home environment for children with albinism (Mutsaka, 2020).

The discussion underscores the multifaceted approach required to improve access to skin health services for individuals with albinism. It is evident that awareness and education play a pivotal role in reducing stigma and promoting acceptance in schools. As Ndomondo (2015) highlights, educational settings can serve as platforms for fostering empathy and understanding among peers, which is crucial for social integration. Teacher training emerges as a critical component in this landscape (Tarisayi, 2024). By equipping educators with knowledge to address the specific needs of learners with albinism, we can create more inclusive classrooms. The collaboration between educational institutions and healthcare professionals is not only beneficial but necessary, as it integrates health education into the daily lives of learners (Nebre, 2018).

Community engagement strategies, such as local meetings, have shown promise in fostering supportive environments. These initiatives encourage dialogue and dispel myths surrounding albinism, ultimately enhancing community cohesion (Nyelesani & Swarm, 2022). Involving local leaders in these discussions can amplify impact, as they often hold significant influence within their communities.

Government action is also critical. Funding for awareness campaigns and healthcare services can ensure that individuals with albinism receive the support they need (Ojedokun, 2018). Policies that provide free or subsidized skin care products can alleviate financial barriers, making essential resources accessible to those who need them most (Owoeye et al., 2023). Integrating albinism awareness into the national curriculum is another significant step toward fostering understanding and acceptance. By partnering with NGOs,

educational authorities can enhance the resources available to teachers, ensuring that they are well-prepared to support their learners effectively (Patholi et al., 2023). Moreover, social assistance programs can provide vital support to families, helping them manage healthcare costs associated with skin protection. Such programs not only benefit individual families but also contribute to broader community health (Harris, 2015). Furthermore, improving healthcare workforce training is essential for ensuring that individuals with albinism receive appropriate care. Mobile health clinics can play a crucial role in reaching underserved areas, ensuring that skin health services are accessible to all (Ruszkiewicz et al., 2017). Therefore, a collaborative and comprehensive approach involving education, community engagement, government support, and healthcare training is essential for improving access to skin health services for individuals with albinism. Through implementing these actionable solutions, we can create a more inclusive and supportive environment for those affected by this condition.

6. Conclusions and recommendations

In conclusion, the exploration of skin health rights for learners with albinism in Growth Point in Zimbabwe, particularly at Nemamwa Growth Point, reveals critical gaps in health care access and social support. Learners with albinism face heightened risks of skin cancer and other health issues due to insufficient protective measures and lack of awareness within their communities. This research underscores the necessity of a multi-faceted approach to ensure that these individuals can enjoy their right to health and well-being in a supportive environment. The societal stigma surrounding albinism exacerbates these challenges, highlighting the urgent need for comprehensive advocacy and policy changes. It is imperative that the government and relevant stakeholders recognize the unique needs of learners with albinism and take decisive action to protect their rights.

To address the issues raised in this study, several recommendations have been proposed. The Ministry of Health should provide free

and high-quality skin care lotions, including sunscreen and protective ointments, for learners with albinism, accompanied by educational campaigns on proper skin care and the importance of UV protection. The Ministry of Social Welfare is urged to implement programs that provide free food and nutritional support for individuals with albinism and their families, as adequate nutrition is essential for overall health and can mitigate some health risks associated with albinism. Additionally, the Ministry of Education should ensure that learners with albinism receive free education, including necessary resources such as adaptive learning materials and access to safe school environments that protect against UV exposure. Community awareness programs

should be launched to educate the public about albinism, dispelling myths and reducing stigma, thereby fostering a more inclusive environment. Training for healthcare providers on the specific health needs of individuals with albinism is also crucial to ensure they receive appropriate care and support. Collaboration with non-governmental organizations is recommended to enhance resource distribution, including protective clothing and health education tailored to the needs of learners with albinism. Finally, establishing a framework for ongoing research and monitoring of the health outcomes of these learners will help assess the effectiveness of implemented policies and programs.

References

- Aborisade, R. A. (2021). "Why always me?": Childhood experiences of family violence and prejudicial treatment against people living with albinism in Nigeria. *Journal of family violence*, 36(8), 1081-1094.
- Adelakun, O. S., & Ajayi, M. A. O. (2020). Eliminating discrimination and enhancing equality: a case for inclusive basic education rights of children with Albinism in Africa. *Nigerian Journal of Medicine*, 29(2), 244-251.
- Adelakun, O. S., & Ajayi, M. A. O. (2020). Eliminating discrimination and enhancing equality: a case for inclusive basic education rights of children with Albinism in Africa. *Nigerian Journal of Medicine*, 29(2), 244-251.
- Baker, C. (2018). *Children with albinism find it hard to navigate school: Teachers can help*. Retrieved December 2024, from <https://theconversation.com>.
- Baker, C., Lund, P., Nyathi, R., & Taylor, J. (2010). The myths surrounding people with albinism in South Africa and Zimbabwe. *Journal of African cultural studies*, 22(2), 169-181.
- Benyah, F. (2017). *Equally able, differently looking: discrimination and physical violence against persons with albinism in Ghana*. Retrieved December 2024, from <http://doi.org/10.17.59/2413-3027/2017/v30n1d7>.
- Bradbury-Jones, C., Ogik, P., Betts, J., Taylor, J., & Lund, P. (2018). Beliefs about people with albinism in Uganda: a qualitative study using the Common-Sense Model. *PLoS One*, 13(10), e0205774.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.
- Brocco, G. (2015). Labeling albinism: language and discourse surrounding people with albinism in Tanzania. *Disability & Society*, 30(8), 1143-1157.
- Brown, E. D., & Williams, B. K. (2015). Resilience and resource management. *Environmental management*, 56, 1416-1427.
- Bucaro, S. (2010). A black market for magical bones: the current plight of east African albinos. *Public Interest Law Journal*, 15(2), 131-140.
- Burke, J., Kaijage, T. J., & John-Langba, J. (2014). Media analysis of albino killings in Tanzania: a social work and human rights perspective. *Ethics and Social Welfare*, 8(2), 117-134.
- Chu, B., Maranga, A., Mosojane, K. I., Allen-Taylor, L., Ralethaka, M., Ngubula, J. C., ... & Williams, V. L. (2021). Sociodemographic features of a cohort of people living with albinism in Botswana. *JAAD international*, 2, 153-163.
- Couteau, C., & Coiffard, L. (2015). The interest in nanomaterials for topical photoprotection. *Cosmetics*, 2(4), 394-408.
- Creswell, J. W., & Poth, C. N. (2016). *Qualitative inquiry and research design: Choosing among five approaches*. Sage publications.
- Franklin, A., Lund, P., Bradbury-Jones, C., & Taylor, J. (2018). Children with albinism in African regions: their rights to 'being' and 'doing'. *BMC international health and human rights*, 18, 1-8.
- Gaigher, R. J., Lund, P. M., & Makuya, E. (2002). A sociological study of children with albinism at a special school in the Limpopo province. *Curationis*, 25(4), 4-11.
- Gallego-Ortega, J. L., & Rodríguez-Fuentes, A. (2021). Teaching attitudes towards students with disabilities. *Mathematics*, 9(14), 1637.
- Gedfie, M., Getahun, D. A., & Negassa, D. (2021).

- Barriers to and strategies for parental involvement in the education of children with disabilities in primary schools in Bahir Dar City Administration, Ethiopia. *British Journal of Special Education*, 48(2), 235-258.
- Gyasi, M. N. K., Okrah, A. K., & Anku, J. S. A. (2020). Teachers' Knowledge of Special Educational Needs and Disability Students and Their Classroom Management Approaches. *World Journal of Education*, 10(4), 160-172.
- Hart, T., & O'Reilly, M. (2018). 'The challenges of sharing information when a young person is experiencing severe emotional difficulties': implications for schools and CAMHS. *Child and Adolescent Mental Health*, 23(3), 235-242.
- Hearn, J. (2007). African NGOs: the new compradors?. *Development and change*, 38(6), 1095-1110.
- Lehman, L. E. (2018). *Parental Involvement Within The Special Education System (Master's thesis)*, Bethel University.
- Machingambi, M. (2023). Exploring barriers to learning hindering Learners with albinism'academic achievement at schools in the Masvingo district in Zimbabwe. *International Journal of studies in Psychology*, 3(1), 28-37.
- Maree, K. (2019). *First steps in research (3rd ed.)*. Pretoria: Van Schaik Publishers.
- Maunganidze, F., Machiha, K., & Mapuranga, M. (2022). Employment barriers and opportunities faced by people with albinism. A case of youths with albinism in Harare, Zimbabwe. *Cogent Social Sciences*, 8(1), 2092309.
- Maurer, K. (2015). *Albinism in Children*. Kellogg Eye Cente, Michigan.
- Mohajan, H. K. (2018). Two criteria for good measurements in research: Validity and reliability. *Annals of Spiru Haret University. Economic Series*, 17(4), 59-82.
- Munyuzangabo, C. (2018). *The Harmful indivisibility of people with albinism*. Retrieved December 2024, from
- Mutsaka, F. (2020). *In Zimbabwe people with albinism struggle against prejudice*. Retrieved December 2024, from <https://abcnews.go.com/international/wirestory/zimbabwe-people-albinismstruggle-prejudice-71232597>.
- Nebre, M. (2018). *Social discrimination against people with albinism*. Retrieved December 2024, from www.csustan.edu/groups/journal-two/17nebre.
- Tambala-Kaliati, T., Brenya, E.A., & Frimpong -Manso, K. (2021). *Living with albinism in African community exploring the barriers of persons with albinism in Lilongwe District, Malawi*. <https://doi.org/10.1016/j.helion.2021e07034>.
- The Albino Foundation. (2017). *Albinism in Africa*. Retrieved December 2024, from www.ab=lbinofoundation/albinism-in-africa.
- Zimbabwe Albino Association. (2016). *Why people with Albinism*. Retrieved December 2024, from <https://zimbabwealbinoassociation.wordpress.com/home/about-us/>