

THE INFLUENCE OF CULTURE ON THE EDUCATION OF STUDENTS WITH
DISABILITIES IN KENYA

A Dissertation by

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DEDICATION

This thesis is dedicated to my father Paul Obat K'Othieno for being a constant source of knowledge and inspiration and my mother Jane Achieng Obat for all her encouragement, support and prayers.

The human spirit is one of ability, perseverance, and courage that no disability can steal away.

“When you focus on someone’s disability, you’ll overlook their abilities, beauty and uniqueness.

Once you learn to accept and love them for who they are, you subconsciously learn to love yourself unconditionally.” — Yvonne Pierre, *The Day My Soul Cried: A Memoir*

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ABSTRACT

Despite legislative protections that have made education available to all Kenyan students at no cost, students with disabilities who are now legally entitled to attend school remain significantly under enrolled. Some explanations for the lagging enrollment of students with disabilities are negative views of disability by the rural communities in Kenya, principals denying these children admission because their management is demanding and strains the already scarce resources, and the incoherent application of legislations supporting the implementation of programs and services for persons with disabilities.

A qualitative ethnographic study design was used to explore the perceptions of religious leaders, chiefs, assistant chiefs, parents of students with disabilities, head teachers, and teachers of students with disabilities. Thirty-four participants were selected using a combination of purposeful and snowball sampling techniques. Data was collected through observations, individual interviews, focus group discussions, and document/artifact collection. Data was analyzed qualitatively. Research quality was established by employing the methods that assure credibility, transferability, dependability, and confirmability.

Findings indicate that the cultural understanding of disability in Ochwoga village has led to discrimination, and segregation of persons with disabilities in schools, community activities, and social life such as marriage. Conclusions highlight negative attitudes towards disability, the prominence of labels and stigma in Ochwoga Village, challenges in the implementation of an all-inclusive education policy, and disabled persons viewed as having flawed personhoods and bodies. Implications propose creating attitudinal change towards disability, implementation of an all-inclusive education policy, and ensuring a transition of persons with disability to higher education and employment.

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Chapter 1

Kenya is one of the few countries in Africa with a policy document articulating the provision of special education services for qualified children. Referred to as the Draft Special Needs Education Policy, this 1980 federal legislation serves as a roadmap for the education of children with disabilities. The Draft Special Needs Education Policy provides guidance to staff of the Ministry of Education on the provision of education to learners with special needs to ensure they receive equal treatment with nondisabled peers in learning activities at all levels. It addresses issues of equity and improvement of the learning environment in schools to ensure inclusive education through regular schools as opposed to using special schools and special units attached to regular schools (Ministry of Education, 2012; Ministry of Education Science and Technology, 2012).

Prior to the introduction of inclusive education in regular schools, special education in Kenya was provided in special schools and special units attached to regular schools (Kisanji, 1993). Special schools are institutions set aside to offer education to children with special needs in education, based on their respective disability. Special units are classes set aside in either regular or special schools to cater to the needs of at least 15 students with special needs (Ministry of Education, 2009). In the mid-1980s, Kenyan students with special needs were served by 52 programs that included 17 special schools, 30 special units, three pre-vocational schools, one vocational school, and one sheltered workshop (Ndurumo, 1993). Even today, after passage of the Draft Special Needs Education Policy, special schools and units continue to cater to children with special needs in the areas of hearing, visual, intellectual, and physical challenges. Other areas of special needs such as gifted and talented, psychosocially different, autism, multiple handicapped, specific learning difficulties, and communication disorders are not provided in the

special schools, special units, vocational schools, and sheltered workshops. Currently, provision is extended to such children in regular schools through the policy of inclusivity (Ministry of Education, 2009; Ministry of Education Science and Technology, 2012).

The Kenyan federal government has progressively established programs in various institutions to cater to learners with special needs. For example, a Special Needs Education (SNE) section was established in 1975 and an inspector was appointed in 1978 to head the SNE section at the Ministry of Education headquarters. An SNE specialist was posted at the Kenya Institute of Education in 1977. The Kenya Institute of Special Education (KISE) was established in 1986 and a department of SNE was established at Kenyatta University in 1995, at Moi and Maseno Universities in 2008, and at Kenya Methodist University in 2010 to train teachers of learners with special needs (Ministry of Education Science and Technology, 2012).

The continuous expansion of special education services meant that by 2008, there were 1,341 public special units and 114 public special schools in the country, a national system that included vocational and technical institutions catering to learners with special needs and disabilities. Special units are classrooms set aside for pupils with special needs within regular education schools just like the self-contained programs in the US schools. In 2016, there were 1,882 primary and secondary schools in Kenya that provided education for learners with special needs, an indication of the Kenyan government's commitment to equity education. A recent estimate of the capacity of these schools listed their enrollment at 50,744 learners with disabilities (Ministry of Education, 2014). However, despite the growth in special schools and student enrollment numbers, most learners with special needs and disabilities in Kenya still do not access educational services. For instance, in 1999, there were only 22,000 learners with special needs and disabilities enrolled in special schools, special units, and integrated programs.

This number rose to 26,885 in 2003 and 45,000 in 2008. Although more students were being served than ever before, these totals compared poorly with the student population enrolled in general education, which was 5,941,600 in 1999, 7,394,800 in 2003, and 8,253,800 in 2008. Although this increase occurred because of deliberate governmental efforts to include learners with disabilities in regular schools through free primary education, special education enrollments still lag the growth numbers necessary to achieve equitable access and inclusion (Ministry of Education, 2009).

According to a 2012 Ministry of Education report, several challenges continue to impair access and equity in the provision of education and training for children with special needs. Among these challenges are the absence of clear guidelines and support for the implementation of an all-inclusive education policy, a lack of data on children with special needs, and inadequate tools and skills in identification and assessment. Additionally, the inadequacies of the current situation are compounded by inappropriate infrastructure, inadequate facilities, and a lack of equipment, which individually and collectively make it difficult to integrate special education into regular educational programming. The situation is further complicated by the incapacity of many teachers to effectively handle children with special needs. There is also ineffective coordination among service providers, inappropriate placements of children with disabilities, an inadequate supply of teaching and learning materials, mediocre supervision and monitoring of special education programs, and pervasive negative attitudes towards disability among most Kenyans (Buhere & Ochieng, 2013).

The United Nations (UN) Convention on the Rights of Persons with Disabilities (2006) emphasized special education and the right of students with disabilities to attend schools of their choice. The convention further affirmed the right to education in an inclusive setting for all

children. The focus of the U.N. declaration was to enable children with special needs to enroll in schools of their choice within their localities. As the U.N. declaration points out and the lagging enrollment numbers in Kenya illustrate, there is a need in Kenya to remove persistent barriers to inclusiveness and equity within the public education system (Waddington & Lawson, 2018).

Problem Statement

Following a referendum and adoption of a new constitution in August 2010, Kenya was divided into 47 counties that are semi-autonomous units of governance. The counties are governed by elected governors and county administrators while the locations within the counties are headed by tribal chiefs and assistant chiefs (The Government of Kenya, 2010). A location is an administrative boundary further divided into sub-locations. The county governments operate independent of the central government. The main functions of local authorities are to provide regulatory services, formulate business plans, and provide services such as rural access roads, rural markets, and coordination of development through representation in various district organs. The provision of support to the needy, especially through education bursaries, is also a key function. Bursaries are funds set aside to help students who are needy but academically capable access education. Students apply for these bursaries and those who qualify for bursary allocation have money disbursed to their school accounts by the county government. The chiefs and assistant chiefs are members of the school management boards that oversee the allocation and dissemination of educational supports to qualified children (Cowan, 1970; Waema & Mitullah, 2007).

The Kenyan Constitution states that children with disabilities have a right to benefit from a full and decent life in conditions that ensure dignity, boost self-reliance, and enable active participation in society (Ghai, 2002). The Free Primary Education Act (2003) has made

education available to all Kenyan students at no cost, including students with disabilities. Previously, parents were required to pay school fees and education for students with disabilities was costlier than for students without disabilities. However, despite these legislative protections, students with disabilities who are now legally entitled to attend school remain significantly under enrolled. A Ministry of Education report estimated that only 45,000(6%) out of 750,000 school age children with disabilities are schooling (Ministry of Education, 2009). One prominent explanation for the lagging enrollment of students with disabilities is cultural: because rural communities in Kenya tend to view disability as a curse, parents of children with disabilities are inclined to hide them from the public and keep them away from school (Munyere, 2004). Moreover, principals arguably make the situation worse by denying these students admission into the public schools on grounds their management in general education settings is demanding and strains already scarce resources (Oketch, 2009). The incoherent application of legislation supporting the implementation of programs and services for persons with disabilities is cited as an additional factor that further exacerbates the provision of inadequate services (Wanyama, 2012).

Theoretical Framework: Disability and Culture Theory

To examine the influence of culture on the education of students with disabilities, I used Whyte and Ingstad's (1995) theory of disability and culture to guide my formulation of research questions, selection of study participants, methods of data collection, and data analysis. Kenya is comprised of 42 tribes and within each tribe are clans. In addition to the regulating effects of clan membership, religion and education are two powerful influences that have transformed the traditional ways of life in most parts of Kenya. I examined the intersection of cultural influences that occur along tribal/clan, religious, and educational lines. Whyte and Ingstad's theory of

culture and disability describes how state, school, and community beliefs about disability and treatment of persons with disability influence the perceptions of individuals about disability. This chain of influence is especially persuasive about functionality, integration, segregation, activities of daily living, labeling and categorization, equality and individual rights, and the concept of spreading in relation to impairments and contexts such as social, physical, and activities. The concept of spreading is the tendency of people to assume that a person with one form of disability naturally has other forms of disabilities that are not related in any way. For instance, an individual may speak loudly to a visually impaired person imagining that the visually impaired person is also deaf. A deficit in one characteristic spread such that similar deficits are ascribed to other characteristics (Whyte & Ingstad, 1995).

Culture occupies a normative role in a given society. It comprises standards for deciding what is, what can be, how one should feel, and how to go about daily activities. Cultures, therefore, govern what is right or wrong in a given society, including what it means to be a person or human being; the value placed on gender, children, and the old; and whether members are categorized in groups or as individuals. A society may be monocultural or multicultural, i.e., different clan values co-existing within a single society (Engel, 1991; Ingstad, 1995; Whyte & Ingstad, 1995). People with disabilities are rewarded for behavior that corresponds to social expectations associated with the disability role and punished for behavior that departs from these expectations. Disability is defined by society and assigned meaning by that culture. The cultural understanding of disability is central to the determination of the position or status that individuals with disabilities are given in a specific society. Cultural understanding is also shaped by the meanings devoted to the concepts of human being or personhood by the social and economic

organization of a given society or by other internal and external cultural dynamics (Benedicte & Lisbet, 2007; Whyte & Ingstad, 1995).

Whyte and Ingstad (1995) noted that conceptions of disability are formed in concert with the beliefs of culturally embedded persons. Monocultural and multicultural societies perceive the concept of disability differently. The social identity of the person in monocultural societies is based on family, clan, and other physiognomies and not on disability. Natural integration of the disabled into family life and community activities is the norm in many monocultural societies. Disabled persons are viewed as exceptional individuals and not as persons with disabilities. In multicultural societies where social relations and contexts are more impersonal, individuals are not directly related to each other in diverse contexts. Based on the concepts of equality and individual rights, there is a general supposition that people are not different; difference is treated as invisible. A multicultural society's conceptions of disability are, therefore, formed not from within the general society and its social processes but in the context of a centralist state that imposes a universal policy through legislation (Engel, 1991). Legislation determines the reality and recognition of the disabled by defining what it means to be disabled and establishing criteria that determine how to classify the disabled. Legislation also determines the organization of medical and paramedical institutions as well as educational services. The concepts of personhood are also inevitably shaped by those institutions and therefore, people with infirmities become a marked group. They are given a social identity as citizens with the same rights as non-disabled persons who should be integrated like ordinary people.

Cultural Themes

When different cultures use positive language to describe individuals with impairments, impaired individuals tend to be integrated into the society. In contrast, cultures that use negative

language to describe impaired individuals tend to reject the impaired (Benedicte & Lisbet, 2007; Ingstad, 1995). The main themes about persons with disabilities that appear across multiple cultures are body, identity and stigma, labeling, liminality, and personhood.

Body. Across cultures, bodies are universally recognized as having a purpose, a function, and a value that assists in the survival and the advancement of a given society. Although the body can serve multiple purposes and have varying degrees of value, it is viewed as functioning as a complete whole, a oneness within itself. The whole body is perceived as being flawed if one aspect of it is amiss. The concept of spreading discussed earlier is germane to various levels of impairments and in various contexts (physical, social, or activities) across different cultures. For instance, if a woman is incapable of ambulation, she is also perceived as being barren. Similarly, a visually impaired person may be perceived to be deaf, though of course, there is no correlation (Coleridge, 2000; Whyte & Ingstad, 1995).

When cultures use the body as an implement or outward sign of physical beauty, individuals are categorized as conforming or not conforming to that image. Individuals who intentionally or unintentionally do not conform to this physical image of beauty are either shunned or disavowed by the larger society. The disabled, individually and as a group, breach all the values of youth, virility, activity, and physical beauty (Murugami, 2009; Whyte & Ingstad, 1995). For those whose impairment is acquired later, the process of coming to terms with their impact upon the body involves a huge psychological and physical readjustment. Regarded as a medium for action, when the body is no longer able to perform the functions or the roles it had in the past, life ceases to exist as the person knew it. What once was a form of self-identity (roles and responsibilities conducted by the body) now becomes subservient to the impairment (Coleridge, 2000; Murugami, 2009).

Identity and stigma. The values held by the larger society ultimately define how an impaired person feels about him or herself and his or her impairment. There is no middle ground. The impaired person is either stigmatized or fully integrated into the daily activities of the given society. Cultures that stigmatize impaired individuals create an environment that nurtures a preoccupation with the disability. Because of this stigmatization, individuals with impairments are often thrown into the same lot and social status as criminals and certain minority groups. They are all outsiders, deviants from principal social norms. One's identity as a disabled person becomes supreme in one's own mind and the impairment an axiom for one's actions. The non-disabled person's reaction to the handicapped person feeds into the insecurities of the impaired individual, thus creating a cyclical process of insecurity, stigmatization, and identity dissociation (Devlieger, 1995; Riddell & Watson, 2014).

Labeling. The process of labeling is more discernible in complex societies than monocultural societies. In monocultural societies, regular face-to-face contact between community members is the norm for communicating and interacting. Individuals are linked and connected to each other through diffused social roles and contexts. In such situations, a single personal characteristic such as a physical impairment does not generalize to circumscribe the person's total social identity. In complex societies, social relationships and contexts are more impersonal and task specific and individuals are not related to each other in diverse contexts. Labels affect how individuals think and perceive of themselves, set boundaries on what they can accomplish, and influence how others perceive them (Riddell & Watson, 2003, 2014).

Liminality. Liminality describes the process of changing status experienced by an individual with a newly acquired impairment. It denotes the process of no longer belonging to a class while not yet having been accepted into a new classification. As liminal persons, the

disabled comfort each other as whole individuals, unseparated by social differences, and often exhibit a level of comfort not displayed in relationships between able-bodied individuals. This lack of clarity on identity and social roles often causes able-bodied individuals to settle their indeterminacy by segregating or avoiding liminal people (Engel, 1991). Liminality has three phases: isolation and instruction of the initiate, ritual emergence, and reincorporation back into society in the new role. A person is in a liminal state during the intermediate phase from isolation to emergence, that is, a kind of social limbo in which the impaired person stands outside the formal social system. Thus, for a newly impaired individual, their state of being is troubled and indeterminate, falling ambiguously between sickness and wellness, living and death, participation and exclusion (Riddell & Watson, 2014).

Personhood. Personhood has a cultural dimension seen as fundamental to the cultural understanding of disability and is characterized as a phenomenon capable of being shaped. An individual's personhood in monocultural societies is directly related to their social function, that is, their individual ability to contribute to the day-to-day activities within their society. In contrast, an individual's personhood in complex societies is directly related to the appearance of their physical body and their social interactions (Riddell & Watson, 2014; Whyte & Ingstad, 1995).

Whyte and Ingstad's (1995) disability and culture theory informed the study by relating how the prevailing beliefs in my research setting (school, state, and community) influenced the services provided for persons with disability and the activities they are included in. The perspectives of teachers and head teachers gave insights into how the school setting determines how students with disabilities are provided with education. The perspectives of sub-chiefs and

chiefs offered insights into how the state treats students with disabilities, and parents, and religious leaders provided insights into how the community handles students with disabilities.

This study focused on students with disabilities; therefore, the services of interest are how students with disabilities are provided with accessible instructional materials, assistive technology, curriculum access and alignment, dropout prevention, family engagement, least restrictive environments, positive behavior supports, and transitions to general education, college, employment, or independent living. One question of interest I pursued is whether students with disabilities are included in activities that achieve feelings of belonging or acceptance, success, accomplishment, growth, and competence within the school system. The study also examined how schools, community, and the state view an individual's functionality in relation to the environment. One of my concerns was to explore whether individual impairments are obstacles to the participation of students with disabilities in inclusive education and whether environmental arrangements within schools, state facilities, and communities are obstacles.

Additional lines of inquiry derived from the theory investigated how the schools, the state agents, and members of the community identify persons with disability. In the study, I used the perspectives of teachers and head teachers to represent the schools; the perspectives of chiefs to represent the state; and the perspectives of parents and religious leaders to represent the community. The combination of parental understandings of disability and their experiences with other members of the community in relation to disability formed a holistic cultural picture about disability that guided the study. The concerns I brought to this study were overlapping: Are individuals with disabilities stigmatized, viewed as unique persons, or different in the schools, community, and state? Are individuals with disabilities treated like outcasts or are they accepted as an integral part of the community? Are individuals with disabilities categorized by level of

function or a generalized group of persons with disability? Depending on participant responses to these questions, I discerned patterns in the relationship between the cultural beliefs held by the community about disabilities, how educational policies are applied to children with disabilities, and what kinds of educational services are provided to children with disabilities.

Purpose of the Study

The purpose of this study was to examine the influence of culture on the education of individuals with disabilities in a small, low-income, rural, and traditional community in Kenya. I explored the perspectives of religious leaders, chiefs, assistant chiefs, parents of children with disabilities, head teachers, teachers in primary schools, and agencies involved in the provision of educational services to students with disabilities regarding the influence of culture on the education of students with disabilities in primary schools.

Research Questions

The following research questions guided this study:

1. How do religious leaders, chiefs, assistant chiefs, parents of students with disabilities, head teachers, and teachers of students with disabilities comprehend the experiences of students with disabilities in primary schools in a small, low-income, rural, and traditional community in Kenya?
2. How do religious leaders, chiefs, assistant chiefs, parents of children with disabilities, head teachers, and teachers of students with disabilities in primary schools describe how a small, low-income, rural, and traditional community culture in Kenya shapes the local understanding of disability and the provision of special education services?

Chapter 2

Literature Review

The following literature review provides information and highlights previous research on the inclusion and integration of children with disabilities in Kenya, the effects of religious and tribal culture on shaping local understandings of disability and the provision of education. Past research studies have been synthesized and integrated into the development of the current study. Other studies have also been used to define concepts used in the research study.

Disability

Disability is a condition that may exist due to a mishap, distress, heredity, or illness and may limit a person's movement, hearing, sight, communication, or cognitive ability (Reynolds & Fletcher-Janzen, 2007). Disability exists within social, physical, or environmental contexts and is distinguished from impairment, which is a biological condition (Braddock & Parish, 2002), and handicap, which is a physical and attitudinal constraint imposed upon a person. In a sociocultural context, disability can be defined as a barrier to participation in educational, religious, and cultural activities in the society of people with impairments or chronic illnesses arising from the interaction of the impairment or illness with prejudicial attitudes, cultures, policies, or institutional practices (Booth, Ainscow, Black-Hawkins, Vaughan, & Shaw, 2000).

People with disabilities have a long history of marginalization. In Babylon, ancient Greece, Africa, Europe, and America, children born with disabilities were often considered curses from God. In Europe, people with disabilities were viewed as a threat to society; some were massacred while others were used as items of amusement. Philanthropists advocated for the protection of people with disabilities resulting in custodial care and treatment in asylums, mental institutions, and hospitals (institutionalization). Institutionalization was eventually

replaced with normalization because of arguments that institutionalization separated people with disabilities from the cultural norms of the society to which they belonged. Normalization refers to the use of means that are culturally acceptable in order to establish and maintain personal behaviors and characteristics that are considered culturally normal (Wolfensberger & Tullman, 1982).

In education, normalization gave rise to the concept of integration since normalization implied mainstreaming students with disabilities to the maximum extent possible with a minimum resort to segregation. However, normalization does not consider the wide range of individual differences in the society and the diversity of educational, vocational, and other opportunities available to people within the community (Wolfensberger & Tullman, 1982). The disability rights movements of the last 40 years have shifted attitudes and policies relating to people with disabilities not just in Kenya but throughout much of the world (Kisanji, 1999; Schur, Blanck, & Kruse, 2013). The efforts of the disability movements have resulted in establishing more equitable rights, access, and inclusion of people with disabilities in different activities all over the world. Several countries have enacted civil rights protection for people with disabilities and in 2006, the United Nations (UN) adopted the UN Convention on the Rights of Persons with Disabilities, an international treaty that strives to protect the rights and dignity of people with disabilities (Hendricks, 2007). These changes have resulted in disability being approached with greater respect, dignity, rights, and participation as opposed to viewing it with pity, fear, and exclusion (Schur et al., 2013). To understand the complex relationship between individual impairments and environments, this study utilized three models of disability.

Models of Disability

Models are simplified descriptions of complex entities and processes that provide comprehensible but incomplete pictures of reality (Smart & Smart, 2006). No model of disability can capture the complete picture. Three basic models address the complex relationship between individual impairments and environments (Bynoe, Oliver, & Barnes, 1991). While there are clear distinctions between these models, they are not mutually exclusive. Instead of trying to identify the best model to describe disability, I found it valuable to highlight the strengths and limitations of each model for understanding disability.

Medical model. The medical model focuses on functional impairments and health conditions related to the impairment. Disability is located within the individual and has no correlation with his or her environment. The medical model places emphasis on cure and is consistent with the value of individualism in which the individual with a disability is expected to overcome the problems caused by society, such as discrimination, through the application of hard work, determination, and a positive attitude. The medical model expects individuals with disability to heroically overcome adversity and self-pity and show the triumph of the human spirit over their disabilities (Kisanji, 1993; Murugami, 2009; Swain, French, & Cameron, 2003).

Social model. In the social model, disability is viewed as a construct of the society. Disability groups argue that disability is socially constructed, and the social model has been central to the development of the disability rights movement. In this construct, it is the obstacles that society places on groups of people that create disability (Shakespeare & Watson, 2001). Society expects persons with a disability to align themselves with the established structures of the society instead of realigning the established structures of society to conform to the needs of persons with a disability. Society imposes the construct of disability on top of the impairments

that individuals have by the way that persons with disability are unnecessarily isolated, stigmatized, and excluded from full participation in society (Schur et al., 2013). Individuals with disability are grouped together into a distinct minority group with a shared experience of oppression. According to sociologists, the politics of special needs and the politics of disablement exist side-by-side within a society (Kisanji, 1993).

Universalist model. The Universalist model views impairments as existing on a continuum and does not bifurcate the population into people with and without disabilities. It recognizes that disability is not fixed and dichotomous but fluid and continuous. It contends that across the life span and environmental conditions, individuals with or without disabilities experience limitations and impairments. Disability is viewed as a universal human experience and not a minority issue. People with disabilities are not seen as a distinct group in need of special protection. Instead, the Universalist model emphasizes the benefits of accommodations, universal design, and anti-discrimination laws for everyone (Gabel & Peters, 2004; Schur et al., 2013).

Inclusion and Integration

Inclusion is the process of educating children using a variety of techniques to benefit pupils with and without special needs while integration is the process in which students with special needs are absorbed into the mainstream education with the aim of catering to their needs in regular education schools. In integration, different strategies, services, and adaptation methods are used with the aim of assisting the students with special needs adapt or fit into the mainstream education. Inclusion does not imply the placement of all learners with disability in the general education classroom for the entire or part of the day. Rather, inclusion articulates the obligation to instruct a child, to the maximum extent possible, in the school and classroom he or

she would otherwise attend. It involves bringing the support services to the child rather than moving the child to the services (Causton-Theoharis & Theoharis, 2009).

The goal of inclusive education is to prepare all children for productive lives as participating members of their community. It should not be misconstrued to mean dumping or placing learners with special needs in regular classrooms without adequate supports or placing undue pressure and burdens on teachers and peers. Inclusive education is achieved through a combination of practices. These practices include providing learners with special needs finely-tuned positive discrimination such as adaptation of curriculum, provision of additional equipment such as iPads, picture object dynamic design (PODD) books, and specialized or intensive learning experiences in a separate location that lead to inclusion in the wider society as an independent and confident individual (Wamae & Kang'ethe-Kamau, 2004). To be successful, inclusive education requires careful assessment, planning, and adaptation of curriculum, provision of appropriate teaching materials, adequate support, and partnership between educators and parents of students with disabilities. Good inclusive education practice means high aspirations, high expectations (high academic goals), and a concern for equal opportunities (Peters, 2004; Salvia, Ysseldyke, & Witmer, 2012; Wamae & Kang'ethe-Kamau, 2004).

Inclusive education recognizes that special learning needs arise from social, psychological, economic, linguistic, cultural, physical, or disability factors (Wamae & Kang'ethe-Kamau, 2004) and any child can experience short-term or long-term difficulty in learning at any time during their school career (Kisanji, 1999). Inclusion puts responsibility on the school to continually review its policies to meet the needs of all learners by replacing the concept of integration with a move towards inclusive education (Charema, 2007). While inclusive education aims at restructuring schools to respond to the learning needs of all children,

integration seeks additional organizational arrangements such as withdrawal, remedial teaching, and mainstreaming to accommodate students with disabilities (Thomas, 2013). A description of how primary education is structured, and current legislation provides the context for the situation in Kenya for students with disabilities.

Primary Education in Kenya

The first phase of formal education in Kenya is primary education. Primary education begins between the ages of 5 and 7 after completion of a year of kindergarten commonly known as nursery school or pre-unit. The first class or year of primary school is known as Standard 1 (the equivalent of 1st grade), the final year as Standard 8 (the equivalent of 8th grade in the U. S.), and primary school children are known as pupils. The school year at both primary and secondary levels begins in January and ends in November. Pupils get three school breaks throughout the year in April, August, and December (Ministry of Education Science and Technology, 2004).

Pupils advance to the next grade at the end of the school year. Since repetition is forbidden, students still progress to the next grade even if they fail their examinations. Most primary schools are day schools with pupils living at home. Fewer schools at primary level are boarding schools compared to secondary schools. Primary school pupils sit for the Kenya certificate of primary education (KCPE) examination at the end of the school year in Standard 8 (Ministry of Education Science and Technology, 2004, 2014). Pupils get admission into secondary schools based on their KCPE scores.

In January 2003, the National Rainbow Coalition (NARC) government re-introduced free primary education, which had previously existed before the mid-1980s when the Kenya African National Union (KANU) government adopted cost sharing measures that led to the introduction

of school fees to pay for textbooks, parents and teachers' association (PTA) activities, and extracurricular activities (The Government of Kenya, 2010). The Kenyan government provides teachers to public primary schools and meets their salaries. Government expenditure on school supplies and equipment are minimal as these are financed by fees levied on parents by Parent Teacher Associations. In addition, responsibility for the construction and maintenance of schools and staff housing is shouldered by the parents (Ministry of Education Science and Technology, 2012).

Primary education in Kenya has expanded remarkably over time, both in terms of the number of schools established and in the number of pupils enrolled. At the time of independence in 1963, there were 6,056 primary schools with a total enrolment of 891,600 pupils and 92,000 trained teachers. In 1990, there were over 14,690 primary schools with an enrolment of slightly over 5 million pupils and nearly 200,000 trained teachers, respectively. Currently, there are 26,297 public primary schools and 248,000 trained primary school teachers (Kenya Open Data, 2015).

The Education Act of 1968 and the Teachers Service Commission Act (National Council for Law, 2009), allowed the Minister of Education to delegate the role of management and regulation of primary schools to local authorities and District Education Boards (DEB). The composition of the board of management is agreed upon among the local authorities, national associations of parents, school management organizations, teacher representatives, and the DEB. The board's main function is to manage the school on behalf of the Minister of Education for the benefit of the students. The goal is to provide an appropriate education for each student at the school. The school principal is responsible for the day-to-day management of the school and is accountable to the board (Ministry of Education Science and Technology, 2012).

Kenyan Legislation Supporting Programs and Services for Students with Disabilities

The Children's Act (2001) obligates parents to provide for the educational needs of their children and ensure that no child will be discriminated against based on disability. The premise of the law is that every child is entitled to a free basic and compulsory education and the adoption of the Constitution of Kenya in 2010 marked one of the most important milestones in the education for learners with disabilities. Article 43 (1) (f) of the Constitution makes education a right for every citizen while Article 53 (1) (b) makes free and compulsory basic education a right for every child. Article 54 makes access to inclusive education by persons with disabilities a constitutional right. These articles collectively appreciate the challenges faced by persons with disabilities in accessing education and therefore requires educational institutions to modify their facilities to ensure integration of and greater access to learners with disabilities (The Government of Kenya, 2010).

The federal government is committed to developing strategies that enhance participation of children in special circumstances and work with partners such as non-governmental organizations (NGOs), faith-based organizations (FBOs), community-based organizations (CBOs), and parents of children with disabilities to ensure barrier-free primary schools for children with special needs and disabilities. Toward this end, the government has undertaken to provide special capitation grants for special needs education (Ministry of Education Science and Technology, 2004). Despite these measures and many others implemented by the government, access to special education for those with special needs remains limited (Ministry of Education, 2009).

In January 2003, the government of Kenya took a bold step by declaring that henceforth, primary education would be free. This initiative removed all levies (i.e., mandatory fees)

previously associated with primary schooling that had prevented children, especially those from poor backgrounds, from accessing education. This policy made it illegal to exclude a child from obtaining educational services because of an inability to pay the required fees. The government has since extended this protection to include special education and schools for children with disabilities, which currently receive a slightly higher federal subsidy than other schools. The Government allocates 1,020 Kenya shillings (K. Shs.) per child for education while each learner with a disability receives an additional 2,000 K. Shs. to defray costs associated with their specific educational needs and the improvement of school facilities (Ministry of Education, 2008; Ministry of Education Science and Technology, 2004).

One consequence of mandating free primary education has been a sharp increase in the number of students with disabilities served in special schools, units, and in regular education schools (Ministry of Education, 2009). Generally, integration has not been fully embraced in Kenya and therefore most educational services for students with disabilities are offered in boarding-school settings (Kiarie, 2006; Muuya, 2002). A study on challenges and prospects of educating students with intellectual disabilities in Kenya found that students with intellectual disabilities were indiscriminately integrated into general education or placed in special schools with the hope they would be integrated into the schools without any instructional steps to prepare them for their placements (Chomba, Mukuria, Kariuki, Tumuti, & Bunyasi, 2014). Arrangements to blend the instruction of learners with special needs into regular education settings ensure that learners with and without special needs are taught together, to the maximum extent possible, in the least restrictive environment. Yet, students with disabilities have historically attended special boarding schools where they are separated from their families for

long periods. However, a few students receive instruction in special classrooms in regular schools or are included with their non-disabled peers in regular classrooms (Kiarie, 2004).

Individuals with disabilities in Kenya experience problems due to built-in social, cultural, and economic prejudices, stigmatization, ostracism, and neglect (Munyere, 2004). According to Chomba et al. (2014) and Mutua and Dimitrov (2001), legislation supporting programs and services for individuals with disabilities has not been fully implemented, leading to the provision of inadequate services. In contrast, the zero-reject principle, guaranteeing all children the right to a free and appropriate public education no matter how severe their disability, has been federally mandated in the United States since 1975 (U. S. Department of Education, 2002). However, no such legal protection exists in Kenya. Parents, therefore, may personally recognize education as an ethical entitlement bestowed on their child by the government and attempt to rise above the prevailing negative attitudes of Kenyan society but they cannot legally compel schools to accept their children. Under current conditions, for example, school principals exercise more power than parents because the current educational structure grants them unilateral authority to determine which students are educable and receive permission to enter the public-school environment (Oketch, 2009).

Inclusive Education in Kenya

Despite the enactment of legislation and improvements in the provision of general education services in Kenya, inclusive education remains in the realm of theory and far from practice. Those advocating for inclusive education still grapple with problems of policy implementation and a socio-educational environment that is not conducive for practice. The success of inclusive education is hindered by other factors such as a community's attitude towards disability and the inadequate involvement of all stakeholders, among others. Class size

and teacher-to-student ratios are very high, making individualized instruction difficult or impossible (Kiarie, 2006; Muuya, 2002). As such, more needs to be done to ensure that the best is achieved from the objectives of inclusive education.

Buhere and Ochieng (2013) explored the effective use of selected teaching/learning resources as an intervention to improve the inclusive practices in mainstream schools in Kenya. The findings revealed that school administrators and educators needed support structures and training in organizational features that allowed inclusive education to work. The study also revealed that most school managers and educators lacked the skills and knowledge to coordinate and enhance collaboration between special education and regular education teachers. Decreased opportunity for collaboration has led to the ineffective use of teaching and learning resources and the Ministry of Education has not yet put measures in place to control and monitor the usage of capitation meant for special education in mainstream schools.

About architecture and disability conditions, the school environment must give maximum access to learning opportunities in the playing fields, classrooms, resource rooms, toilets, and the library (Kisanji, 1999; Rombo, 2007). The greatest barrier that one can find in inclusive schools is an environment that instead of accommodating students with disabilities rejects them by denying access. The accessibility of the school environment is a significant creation of inclusive education since it is a school resource that can enhance enrolment of students with disabilities. According to Rombo (2007), efficient movement and mobility within a school accommodates children with different physical impairments and assures safety, particularly for students with visual and physical impairments.

Disability and Education in Kenya

Data are not consistent about the exact number of students enrolled with a disability or the number of special schools and units existing in the country (Cherono, 2004; Kiarie, 2004; Mukuria & Korir, 2006; Muuya, 2002). However, judging from the spotty information available, the field of special education in Kenya continues to grow, albeit fitfully. The Ministry of Education Science and Technology (2004) estimated a prevalence rate of 10% and noted there were approximately 750,000 students with disabilities at the primary level. Of these 750,000 children, 90,000 were identified and assessed but only 26,000 were registered in school. A more recent report from another Ministry of Education (Government of Kenya, 2011) shows an increase of 123,111 students receiving special education in Kenya, from 84,650 in 2002 to 207,761 in 2007. In 2008, the number of those receiving special education services in the country increased again to 221, 995 students. The number of special needs learners rose 251, 542 (Ministry of Education Science and Technology, 2014). The Special Schools Heads Association of Kenya (SSHAK) reported that over 100,000 children with disabilities were out of school and only 45,000 were in special schools in (Global Accessibility News, 2016). The Ministry of Education indicated that 300, 000 out of the 852 children out of school in 2018 were children with disabilities (Ombati, 2018).

To serve this growing population, the number of special education institutions in the country increased from 926 in 2002 to 1,579 in 2008. More recent data indicate that 3,464 special needs institutions exist in the country, 54.1% of which are in primary education, 38.2% in Early Childhood Development Education (ECDE), 3.4% in Non-formal Education Institutions created to eliminate illiteracy among Kenyan adults, and 4.3% in secondary education. Of these, 2,713 are integrated institutions that serve students with special needs in regular schools while

751 are special schools set aside for students with disabilities (Ministry of Education Science and Technology, 2012). Though this greater outreach is impressive for a developing country such as Kenya, a darker picture emerges when these numbers are placed in the context of the estimated prevalence of disability in children and youth. Kenya's population was 47,564,296 at the last census held in August 2019 (Kenya National Bureau of Statistics, 2020). A national survey on children with disabilities and special needs conducted in 2018 shows that 11% of all children in Kenya have disabilities (National Council of Persons with Disabilities, 2018). Given these disparities and inconsistencies in numbers of school aged children with disabilities provided by various ministries, it has been especially difficult to identify and provide appropriate educational services for school-aged children with disabilities.

The government has provided minimal funding despite the obvious need (Mukuria & Korir, 2006). The incomprehensible policy on individuals with disabilities and lack of adequate funding compounded with traditional cultural attitudes towards individuals with disabilities, hamper attempts to address critical issues pertinent to individuals with special needs in Kenya. The existing policies seem contradictory due to lack of designated supervisory and implementation mechanisms. The purpose of such mechanism should be to ensure that what is articulated in special education policy documents is translated into action.

Special needs education in Kenya provides a wide range of services for a wide range of recognized disabilities. Recognized categories of disability include hearing impairments, visual impairments, physical impairments, cerebral palsy, epilepsy, mental handicaps, Down syndrome, autism, emotional and behavioral disorders, learning disabilities (LD), speech and language disorders, multiple handicaps, albinism, other health impairments, gifted and talented, and deaf-blind. The categories also include orphaned children, abused children, street children, children

who are heads of households, nomadic/ pastoral communities, and internally displaced persons (IDPs). Given this confusing and exhaustive list of recognized categories of disability, it is not surprising that Kenyan children with special needs encounter numerous barriers to receiving educational services.

Barriers to Education for Students with Special Needs in Kenya

The challenges faced by the Ministry of Education in their bid to provide a barrier free education for students with special needs include issues relating to access, equity, quality, relevance, attitudes, stigma and discrimination, cultural taboos, skills, environment and facilities, and poverty (Ministry of Education, 2008, 2012). Each of these is discussed in the sections that follow.

Access

Assessment, physical environment, curriculum and education system, and distant schools are among the factors that restrict access to education for students with disabilities. Proper and early assessment by a multidisciplinary team to determine the necessary adjustments to support students with disabilities is limited, mainly due to the inability of Educational Assessment Resource Centers (EARCs) to support local communities from a centralized location, limited resources, understaffing, lack of outreach support, and inadequate budget provision to follow up on assessments (Bii & Taylor, 2013). The EARCs are led and managed by a coordinating assessment teacher assisted by assessment teachers who are trained in different disciplines of special educational needs and disability. The main purpose of EARCs is to ensure early identification, assessment, intervention, and placement of children and young people with special needs and disabilities in an appropriate education or training setting or program.

The physical environment in most schools is not user friendly to students with disabilities. Playgrounds are rugged, doors have steps with no option of ramps for easy access, and classes are crowded hence wheelchair inaccessible (Rombo, 2007). The curriculum has not been adapted to the needs of learners with disabilities while the education system is examination oriented and schools are ranked based on performance. The performance of students with disabilities in national examinations lowers the overall school mean score that is used in ranking schools nationally. This ranking of schools locks out students with disabilities from general education schools. The distance to and from school can be prohibitive, and at the same time the cost of using public transportation is way beyond the means of most families (Chomba et al., 2014).

Equity

Equity is a measure of achievement, fairness, and opportunity in education. In Kenya, data on children with special educational needs and disabilities is inadequate. Information on the nature and extent of disabilities, factors that affect persons with disabilities (PWDs) the estimated number of PWDs, their distribution in the country, types and causes of their disabilities, the problems they face, and the coping mechanisms they use is non-existent (Cherono, 2004). Guidelines on mainstreaming of special needs education are absent at all levels of education. School administrators and educators lack support structures and training in features that would make inclusive education work more effectively. The Ministry of Education has yet to put measures in place to control and monitor the usage of capitation meant for special education in mainstream schools (Chomba et al., 2014; Mukuria & Korir, 2006).

Cultural Attitudes, Stigma, and Taboos

Kenyan children with cognitive disabilities and hearing impairments are more visible in community settings than those with physical impairments, although they may not be more prevalent than other categories of disabilities (UNESCO, 2008). In a survey on the societal perception of individuals with behavioral and emotional disabilities administered to regular and special education teachers, administrators, social workers, and teacher-education students at Kenyatta University, 80% of participants indicated that in Kenyan society, these individuals are perceived as being mad or possessed by demons (Rono, 2004). The identification of students with behavioral and emotional problems is left to medical professionals who place them in medical wards for individuals with mental illness or in rehabilitation centers with juvenile delinquents and HIV-positive individuals. The definition of behavioral and emotional disorders is specific to cultures (Browder & Spooner, 2011) and a cross-cultural consensus on the definition has not been reached. Different ethnic groups in Kenya understand emotional and behavioral problems differently. For instance, in traditional communities raising boys to be warriors, engaging in aggressive physical activities apropos of war would be the norm. This same activity would be rejected in a different community (Devlieger, 1995; Maja-Pearce, 1998).

Cultural misunderstandings about how disabilities affect intellectual and physical functioning influence attitudes towards individuals with disabilities. For instance, students with disabilities are widely viewed as possessing undesirable attributes that frequently place them in a stigmatized category (Murugami, 2009). Fear of stigmatization and discrimination often lead parents to hide their children with disabilities indoors. In Kenya, children with deafness, blindness, and other complex disabilities are prone to be written off as uneducable and difficult to accommodate within the education system, a form of overt discrimination (Mukuria & Korir,

2006; Munyere, 2004). In some segments of Kenyan society, a child with a disability is seen as a symbol of a curse befalling the whole family. Children with disabilities are rejected or hidden from public view (Kisanji, 1993). These ostracized children receive less parental attention, intellectual stimulation, education, medical care, quality upbringing, and nourishment compared to children without disabilities (Munyere, 2004).

Skills and Physical Environment and Facilities

The supply of trained personnel capable of identifying, assessing, and teaching students with special needs is inadequate. These inadequacies often result in inappropriate placements and a generally poor quality of education for students with disabilities. Technical training devices such as typewriters, braille, hearing aids, specialized play materials, and other assistive devices such as wheelchairs and white canes are either in short supply or totally lacking (Mukuria & Korir, 2006).

The physical accessibility of the school environment is a significant creation of inclusive education that enhances enrollment of students with disabilities. Efficient movement and mobility within the school accommodates children with different physical impairments and assures safety particularly for students with visual and physical impairments (Rombo, 2007). Most school buildings in Kenya are not wheelchair accessible and this makes it difficult for students with physical impairments to attend (Mukuria & Korir, 2006).

Poverty

The families of children with disabilities may incur extra costs associated with their learning that includes the need for educational assessment, personal support and care, assistive devices, transport, and medical costs. Most parents cannot afford assistive and functional devices needed by learners with special needs and disabilities. The government provides basic

learning aids although the provision of assistive and functional devices is constrained due to inadequate resources and funding (Bii & Taylor, 2013; Mukuria & Korir, 2006).

Education, Culture, and Disability

Educational goals that reflect progressive societal values are more likely to affect positive educational outcomes for people with disabilities. Educational planners, especially in socially conservative societies, tend to regard culture as an impediment to educational plans. However, educational plans that do not engage at a significant level with the local cultural context are bound to fail at the initial stages or be short-lived. What is true for education generally is even truer for community disability programs because disability is defined by culture and without an awareness on the part of disability program coordinators and special educators of how disability is perceived in the target culture, a disability/special education program does not stand much chance of being relevant or sustainable (Coleridge, 2000; Engel, 1991).

In poor communities where everybody is struggling for survival, disabled people are rarely an educational priority and are usually excluded from most mainstream education programs. In such circumstances, an awareness of cultural issues surrounding disability is a key part of the process of integrating disability into regular education activities (Coleridge, 2000). When disability is seen in the wider context of human development and social justice, educators are more likely to develop an understanding of disability issues. Passage of the Education for All Handicapped Children Act (EHA) in the U.S. in 1975 resulted from political activism that prompted changes in how handicaps were perceived and defined. Recognizing the importance of public education to integrate disempowered groups into society increases the willingness of institutions such as schools and state to perceive persons with disabilities as a minority group deserving of their civil rights and equal protection under the law. The EHA was an instrumental

event in a broader process of social and cultural change (Churton, 1987; Engel, 1991; Weintraub, Abeson, & Zettel, 1977).

Kenyan society essentially regards impairment as a handicap, a form of discrimination with definite social origins (Kisanji, 1999; Murugami, 2009). This situation creates disadvantages that persons with disabilities experience not necessarily as emanating from some biological determination but from socially, culturally, economically, and politically constructed obstacles. In the extreme, disability becomes equivalent to social oppression within which government policies, state and local authorities, and public institutions such as schools are all key factors in the formation of structures with the potential to oppress persons with disabilities (Furman & Shields, 2005).

The Intersection of Disability, Religion, and Cultural Beliefs

Kenyan cultural and religious beliefs shape public and private behaviors directed toward people within the same religion as well as people from different religious backgrounds (Schuelka, 2013). Gods enjoy their own ineffable existence within Kenya's different religious traditions as the creators of life and the architects of each person's destiny. Religion's take on the concept of disability has a complex and contradictory application in Kenyan society. Disabled people for a long time were excluded from others and were not allowed at religious places. At the same time, believers of the same religion were expected to help and show charitable outlook towards the disadvantaged members of society (Bengtsson, 2014). A study conducted on the ordination of PWD in the Presbyterian Church of East Africa (PCEA) in Kenya revealed the church harbors some reservations in the ordination of PWD. It is believed that disability may hinder one's performance as a minister (Mwaura, 2012). For instance, Christian theology prohibits the entry of "blemished" individuals into the temple and restricts them on

many religious activities (Leviticus. 21:16, Revised Standard Version) but at the same time, religious devotees are expected to be tenderhearted and charitable towards people with disabilities (Leviticus. 19:14, Revised Standard Version).

Christian theological interpretations of disability have significantly shaped the ways in which the Kenyan society relates to PWD. The Bible is intermingled with texts that have been interpreted in oppressive ways and together these continue to reinforce the marginalization and exclusion of PWD in the social, economic, political, and religious life of the society. The belief that disability indicates punishment for wrongdoing and mars the divine image in humans has often barred those with disabilities from positions of leadership or stigmatized them for their presumed lack of faith. The family is “blessed” if the newborn infant is healthy and otherwise “cursed” if born with recognizable physical disability such as deaf, blind, or physical deformity because sins or virtue of parents are passed on to their children (Schumm & Koosed, 2009). Disability has also been identified as suffering that must be endured in order to purify the righteous, a teaching that encourages passive acceptance of social barriers for the sake of obedience to God (Otieno, 2009).

In ancient times, it was believed that disability was related to the presence of an evil spirit within the body of an individual or influence of demonic activities, but this belief is still very prominent in the third world countries regarding the existence of demons (Angi & Gretchen, 2014; Chervyakov, Gitelman, & Shapiro, 1997). Exorcism, black arts, sorcery, and witchcraft were popular in medieval times, but their exact philosophy is not transparent and does not clearly state if children were born with disabilities because the parents were involved in these evil practices or they adopted these practices to cure the disabilities of loved ones (Bynoe et al., 1991).

Biblical Interpretation of Disability and the Rights of Persons with Disabilities in Kenya

The traditional, contemporary Biblical and theological views on disability have a bearing on the way in which society responds to the presence of people with disabilities (PWD) in Kenya, and how they impinge on their human rights. One of the root causes for the prevalence of discriminatory acts against PWD in Kenya is their connection to religion. Society continues to use religious beliefs to explain the presence of PWD in Kenya. The consequences of the interpretation of disability to denote sin, disobedience, ignorance, and unbelief have contributed to some Christians adopting a discriminatory attitude toward PWD. Because of the notion that disability is connected to sin, PWD in Kenya are often targets of healing ministries in churches. Pressure is often placed upon PWD to accept miraculous healing. If healing does not take place, it is confirmed that they indeed are sinners (Njoroge, 2011). In Kenya, the church's understanding of health, illness, and healing is influenced by both African religio-cultural and biblical backgrounds. In these churches, culturally perceived illnesses such as those arising from witchcraft, sorcery, or other mystical factors are acknowledged and addressed. Healing is mediated in a manner understandable to the people, for the prophet-healer and patients share a similar assumptive world. Healing is also mediated in a caring and loving communal context. This approach is evident in both traditional African and Judeo-Christian contexts (Mwaura, 2012).

In self-appraisal, the World Council of Churches (WCC, 1982), the All Africa Conference of Churches (AACC, 1991) and the National Council of Churches of Kenya (NCCCK, 1993) each contend that most of their member churches have yet to fully integrate persons with disabilities into their church and community life. Many churches have socioeconomic development programs such as schools and medical facilities although few churches have

specific programs for PWD. Kabue (2011) acknowledged that the church had been a key model in supporting people with disabilities but also noted that the church glossed over serious issues that affected PWD, and hence became part of the very problem afflicting PWD. Although the church has been explicitly vocal on issues of human rights, it has not embraced disability and the concerns of PWD in its human rights crusade with comparable vigor, even though disability issues are human rights issues as well. Kabue attributed this attitude to the negative portrayal of PWD in the Bible, as persons who were lacking or as sinners who must be cleansed and healed.

Although it has been suggested that churches discriminate against PWD, it is also important to recognize that the church was the first institution both globally and in Kenya to start providing welfare services to PWD (Charlton, 1998). Special schools for children with disabilities were pioneered by churches. For instance, the Presbyterian Church of East Africa (PCEA) began the Kambui School for the Deaf in 1963. The first school for the visually impaired was established in 1946 by the Salvation Army, while the Anglican Church of Kenya (ACK) began St. Luke's School for the Deaf in Embu. The Methodist Church has a school for the deaf in Meru. The Catholic Church has also started several special schools in the country, such as St. Lucy's School for the Blind in Egoji. In addition, the Catholic Church in Kenya has addressed the issue of the rights of PWD. They have called on Christians to re-examine their attitude towards PWD and promote their well-being. The church has taken it upon itself to work with the Mentally Handicapped Association of Kenya to address the violation of the rights of people with cognitive disabilities in Kenya (Benedicte & Lisbet, 2007).

The Christian church in Kenya endeavors to facilitate the integration of disability issues into the whole spectrum of the life of the church and society while at the same time giving adequate attention to those special and unique areas necessary for equalization of opportunities

for PWD (Njoroge, 2011). As part of its mission, the Kenyan Christian church promotes disability human rights concerns. This means the Christian churches in Kenya work towards participation and inclusiveness of PWD in the spiritual, social, and development life in the church and society and advocates for the general improvement of services for persons with disabilities. To campaign for and with persons with disability, the Christian church in Kenya identifies with the problems faced by PWD and strives to create enabling environments in which PWD can participate equally with persons without disabilities in the social, economic, cultural, religious, and political life of society (Kabue, 2011).

Chapter 3

Methodology

This qualitative ethnographic study sought to examine the influence of culture on the education of Kenyan students with disabilities. To gain insights into the experiences of primary school-aged students with disabilities, a qualitative study design employing ethnographic methods was used to examine social interactions, behaviors, and perceptions that occurred within the village of Ochwoga (a pseudonym), a small, low-income, rural, and traditional community in Kenya. A full description of Ochwoga is included in chapter 4.

Qualitative research aims to acquire a better understanding of a phenomenon under study through first-hand experience, detailed descriptions, and citations of actual conversations. It aims to understand how study participants derive meaning from their surroundings and how these meanings influence their behavior (Best & Kahn, 2006; Merriam, 2009). Through the collection of detailed observations, interviews, documents, and artifacts, an ethnographic study design provides rich, holistic insights into the individual and collective identities of participants by situating their views and actions within the location they inhabit (Lapan, Quartaroli, & Riemer, 2011; Merriam, 2009).

Ethnography is the study of social interactions, behaviors, and perceptions that occur within groups, teams, organizations, and communities. My task was to document the cultural perspectives and practices of participants living in a small, low income, rural, and traditional community in Kenya. Cultural interpretation involves the proficiency to portray what the researcher has heard and seen within the context of the community's view of reality (Lapan et al., 2011; Merriam, 2009). Culture is an inherently complex subject and it is difficult to anticipate all participants therefore the research design needed to remain flexible. An emergent

ethnographic design that involved the use of snowball sampling technique to include other agencies and organizations involved in the provision of educational services to students with disabilities was used. Data was collected through formal and informal observations, individual interviews, focus group discussions, and document review. I employed these techniques to reveal the perceptions of religious leaders, chiefs, assistant chiefs, head teachers, teachers, and parents of students with disabilities regarding the influence of culture on the education of Kenyan students with disabilities.

Participant Selection

Study participants were religious leaders, chiefs, assistant chiefs, teachers, head teachers, and parents of students with disabilities. Religious leaders advocate for pupils with disabilities in the churches, community, and in schools as members of the board of management. Parents of school-aged children are indispensable advocates for their children because they are minors with impairments that affect their ability to self-advocate and, in some cases, express themselves. Other children with cognitive, speech, and hearing impairments may not have the capacity to explain why they are in the programs they are enrolled in. Community culture may also be a complex subject for school-aged children with disabilities to discuss. School-aged children with disabilities have decisions made on their behalf by their parents while teachers, head teachers, and religious leaders participate in meetings that directly relate to the education of students with disabilities. These adults are principal actors in shaping the policy context and influencing the experiences of primary school students with disabilities and therefore were considered more resourceful and informative regarding exploring the study questions than the children with disabilities themselves. Participants were twenty-one males and thirteen females making a total of thirty-four and are detailed in the paragraphs below.

Four religious leaders, one chief, two assistant chiefs, four head teachers, and thirteen teachers associated to four primary schools in Ochwoga were selected using a purposeful sampling method called criterion sampling (Patton, 2002, 2005). Religious leaders represent the school sponsors in the management board, are counselors and spiritual leaders in the community, and their perspectives on culture, disability, and education informed the study. The criterion for selecting the chief and assistant chiefs was their level of empowerment that enables them to have information that was useful for the study (Best & Kahn, 2006; Merriam, 2009).

Head teachers are school managers who are charged with the responsibility of admission and placement of students in the school (their role is like a principal in the US). I anticipated they would be good sources of information about their perceptions on the influence of culture on the education of students with disabilities. Another criterion used in the selection of head teachers was the length of service as a head teacher. Head teachers needed to have served in the position of head teacher for at least 3 years. Experienced head teachers were likely to have more information to share than inexperienced head teachers regarding the influence of culture on the education of students with disabilities (Lapan et al., 2011; Merriam, 2009).

Teachers have direct contact with students in class and with members of the community. Teachers were purposefully selected based on their experience and ability to offer insights into the influence of culture on the education of students with disabilities. To be selected to participate in the study, teachers needed to have taught for at least 3 years. Their perceptions on the influence of culture on the education of students with disabilities significantly informed the study. Chiefs, assistant chiefs, head teachers, and teachers are the experienced persons who have lived and worked in the community and had first-hand knowledgeable about the history and culture of the community and schools.

Parents of students with disabilities were selected using a combination of purposeful and snowball sampling techniques (Lapan et al., 2011; Marshall & Rossman, 2011). For example, I relied on the chief, assistant chiefs, and head teachers to refer me to parents of students with disabilities. The chief provided a list of parents of school aged children with disabilities and delivered letters of invitation to these parents. Headteachers gave a list of parents of students with disabilities enrolled in their schools, sent letters of invitation to parents, and followed up with the parents to ensure they reported to school on the scheduled day of the interviews. A copy of the letter of invitation to participate in the research study can be found in Appendix A. The same letter translated into the Luo dialect can be found in Appendix B. Nine parents initially agreed to participate in the study, and I counted on them to refer me to other parents who may not be known to the chiefs and teachers. Given that some children with disabilities are hidden from public view, there was a chance there may be some children with disabilities who are only known to parents sharing the same challenges. One parent referred me to another parent who only agreed to the interview on condition of anonymity. This parent has four children aged three, five, seven, and eleven years, all cognitively impaired, and none of them is enrolled in school.

Agencies involved in the provision of educational services to students with disabilities were to be selected using snowball sampling technique. I requested the chiefs, assistant chiefs, religious leaders, and head teachers to suggest any agencies known to them that might be insightful to the study. The agencies I was referred to did not offer educational services to students with disabilities in the research site.

Data Collection

Qualitative data typically comprises direct quotations from people about their experiences, opinions, thoughts, and knowledge. These types of information are usually

obtained through a combination of individual interviews; focus group discussions; descriptions of people's activities, behaviors, actions; and researcher observations. Documents offered another important source of data that were interpreted and integrated by me to round out the things that were said, done, or described. The data collection techniques and the specific information collected were determined by the theoretical framework, research problem, participants, and purpose of the study (Marshall & Rossman, 2011; Merriam, 2009). Data was collected through formal and informal observations, individual interviews, focus group interviews, and document/artifact collection.

Observations

Direct observation reduces distortion between the observer and what is observed. Because qualitative research occurs in the natural setting, the context or background of behavior is included in observations of both people and their environment and can be used with less readily articulate subjects such as children or those unable to express themselves (Best & Kahn, 2006; Lapan et al., 2011). Observations, both formal and informal, were conducted in four schools in Ochwoga Village to gain insights into the influence of culture on the education of students with disabilities. I immersed myself as intimately as possible in the everyday life and activities of the research setting as a participant observer in order to develop an emic perspective and a more insightful etic perspective of what was happening (Anfara Jr. & Mertz, 2014; Creswell, 2015). During my observations, I studied the behavior of nondisabled persons towards disabled persons, how they spoke to them, and whether they included them in community activities. In school activities I looked at programs scheduled for disabled and nondisabled pupils, their presence or absence during the events, and sought explanations from event organizers. I lived in the community for five months with my parents during the time of my

study and attended five official school events that I was permitted to attend. I attended three zonal school athletics competitions, one district ball games championships, and one parents teachers' association (PTA) meeting. I noted and recorded systematically the events, behaviors, and artifacts (objects) in the setting including empirical observations and interpretations (Labaree, 2002; Merriam, 2009). The observations in the athletics and ball games championships were consistent with what I observed in the PTA meeting and at that point I had reached saturation (Merriam, 2009).

Individual Interviews

Interviews were conducted to access the perspectives of religious leaders, chiefs, assistant chiefs, parents of students with disabilities, teachers, and head teachers of primary schools regarding the influence of culture on the education of students with disabilities. Individual interviews were held with participants who might have perceptions and opinions they might be uncomfortable sharing in a group setting (Best & Kahn, 2006; Merriam, 2009).

Individual interviews were conducted with four religious leaders, one chief, two assistant chiefs, four headteachers of primary schools, and ten parents of students with disabilities to gain insights into their perceptions regarding the influence of culture on the education of Kenyan students with disabilities. Head teachers, chiefs, and assistant chiefs were interviewed in their offices while parents and religious leaders were interviewed at the schools their children attended or they sponsored respectively. Eight parents of school aged children with disabilities were interviewed in the Luo language. The rest of the participants were interviewed in English even though some of them used some proverbs and sayings in the Luo language. The interviews conducted in the Luo language were transcribed in Luo then later translated into English. I enlisted the assistance of a retired primary school teacher to check the accuracy of my translation

from the Luo dialect to English for meaning and context in which words, proverbs, and sayings were used. I selected this individual because he is fluent in both Luo and English and his age and experience of the Ochwoga culture and community also put him in a better position to understand the meanings and contexts in which certain words, statements, sayings and proverbs were used.

A Sony audio-recorder was used to record interviews while the recorder application on my iPhone was a backup in case of a technical failure in the audio recorder. Conducting 21 individual interviews lasting 45 minutes to an hour allowed me to probe the attitudes, beliefs, desires, and experiences of participants to get a deeper understanding of their perceptions regarding the influence of culture on the education of students with disabilities. I gave the interviewees my full attention and adjusted my interviewing style to the interviewee's needs (Lapan et al., 2011; Merriam, 2009).

Semi-structured interview protocols were developed for individual interviews, which can be found in Appendix C. The Luo translation of the interview protocol can be found in Appendix D. A semi-structured interview guide was used to provide reliable and comparable qualitative data and allowed for flexibility in questioning so that clarification could be sought. Semi-structured interviews also allowed respondents to give as much information as they possibly could and respond in a manner, they were comfortable with. Informants had the freedom to express their views in their own terms (Lapan et al., 2011; Merriam, 2009). Individual interviews were audio recorded and transcribed to ensure accuracy. The audio recorded and transcribed notes were supplemented with field notes made during observations to provide clarity and context (Creswell, 2015; Labaree, 2002).

Focus Group Discussions

Focus group discussions were conducted with thirteen primary school teachers from four schools to examine their perceptions on the influence of culture on the education of students with disabilities. Four focus groups consisting of three teachers in three focus group discussions and four teachers in the fourth focus group discussion were conducted so the discussions could be effectively moderated. Focus group participants can build on ideas and concepts common to all members that may not be talked about in day-to-day conversations (Gibbs, 1997; Merriam, 2009). Focus groups were conducted to provide individual perspectives and allow participants to hear and engage in dialogue based on the responses of others who may work in the same community but may have different experiences and views. The interactions among members of the focus groups made the gathering of data on the attitudes, emotions, experiences, and reactions of respondents possible. Focus group interviews were held with participants who were familiar with one another and felt at ease discussing their perspectives in any kind of environment (Creswell, 2015; Merriam, 2009).

A focus group discussion enabled me to gather a large amount of data within a short span of time and obtain several perspectives about the same topic. The group context elicited a multiplicity of views, emotional processes, and information in a way that allowed me to discern why the issue of culture is salient, as well as what is significant about it. As a result, the difference between what individuals claimed to do and what they did was demonstrated (Gibbs, 1997). Whenever members of a focus group attached different meanings to the same phenomenon or understood it differently, I generated multiple explanations of their behaviors and attitudes. The focus group discussion made it possible to explore power differentials among participants, examine the culture of the community from the language used by the group, and

explore the varied views of focus group participants on the influence of culture on the education of students with disabilities (D. L. Morgan & Krueger, 1998). Focus groups were audio recorded and transcribed to ensure accuracy. The audio recorded, and transcribed notes were supplemented with field notes made during observations to provide clarity and context (Creswell, 2015; Labaree, 2002).

Document and Artifacts Collection

Document review and artifacts was used as part of in-depth data gathering for this study (Marshall & Rossman, 2011). When studying culture, social setting, or a phenomenon, collecting and analyzing the texts and artifacts produced and used by members of that social setting can foster understanding (Anfara Jr. & Mertz, 2014). I was interested in collecting photographs, articles, documentaries, educational material, and books that have been produced or used by members of the community, school, or government. I collected a Ministry of Education calendar of activities at the institutional level, a school enrollment list, a Teachers Service Commission term dates for schools and colleges, and a Ministry of Education calendar of activities, dates, and venues, Kenyan sign language finger alphabet, and a picture of various emotions. Analysis of documents is a potentially rich source of data in portraying the value, beliefs, and lifestyles of members of the community under study and was useful in developing a deeper understanding of the influence of culture on the education of students with disabilities (Marshall & Rossman, 2011).

Data Analysis and Interpretation

Data was analyzed qualitatively. Qualitative data analysis involves making meaning out of the data collected from observations, interviews, focus groups, documents, and artifacts. Seventeen pages of field notes were analyzed for subjective and objective impressions observed

in the data-gathering context. Data was analyzed as it was collected and transcribed (Lapan et al., 2011; Merriam, 2009). A total of twenty-three hours individual interviews and six hours of focus group discussions were transcribed and analyzed. Similar concepts were clustered together, sorted, coded, and analyzed as data collection continued so that any gaps could be addressed, and questions followed up. Transcripts were analyzed to trace the flow of conversation, changes in positions after interaction with others, and ideas that appeared in more than one instance or cut across the conversations (Gibbs, 1997). Documents and artifacts were analyzed for whom the artifact was created, contents, and how the document was used. Six documents and artifacts collected from the field were analyzed in tandem with data collected from observation, individual interviews, and focus group discussions (Lapan et al., 2011; Merriam, 2009).

Once interview and focus group data had been transcribed and field notes written, they were unitized and entered to an Excel spreadsheet. Data were sorted into codes and then into categories to make identification of certain aspects feasible (Creswell, 2015). The identifying characteristics of the data was noted to develop themes relating to the influence of culture on education of students with disabilities. Themes were compared to the literature reviewed and the theoretical framework.

Codes, categories, and themes were compared constantly to verify that they adequately addressed the research questions (Marshall & Rossman, 2011). The process of constant comparison continued until no new information seemed to be coming out of the data (Merriam, 2009). Once saturation had been reached, a narrative account of the findings was written using the lens of the theoretical framework and information gathered from the literature review. Conclusions and implications were developed that responded to the research problem and questions.

Research Quality

Research quality is critical in a qualitative ethnographic research design because it relies on the interpretation and analysis of culture from the perception of the participants and the analysis of the ethnographer. Ethnographic fieldwork is shaped by personal and professional identities of the researcher just as these identities are shaped by individual experiences of the researcher while in the field. My experience in the research setting had a bearing on the interpretation of the perceptions of participants. Since qualitative data are logically interpreted from the perceptions of the participants and my methodological and theoretical approaches, trustworthiness of the research quality comes into question (Marshall & Rossman, 2011; Merriam, 2009). Research quality was established by employing the methods that assure credibility, transferability, dependability, and confirmability.

Credibility

Credibility was assured through prolonged engagement and persistent observation (Merriam, 2009). I strove to accurately report the observations made within the setting and interviews conducted with participants. I spent enough time in the field to learn or understand the culture, social setting, and educational experiences of students with disabilities. This involved spending five months observing various aspects of the local culture, speaking with a range of people, and developing relationships and rapport with members of the community. Development of rapport and trust facilitated an understanding and co-construction of meaning between members of the community and me. The purpose of persistent observation was to identify those characteristics and elements in the community and culture that are most relevant to the education of students with disabilities and focusing on them in detail (Lincoln & Guba,

1985). Data was analyzed and compared continuously to refine constructs of reality to reflect the life experiences of students with disabilities as accurately as possible (Merriam, 2009).

Transferability

Transferability was enhanced through techniques of triangulation, member checking, peer debriefing, and thick description. Triangulation is the process by which data are verified by agreement with other data obtained from other sources, different researchers or data collectors, or different procedures of collecting data. I used multiple types and sources of data and employed a theory to highlight similarities and differences that deepened interpretation of the data (Best & Kahn, 2006; Lapan et al., 2011; Merriam, 2009). I collected data through observation, individual interviews, focus groups, and the collection of documents and artifacts from multiple sources that included local administrators, chiefs and assistant chiefs, religious leaders, head teachers, and parents of students with disabilities. Data was analyzed against Whyte and Ingstad's (1995) culture and disability theory to illuminate any blind spots that might have existed in interpretive analysis. Transcribed notes were shared with participants to establish the accuracy with which I represented their views as a strategy for member checking. I requested a fellow doctoral student to examine the aspects of my data collection, coding, analysis, and interpretation to uncover any assumptions, test the plausibility of conclusions, and highlight my posture toward data and analysis (Lincoln & Guba, 1985; Merriam, 2009; Patton, 2005).

Thick description refers to the detailed account of field experiences in which the researcher makes explicit the patterns of cultural and social relationships and puts them in context (Marshall & Rossman, 2011; Merriam, 2009). By describing the setting, culture, and the perceptions of the participants in enough detail, I was able to demonstrate the extent to which the

conclusions drawn are transferable to other times, settings, situations, and people. With the provision of enough descriptive data, a reader interested in applying the study to a corresponding setting, situation, or group of people will have the information necessary for transferability.

Dependability

Dependability was established through an inquiry audit. Transcripts translated from the Luo dialect were checked for accuracy by a retired teacher in Ochwoga community before being fed into excel spreadsheets. An external auditor was provided with all the field notes, interview transcripts, unitized data sheets, and all materials used in the study. I had a cohort member who recently completed her dissertation serve as my external auditor. The external auditor examined the process and the product to evaluate the accuracy and whether the findings, interpretations, and conclusions are supported by the data (Lapan et al., 2011; Merriam, 2009).

Confirmability

Confirmability was ensured through triangulation. Triangulation involved the use of multiple data sources in the investigation to produce a deeper understanding of the influence of culture on the education of students with disabilities. Triangulation ensured that the account is rich, robust, comprehensive, and well developed. The use of multiple methods of data collection facilitated deeper understanding of the influence of culture on the education of students with disabilities. The consistency of findings generated by different data collection methods elucidated complementary aspects of the same phenomenon (Patton, 2002, 2005).

Ethics of the Study

Before proceeding into the field to collect data, I obtained approval for the research study from Wichita State University's Institutional Review Board (IRB) to ensure that participants rights were protected. Having already completed the required Collaborative Institutional

Training Initiative (CITI) training, I was prepared to uphold the social and behavioral standards associated with the conduct of research on human subjects. I assured participants prior to conducting interviews and focus groups that their participation in the study was voluntary and that identifying information such as names and locations would not be reported in the study. I explained to participants that they would be neither harmed nor exploited by their participation.

Written consent was obtained from all study participants prior to their involvement in interviews and focus groups discussions. I reviewed the content of the consent forms with participants during the interview orientation and introduction. The consent form informed participants that participation in the study was voluntary and they had the option to skip questions they felt uncomfortable responding to or withdraw from participation at any point during the study. Copies of the consent forms can be found in Appendix E and the Luo translation can be found in Appendix F. A detailed explanation of the purpose of the study and the uses of participants' perceptions was given to participants before the interviews. I clarified that in the focus group discussions, participants would hear what others had to share and I would not be able to guarantee confidentiality. However, I appealed to participants to keep confidential what they heard during the meeting. I also assured participants that I would anonymize data from the interviews and focus group discussions (Gibbs, 1997; Lapan et al., 2011).

Recordings and transcriptions of the interviews are stored in a secure, online, password-protected program and will be maintained for 5 years at WSU by my dissertation committee chair and myself as the co-investigator. Transcripts and recordings will not be labeled with identifiable information. The anonymity of all participants will be preserved in presentations of the research findings, written and oral, published and unpublished.

Researcher Positionality

The perspective or position of the researcher shapes all research: quantitative, qualitative, and even laboratory science. Much as preconceptions are not the same as biases, it is necessary to mention them. Since the researcher is the instrument of data collection in qualitative research, it is important to understand something about the position, perspective, beliefs, and values of the researcher (Malterud, 2001). For this reason, the following statements reflect my positionality in the study.

My presence in the setting was sustained and intensive during the study. I found a lot of changes on returning to the village after being away for six years. The system of governance had changed, and the new county government brought services closer to the people. An Inservice program was initiated at a local primary teachers' college. The program offered training to special education teachers specialized in hearing and visual impairment. The program is referred to as a school-based program. The school-based program offers training to teachers during school holidays so that classes are not interrupted during the term.

A few teachers and headteachers were known to me but majority were young teachers who started teaching in the region after I left for further studies in the United States of America. Headteachers, teachers, and chiefs were very eager to assist me in whichever way they could. They assisted in delivering some letters of invitation to parents in their homes and giving me directions to places I needed to visit. Religious leaders willingly came to the schools for interviews and some of them prayed at the beginning and end of the interview sessions.

I selected participants, scheduled interviews and observations, and collected documents. I had to reschedule interviews with 2 headteachers who had to attend a meeting at the County

Education Office called on short notice. They notified me of the development as soon as they got information about the meeting and offered alternative days that fitted into my interview schedule.

I lived with my parents in their home within the community for the entire 5-month period that I collected data. This might have led to the development of unique relationships with the participants, and therefore it is necessary to examine any ethical issues and concerns for the participants. It was my sole responsibility to collect, analyze, evaluate data, and derive conclusions about a study of my own people. As the primary instrument of data collection, my competencies as a researcher, my affiliations with the community, and my experiences in the field of education influenced the way the study was conducted. Moreover, these factors also influenced what I chose to investigate, the angle of investigation, the methods I judged to be most adequate for this purpose, the findings I considered to be most appropriate, and the framing and communication of conclusions.

During my tenure as a classroom teacher in Kenya, I taught students with various disabilities. I had no training in special education at that time but discovered there were numerous resources available to students with special needs unknown to many educators as well as administrators. Most of these resources were underutilized because of lack of knowledge of their existence. I became a link between Non-Governmental, Faith-Based, and Community Based Organizations and the students I taught who had special needs. My interactions with students with special needs influenced my decision to study special education as the subject of my dissertation. With my extensive experience in the field of education in Kenya as a classroom teacher, administrator, and now researcher, shared meaning was constructed. To take care of the possible influence that my experience might have brought to the research process, I reviewed all findings and related them to the evidence provided by field notes, participants, documents, and

artifacts. I also ensured that the conclusions were closely tied to the findings, theoretical framework, and the literature reviewed (Malterud, 2001; Marshall & Rossman, 2011).

During the study I kept a diary where I made entries daily relating to the research process. I kept a record of methodological decisions and the reasons for those decisions, the logistics of the study, and reflections upon the research process in terms of my own values, beliefs, and interests. I used the diary to guide me through the context of knowledge construction at every step of the research process. I made a brief report within my positionality of how my preconceptions, beliefs, values, assumptions, and position might have come into play during the research process (Lincoln & Guba, 1985; Malterud, 2001).

While collecting data I came across some participants who were reluctant to participate in the study, others falsified information to present a good picture of the community in reference to disability, I had problems with translation from the local Luo dialect into English, and insufficient data on the number of school age pupils with disabilities in Kenya. I informed the participants that their participation was voluntary, and they could withdraw at any point they felt uncomfortable with the way interviews were conducted. I also assured them that their information would be kept confidential. To mitigate against misrepresentation of information I used various sources of information on the same subject and compared responses. I sought assistance from a translator fluent in both languages and a resident of the community capable of translating both meaning and context in which words, statements and proverbs were used. I researched The Ministry of Education, the Institute of Special Education websites, and census reports on numbers of pupils with disabilities and enrollment statuses even though the numbers varied.

Some participants were reluctant to participate in the study for various reasons. One headteacher denied ever inviting me into the school but quickly changed his mind when I produced the letter of acceptance, he wrote indicating a willingness to participate in the study. Even though I stated his participation in the interview ought to be voluntary and he could withdraw at any point, he still agreed to be interviewed. A parent to a pupil with disabilities was reluctant to participate in the study for fear of being associated with disability. I assured the parent that his identity would be kept confidential and that he could withdraw his participation any time if he felt that the questions were intrusive and could expose his identity.

A section of participants seemed to respond to questions according to what they felt would make the community look good as regards the treatment of persons with disability and did not present the reality. In some cases, they created the impression government policies were being implemented as directed by the government and downplayed the community limitations. I collected data on the same subject from various sources and compared the responses to arrive at the right position.

I conducted interviews in both English and Luo. Meaning can be distorted or lost altogether during translation. I invited a translator fluent in both English and Luo to review my translations of letters of invitation, informed consent forms, interview protocols, and interview transcripts into Luo. This process was very tedious and time consuming since we had to go over all the transcripts together after the translations.

Statistically, there's no clear figure of how many children with disability are in or out of school in Kenya. I looked through records from the Ministry of Education and Kenya Institute of Special Education for data on number of students enrolled in schools and the census reports for

the number of school aged children with disabilities. I presented different sets of numbers to give a general picture of the numbers of pupils with disabilities and their enrolment statuses.

Chapter 4

Findings

Findings from data collected through observations, interviews, focus group discussions, and document review indicate that cultural beliefs have a bearing on the way pupils with disabilities are treated in both the community and in the schools. The first section is a description of Ochwoga village in terms of location, size, population, the four schools that were part of the study and their religious affiliations. Next is a discussion of cultural beliefs held by the community in Ochwoga village about the worth of persons with disabilities that lead to discrimination and segregation in the community and employment. A discussion of the way educational services are provided to pupils with disabilities highlights staffing, physical structures, admission processes, integration, and inadequate funding in Mareba, Lando, Ngango, and Akuno primary schools. The section on experiences of pupils with disabilities in these schools shows that students with disabilities enroll in schools in their late years, suffer low self-esteem, and are labelled with names and nicknames because of village cultural beliefs about disabilities. The last section presents findings on parents of pupils with disabilities and the roles played by religious leaders, and local leaders in the education of pupils with disabilities.

Ochwoga Village

Ochwoga Village (pseudonym) is a small, low-income, rural, and traditional community in southwest Kenya. Ochwoga village is approximately 13.2 square kilometers (sq. km.) with a population of 4800 (Kenya National Bureau of Statistics, 2016). The way of life in Ochwoga community is simple with most of the adult population being farmers. Others are small-scale traders, civil servants, social workers, artisans, pottery makers, craftsmen, and teachers.

Entertainment in Ochwoga involves folk songs accompanied with instruments such as orutu¹, ohangla², and nyatiti³. Dancers typically wear sisal skirts and animal skin regalia, and have their faces painted. Other forms of entertainment are exhibitions of food items, pottery, crafts, palm woven baskets and hats, intervillage soccer and netball friendly matches, ajua⁴, and potea/pata⁵ especially in open air markets on market days. Religious activities are bible study meetings and visits to members who are either sick or bereaved. Women form self-help groups where they either raise money for projects or learn cookery and crafts.

Some norms observed in the community are ceremonies performed before planting or harvesting. Child naming is another ceremony performed in the community. For a male child the ceremony is held three days from the day the child is born while for the female child it is performed on the fourth day. In the case of children born with disabilities, parents do not announce their birth and therefore the child naming ceremony is not held for them.

The village is one administrative location subdivided into two sub-locations headed by a chief and two assistant chiefs who were purposively selected as study participants. Ochwoga is a traditional community culturally entrenched, members are set in their ways, activities are limited by taboos and governed by community values and norms. An elder's council is the custodian of norms and values that govern the community. These values are passed on from one generation to the next through the elder's council. The elders are consulted on issues affecting community members and they also arbitrate disputes in the community. The church has tried to take over some of the roles played by the elder's council but has not been successful since most churches

¹ Orutu- a one-stringed fiddle originated in the Luo community

² Ohangla- A set of 8 drums hit by a stick and a cylindrical shoulder slung drum made from alligator skin

³ Nyatiti- The nyatiti is a five to eight-stringed plucked bowl yoke lute from Kenya.

⁴ Ajua- Ajua is a very popular gambling game in western Kenya

⁵ Potea pata -Potea pata is a form of card game gambling

are viewed as having foreign origins and therefore lack the capacity to offer solutions to local problems. Since chiefs and religious leaders have competing interests in community affairs, chiefs who are appointed into office by the government use the village elders to negotiate a working relationship with the elder's council members. The council of elders have a strong influence on community affairs. Their beliefs and values contradict those held by the church. Some of the members of the council have been appointed by the chief to committees mostly dealing with land issues in the location.

Ochwoga is primarily an agricultural village and social and economic activities are determined by seasons. The village experiences tropical equatorial type of climate with two rainy seasons, a hot and dry season, and a cool and dry season in the year. The short rains start in November and end in December while the long rains fall in March through May. December to February is the hot and dry season and June to October is the cool dry season. Rains are heaviest in April and May. During this time the roads become difficult to navigate especially the earth roads. During the time of the study, the months June through October (the cool dry season), the community was mainly involved in weeding maize, beans, groundnuts, pineapples, tobacco, and sugar cane. Maize is harvested in August, beans in June through July and tobacco and sugarcane are perennial cash crops planted, weeded, and harvested any time of the year as they mature.

There are several churches in this community representing different Christian faith traditions: Seventh-day Adventist, Anglican, Catholic, Pentecostal, and Apostolic while other residents are followers of the Legio-Maria sect. Legio Maria Church of Africa, founded in the early 1960s, was a transformation of the Roman Catholic Church Local Legion of Mary movement into a purely new experience of God. Legio Maria was legally registered in Kenya in 1966 as a church, expanded massively in the late 1960s, 1970s, and 1980s, and eventually spread

to many countries in Africa, including Uganda, Tanzania, Congo, Zaire, Rwanda, Ethiopia, Sudan, and Nigeria. Members of the Legio Maria movement believe in the central role of Mary as “queen,” “mother,” and the “mediator” and give central importance to the need to control the world of the spirits through possession, exorcism, and healing. The Legio Maria use symbols such as crucifixes, icons and images, holy water, large rosaries, and cassocks (kanzu). Religious habits are used by all members of the movement to symbolize the power of God. The headquarters of the Legio Maria Sect known as Jerusalem is in a communal village in Migori County, Nyanza Province. Jerusalem is built around the house of the late Simeo Ondeto, the founder of the Legio Maria movement, and currently known as the “Baba Messiah” by its members. These various Christian faiths influenced community perceptions about persons with disabilities.

Ochwoga has twenty-two primary schools from which head teachers and teachers at four schools were selected to participate in the study. The four schools - Akuno, Mareba, Lando, and Ngango - were selected to be part of the study because they are the oldest, well established schools affiliated to churches, and have large numbers of pupils with disabilities. The headteachers at these schools have at least three years’ experience as headteachers. Akuno and Mareba Primary in the village were selected to be integrated schools by the Ministry of Education. They were the two schools with the highest enrollment of pupils with disabilities in the year 2005 when the Ministry of Education made selections of integrated schools countrywide. Akuno Primary School was established and operated as a boarding school for pupils with physical impairments and later admitted nondisabled pupils in the day section. Thus, Akuno Primary School has both boarding and day school sections. A boarding school has students who reside in the school in dormitories during the school term and only return home

when school closes. The day school has day scholars who come to school in the morning and return home at the end of the day daily. All four primary schools serve pupils in classes 1-8 (the equivalent of grades 1-8 in the US).

Three of the schools (Mareba, Lando, and Ngango) were established by Christian missionaries during the colonial period between 1956 and 1958. Mareba was established by the Anglican Church of Kenya (ACK) then known as the Church Missionary Society (CMS) in 1956, Ngango was established by the Seventh Day Adventist church in 1957, and Lando Primary School was established by the Catholic Church in 1958. Akuno Primary School was established and managed by the members of New Apostolic Church as harambee ⁶ (all pull together) school then later registered by the Ministry of Education as a public school. All four schools are still affiliated to their respective churches. The churches establish and run the schools then register them with the Ministry of Education. The Ministry of Education acknowledges these churches as the sponsors of the schools and allows them to nominate three appointees to the Board of Management (BOM). Table 1 contains a summary of information regarding the four schools.

⁶ Harambee- Harambee is a Kenyan tradition of community self-help events, e.g. fundraising or development activities.

Table 1.
The Four Schools

	Akuno	Mareba	Lando	Ngango
Year founded	1967	1956	1958	1957
Type of school	Integrated boarding and day school	Integrated day school	Regular day school	Regular day school
Church affiliation	New Apostolic Church	Anglican Church of Kenya (ACK)	Catholic Church	Seventh Day Adventist (SDA)
Number of teachers	10 TSC 3 SNE ⁷	15 TSC	7 TSC ⁸ 6 PTA ⁹	10 TSC 4 PTA
Number of pupils	372	480	400	360
Number (or %) of students with disabilities	39 (10.48 %)	22 (0.25 %)	10 (2.5%)	12 (3.33%)

I settled on this site because of my knowledge of the native language spoken by members of this community, which is the Luo dialect. The location was feasible for research since I was almost assured of building trusting relationships among my own community. Participants willingness, eagerness, and enthusiasm to participate in the study was impressive when I delivered letters of invitation to them. I speak the Luo language, lived in Ochwoga Village as a child, still have family living in Ochwoga Village, and attended one of the primary schools selected for study. Cultural values and traditions are typically passed down from generation to

⁷ SNE-Special Needs Education
³ TSC-Teachers Service Commission
⁴ Special Needs Education

generation among the Luo tribe just like the other tribes in Kenya. Nothing sets the Luo tribe apart from the other tribes in Kenya. There are 42 different tribes in Kenya, all with different dialects. The national language is Swahili and English is the business language. Each language is widely spoken in the country, which aids communication between the different tribes. In the Kiswahili language, the concept of nationalism is referred to as “Undugu.” The English translation of Undugu is brotherhood, implying that all Kenyans are brothers and should work together to advance the collective prosperity of the entire nation. Although political ideologies may sometimes clash, the various tribes in Kenya are unified by an overarching national identity and a common goal for a stable, peaceful, and prosperous country. Even though there are numerous tribes and dialects and occasional factional differences, Kenya is considered a monocultural society (Kambutu & Nganga, 2008).

Cultural Beliefs About Persons with Disabilities in Ochwoga

Analysis of the data revealed members of Ochwoga village strongly believe that disability is caused by evil spirits, witchcraft, or past actions of parents and forefathers, and therefore can only be treated by spiritual healers and traditional medicines. The overarching belief that disability is a mysterious and taboo subject has contributed to community attitudes about the worth of children with disabilities, the discrimination that persons with disabilities experience in employment and community activities, and the segregation that comes with overt discrimination.

Disability is a Mysterious and Taboo Subject

Disability is a mysterious subject to most people in the community and is rarely discussed in public forums. Some believe that those who talk about it invite disability into their lives. One teacher expressed that people completely refuse to discuss issues affecting persons with

disability for fear of becoming disabled themselves or bringing forth children with disabilities. This teacher shared, “And some people in our community feel like disability is something which needs not to be talked about. Even if you want to discuss the welfare of persons with disability some people feel that it is an omen.” The welfare of disabled persons cannot change if disability is a topic that cannot be discussed. A parent to a child with disability shared, “They say things about my child behind my back, but no one has ever had the courage to say anything to my face. I also do not discuss my child’s disability with anyone except her teachers.” Yet another parent who is aware of his child’s disability had this to say, “When I brought my child to start school here, I did not tell the teacher about my child’s disability. I asked for admission like any other parent and to date the teachers have not mentioned my child's disability to me.” In this case both the parent and the teachers avoid discussing the child’s disability even though all parties are aware a disability exists.

Other members of the community believe that if you spend a lot of time among disabled persons then you will become disabled. According to a teacher of special needs, an education officer on a field visit made a very unfortunate remark during his visit. The education officer said to the teacher, “My friend, quit spending all your time with these students with disabilities. With time you will also be like them.” The teacher described the remark as unfortunate because the officer was on a field visit to assess the implementation of special needs education in the school and was discouraging a teacher who had dedicated his time to pupils with disabilities.

Some members of the community believe children born with disabilities are bewitched, cursed, born to evil parents, or are punishments for evil deeds committed by their forefathers. The chief informed me, “Others think they are a bad omen, have evil spirits in them, and families that have disabled children are cursed.” A parent also shared, “Some people in the community

think my child is an outcast or that she was born deaf because the parent did something bad.” Such beliefs are held by people who do not have children with disabilities. Parents who have children with disabilities are aware that such beliefs exist but do not believe there is any truth in those superstitions. Another parent informed me, “People believe that as parents we did something bad and that is why our child is disabled. I have no idea what we might have done. Our child was just born disabled.” In the past, children born with disabilities were abandoned in public places such as forests, roadsides, childless couples’ doorsteps among others and only lived if someone picked them up and nursed them. An assistant chief reiterated, “I have handled cases of disabled children abandoned at the gates of childless couples. These couples are normally happy to adopt and raise these children.” On another note a religious leader shared, “We used to hear stories of children born with disabilities picked up from the forest by people collecting firewood but these days they take them to orphanages.” An orphanage is an institution, or home, committed to the care of orphans and other children separated from their biological families. Religion and education have played a big role in changing the way children born with disabilities are viewed and treated in Ochwoga village, including beliefs about their worth and ability to work.

Disability and Child Labor

The law under the Employment Act, 2007, Part VII provides for protection of children from the worst forms of child labor. Section 56 prohibits employing a child below 13 years in any form of undertaking (The Government of Kenya, 2010). This minimum age restriction does not apply to employees who belong to the same family as the employer, which means that families can rely on their children to help with the family’s business. Therefore, during the school holidays, sports days, and the weekends, pupils helped their families with farming

activities. An assistant chief informed me, “Parents keep pupils at home during sports days to assist them in farm work or to run errands for them.” Sports days are set by the ministry of education in the schools’ calendar for interschools extra-curricular activities such as football, netball, basketball, field and track events, music competitions, and drama festivals. Some families send their children to markets to hawk seasonal fruits such as mangoes, oranges, avocados, paw paws, among others. On these days, the children skip school. A head teacher shared, “Some parents come to school claiming that their children are sick at home and we meet these children hawking fruits in the market.” While this cultural practice keeps children from attending school, it is indicative of the child’s value and worth to the family. Children with disabilities, however, are not involved in the farming activities because their families believe they are incapable of doing farm work. This attitude has also made it difficult for persons with disabilities in Ochwoga Village to find employment.

Discrimination in Employment

When it comes to employment in Ochwoga Village, disabled persons never make it to even interview. They only get employed because of affirmative action law. However, affirmative action law favors those with physical impairment more than the other categories of disabilities. A teacher explained, “Most people in the community believe that mentally impaired people cannot work at all.” On the same note another teacher shared, “Some see them as burdens, others think they cannot be productive, while others believe they cannot be trusted with any kind of responsibility.” The community does not see children with disabilities as members of the community who can make meaningful contributions to the society.

At the time of this study, the affirmative action law required equal representation of all segments of the population in employment and committees. The affirmative action law is

inclusionary because it also applies to persons with disabilities. The chief informed me, "Even here, right now, when I want to constitute a committee of any nature, I have to give disabled persons a chance to participate." The affirmative action law has improved efforts to promote the rights of persons with disabilities not only in programs and committees but also in education. This legislation compels leaders to include persons with disabilities in more activities than they would be willing to otherwise.

Discrimination in Community Activities

Given the general superstitious beliefs about persons with disabilities, it is perhaps no surprise that children with disabilities are treated differently in the community; that they are not considered part of the community. They are in fact regarded as outcasts, bad omens, abnormal, worthless, and born of cursed people. A parent lamented, "The community I live in sees children with disabilities as burdens. Others think they cannot be productive, while others even feel they should not be seen in public." Some children with disabilities are kept in isolation so that visitors cannot see them. A headteacher narrated an experience with a disabled child hidden in a home, "A villager notified me about a school aged disabled child hidden in a home. The parents only allowed me to see that child after I assured them that I just wanted to take the child to school." Some families hide their disabled children in the house when visitors come into their compound because they feel embarrassed to be associated with disability. Having disabled children is viewed as ruining the good image of the family.

As noted previously, persons with disabilities are usually not assigned any tasks to perform because most people believe they cannot work at all. A parent shared, "People in my community look down upon persons with disability because they think they are worthless and cannot do any work." This notion of being worthless carries over to the family, where children

are often neglected. Families do not care whether children with a disability bathe or not and some parents do not even bother to buy them new clothes. They get by with hand-me-down items from their nondisabled siblings. According to a teacher participant, “Sometimes these children with disabilities come to school with tattered and patched clothes while others roam the village naked. We have had to contribute money to purchase school uniforms when parents are not willing to replace the tattered uniforms.” Children with disabilities only get necessities after their nondisabled siblings have been provided for.

When it comes to marriage, disabled persons are considered unsuitable partners by the community. If a nondisabled person gets married to a disabled person, the family and friends of the nondisabled person do not accept the disabled partner. A religious leader explained, “I joined the church because my family rejected my spouse. The church accepted my spouse and I despite my spouse being disabled.” Families and friends interpret such unions as some form of betrayal and go as far as mocking the nondisabled partner. To the friends and family, the nondisabled partner has lowered his/her self-worth by marrying a disabled person. A teacher shared, “If you do not have any disability and you marry somebody who is disabled, your friends and family will not accept this person.” People who have entered such marriages are shunned by both friends and families. The nondisabled person is however not rejected by his/her friends and family.

Families that hide their family members who are disabled are believed to do so because it reduces the chances of the nondisabled members’ getting married. Females are affected more than males when it comes to marriage. A religious leader commented, “Weddings have been cancelled because the groom’s family found out that there is a disabled person in the bride’s family and no amount of counselling can make them change their decision.” The community

believes that disabilities occur in certain lineages and therefore marrying someone who has a disabled sibling or parent increases the chances that he or she will introduce disability into the family. It is believed that families with disabled children are cursed.

Marriages break up when a couple gives birth to disabled children with the male partners abandoning their wives with the children or worse still driving them out of the family home and moving on to establish new marriages. The extended family always blames the wife for giving birth to children with disabilities and pressure the husband to marry another wife. To illustrate, a parent to four children with cognitive impairments confirmed that members of the community do not accept children with disability. In her case, her husband moved to the city, cut all communication with her, and stopped visiting the home. Her children have never been to school because she has no means of getting them to school and she believes no school will accept them. Even if they go to school no one will be willing to employ them, so she sees no point in taking them to school. This single parent said,

My husband moved to the city after our four children were born. I only realized that he abandoned us when my brother-in-law told me that my husband had remarried and asked me to leave the family home with my abnormal children. I could not leave because I had nowhere to go. My husband has not come home since he left for the city and does not send any money. My children have been rejected by their father, which school will accept them? And even if they go to school who will employ them? Caring for these children alone is a lot of work already. I do not think I can be able to take them to school.

Women suffer the most because they are blamed for giving birth to children with disabilities and are also abandoned with those children to take care of single handed.

Segregation

Disabled persons are segregated in the community. They are not allowed to mix freely with nondisabled persons and their peers fear them. This is evident by their absence during ceremonies and events held in the community. They are excluded from events like weddings, funerals, political rallies, and public meetings hosted by local leaders. The chief stated, “Children with disabilities do not attend public events like funerals, political rallies, weddings, sporting activities, and parties. Organizers chase them away if they show up for fear that they may misbehave or cause other problems at such events.” It is believed that during their bad moments they may demonstrate inappropriate behaviors that disrupt activities in the ceremonies, and it is therefore safer to keep them away than to have them present.

Observations during zonal athletics corroborated that cocurricular activities were scheduled only for regular education pupils. Zonal athletics are interschool field and track events organized at the zone levels. The Ministry of Education structure for schools subdivides schools into counties, districts, divisions, and zones for administration and supervision purposes. Pupils with disabilities were excluded from Physical Education (P. E.) lessons and other sporting activities. During interschool sporting activities pupils with disabilities stayed at home because there were no activities planned for them. Even the calendar of activities sent to schools from the ministry of education did not have any activities scheduled for pupils with disabilities. Teachers also admitted to discriminating against these learners during games because the teachers do not know how to involve them in the sporting activities. A teacher confessed, “We treat them normally except in games when we exclude them. This is also frustrating because they are supposed to participate in games.” Instead, these teachers advocated for special schools for these learners with disabilities. A teacher asserted, “If possible, these children who have special

challenges like cognitive and visual impairments should be taken to special schools because that is where they will be catered to better.” The teachers felt that some of these learners’ time was being wasted in the regular education schools in the name of integration.

Provision of Educational Services to Pupils with Disabilities in Four Ochwoga Schools

In Ochwoga village, despite the community’s negative disposition toward them, students with disabilities are provided with education in various settings. Some are enrolled in special schools, others in special units within general education schools, and yet others are integrated in general education classrooms. More pupils with disabilities are in schools since the process of enrolment, assessment, and placement is more clearly defined, and buildings and other physical facilities have greatly improved with the introduction of integration than before. Findings presented in this section come from observations, interviews with religious leaders, chiefs, assistant chiefs, head teachers and parents, and focus groups with teachers at Akuno, Mareba, Ngango, and Lando primary schools (see Table 1 for additional information).

School Staffing and Physical Plant

All four schools have a head teacher, a deputy headteacher, and at least six other teachers employed by the Teachers Service Commission (TSC). The TSC recruits, hires, and posts teachers to all public institutions of learning in Kenya. Lando and Ngango have trained teachers hired and paid by the Parent Teacher Association (PTA) to ease the workload on the few teachers provided by the TSC. The Board of Management (BOM) proposes to parents during a PTA meeting to approve extra levies to be charged on parents whenever there is need to hire additional teachers. The extra levies are then used to pay salaries to these teachers. There are houses meant for teachers within the school but only a few teachers occupy those houses. Others

have opted to rent houses in the trading centers close to the schools while those from the community live in their homes.

Akuno is an integrated school with both boarding and day school facilities. The other three schools are day schools. Student population is highest in class one and lowest in class eight in all four schools. The disparity in student population between the lower and higher grades is indicative of high birthrates, students dropping out of school as they go through the higher grades, or students made to repeat classes. Repeating a class because a student did not qualify for promotion to the next grade was a common practice however, it is now against the law to make any student repeat a class.

All four schools are single streamed however, Mareba and Lando have double streams in class one and two. In a single stream class, all the pupils take lessons together in one classroom while a double stream class has pupils grouped into two and the two groups take lessons in two separate classrooms. Akuno, Mareba, and Lando primary schools have electricity and piped water. Ngango primary school relies on a natural spring close to the school for their water supply. The main source of energy in all the four schools is firewood, which is used for the preparation of meals for pupils with disability. None of the schools provide transport to pupils therefore pupils walk from home to school and back home. In case a student lives far away from the school it becomes the responsibility of the parents to arrange for transport. Parents select the school they want their child to attend. Some parents like to enroll their children into schools sponsored by the church they are affiliated to. However, most pupils attend the schools closest to their homes to avoid travelling long distances to school.

Most village schools are built with funds raised by the parent-teacher associations. The typical classroom unit, accepted by most development agencies and the Kenyan government, is 6

meters x 8 meters (20 feet x 30 feet). These dimensions guide the construction of classrooms funded by the community. Mareba, Akuno, Lando, and Ngango primary schools all have different physical structures as described below.

Akuno. All classrooms in the school are brick walled with steel windows and steel doors that open outwards as per the Ministry of Education requirements. The standard specification for classrooms is brick walls. The windows have steel frames and glass windowpanes. There are two classroom constructions at Akuno primary school funded by the government. When the government commits to finance the construction of classrooms then the specified standards are met. Akuno primary school received a grant from the Ministry of Education to construct two new classrooms because it is registered with the Ministry of Education as an integrated special school.

The building that serves as a dormitory for the thirty-nine pupils with disabilities is brick walled with wooden windows and doors. There are twenty double decker beds in the dormitory. The pupils also have wooden dressers to store personal effects such as soap, toothbrushes, shoe polish and brush, body lotion, and hairbrushes and combs. The windows have a wire mesh on the inside to keep away mosquitoes. Bathrooms and toilets are constructed about four meters away from the dormitory.

Mareba. Classrooms in Mareba primary school that were constructed by the Church Mission Society (CMS) are made from concrete blocks while the others constructed later after the school was taken over by the Ministry of Education are brick walled. Concrete blocks are made from a mixture of sand, cement, concrete, and water shaped into blocks and then sun dried. Doors to classrooms are steel while the door to the staffroom, headteacher, and deputy headteacher's offices are wooden with a steel grill on the outside. The windows have steel

frames and glass windowpanes. Mareba has one classroom construction funded by the government. The classrooms constructed by the CMS are very old but well maintained with repairs and paint.

Lando. Some of Lando's structures used as classrooms meet the standard specifications while others are incomplete and are used in their incomplete state. One classroom built with funds from the government meets the standard specification of brick walls, steel window frames, glass windowpanes, and a steel door that opens to the outside. This is the classroom occupied by class eight pupils. The classrooms occupied by class three, four, five, six, and seven pupils are also brick walled but have wooden windows and wooden doors. Class one, two, and three (collectively referred to as lower primary) are also brick walled but have gaping windows and doors. The desks used in the lower primary section are also different from the ones used by the rest of the pupils. The upper primary pupils have a chair and a lockable desk. The lower primary pupils use long benches attached to tables. The tables have an open space under them where pupils can store their extra books during the school day. Each benchlike desk is shared by three pupils.

Ngango. Ngango primary school has not benefitted from any government grants for construction of classrooms. Some of the structures used as classrooms are temporary structures that are built using local materials. Classrooms used by class eight, seven six, five, and four pupils have brick walls, with wooden windows and doors. Class one, two, and three pupils have mud walled classrooms. The window and door frames are made from iron sheets fitted onto wood. All these classrooms have been constructed by the funds raised by the PTA and fundraising (harambee) held in the school from time to time. Pupils in the upper primary have lockable desks while pupils in the lower primary use the benchlike desks.

Educational services provided to pupils with disabilities in the four schools are discussed under the topics: admission processes, modification of infrastructure and other physical facilities, integration, understaffing, and inadequate funding.

Admission Processes

The admission process has been simplified to accommodate students with disabilities in regular education schools. Parents of learners with disabilities can now enroll their children in the regular education schools if the disability is not profound and severe. A head teacher shared, "Their admission is just normal like any other pupil" even though the general education schools do not have special units for learners with disabilities. The students are integrated into the general education class per the Ministry of Education policy.

When parents go to the schools to seek admission for their school-aged children, some of them disclose the nature of their children's disabilities while others do not. A head teacher elaborated on the process some parents followed, "Parents come to school, describe the nature of their children's disabilities and we normally admit them." Yet, there are others who "don't tell us the kind of disability. We just find out on our own as teachers. It is not clear whether they are shy or just unaware of the challenges their children have." Two head teachers attributed this behavior to the shame and fear of being associated with disability or the possibility of being denied admission and referred to a special school.

Parents felt the head teachers were willing to accommodate their requests. Parents make requests to head teachers for accommodations and those requests are then forwarded to the teachers to implement. A parent described how the process works,

Just tell the teacher the nature of your child's disability. If the child is hard of hearing, you request the teacher to allocate a front seat, so the child will be able to

hear. In case the child has a physical disability, the teacher will not punish the child if the child is tardy because his physical disability might be the reason for tardiness.

Another parent provided insight into the admission process: "You take the child to school and tell the teacher the nature of her disability and ask if the child can learn. It is then up to the headteacher to admit the child or refuse." A parent explained they are not opposed to being referred to special schools but the way the message is conveyed makes a big difference. A parent whose child was denied admission into the general education primary school said, "Sometimes the headteacher might tell the parent the school is not for the disabled. They will say, 'Take your child to a school for the disabled.'" Head teachers explained that admission was dependent on the nature and severity of the disability. When they denied admission, they referred parents to special schools that could better accommodate those cases.

According to the teachers, parents did not necessarily know the procedure to follow when referred to a special school. In the words of one teacher, "Some are left at the mercy of fate but through the process of sensitization others have been placed in special schools." Sensitization is a process where headteachers, teachers, and local leaders attempt to make parents of school aged children with disabilities aware of the existence of special schools that offer educational services to learners with disabilities and the benefits of the parents enrolling their children in those schools. A parent whose child had been denied admission in a regular education school and referred to a special school described the process as,

Quite involving and challenging. The school near my home could not accept my daughter because she is a slow learner. It forced me to look for a special school where she was admitted and is now doing well in her academics.

To gain admission into special schools for students with profound and severe disabilities, families need either a letter of referral from the district personnel concerned with special needs education or a letter of introduction from the area chief.

Some school-aged children with severe disabilities have parents who are unwilling to take them to school or are unable to transport them to schools to seek admission. Those children with severe and profound disabilities who require assistive devices such as motorized scooters or wheelchairs and do not have access to these devices are not able to go to the schools. To alleviate this situation, head teachers send itinerant teachers to assess such children and convince the parents to allow the itinerant teachers to take them to the County Education Office for assessment and placement into special schools. A head teacher described the process: "If the disability is so severe that the child cannot come to school, we send itinerant teachers. They visit the homes to assess that child." Itinerant teachers are qualified schoolteachers with formal training in the education of children with disabilities, acquired through a residential course or a distance education program (e.g., a 3-year diploma in Special Educational Needs). These teachers travel around to local mainstream schools and communities offering advice, resources, and support to children with disabilities, their teachers, and parents. Itinerant teacher programs are partnerships between the Ministry of Education and non-governmental organizations.

Modification of Infrastructure and Other Physical Facilities

To meet the needs of pupils with disabilities in regular education settings, the Ministry of Education directed headteachers to modify infrastructure and other physical facilities. The head teachers reported modifying some school infrastructure to accommodate the needs of learners with disabilities. For example, ramps facilitated the movement of students in wheelchairs and those who used crutches. The head teacher of Akuno primary school reiterated, "Ramps have

been constructed as a directive from the Ministry of Education to accommodate pupils with physical disabilities and latrines are also constructed in such a way that they are accessible to learners with disabilities." The combination of modified physical infrastructure and provision of other physical facilities in some of the schools enhanced the enrollment of learners with disabilities to create a more conducive learning environment for them. Nonetheless, in all schools the classrooms are small and do not meet the Ministry of Education's specified standards. The playgrounds and footpaths within the schools were uneven.

During observations at the four schools, I noted some of these modifications on infrastructure and physical facilities. Ramps have been constructed where none existed before. Akuno and Ngango primary schools have wooden ramps. The explanation provided for the temporary nature of materials used was inadequate funding. Latrines at Akuno and Mareba primary schools were fitted with raised stools to suit the needs of learners with physical disabilities. Desks were modified based on the needs of each learner with disabilities. Some desks were made smaller than the standard desks. Chairs were fitted with writing boards for students who are unable to write on desks due to physical impairments. The headteacher of Ngango primary school stated that latrines and desks have not been modified at the school due to lack of funds. Pupils in the lower primary at Ngango use benches attached to tables since that is what the school can afford to provide for now. While some structural modifications have been made to accommodate learners with disabilities, as will be discussed later in this chapter, much more needs to be done.

Ngango, Mareba, and Lando had implemented feeding programs for learners with disabilities. Akuno Primary School has boarding facilities for pupils with disabilities therefore all meals are provided at the school for all pupils. A head teacher at Mareba Primary School

explained the rationale for the feeding programs: "We have a feeding program in place for students with disabilities. We serve them porridge at break time and maize and beans for lunch." The meals given to these learners relieved them from walking home and returning to school in the 45 minutes allocated for lunch break. An ancillary reason for feeding these students was that some of them came from poor families where the nutritional value of their meals was dubious. The school feeding program supplemented the little they got from home.

Integration

Special education is integrated into the general education schools as a Ministry of Education policy however, special schools still exist to cater to the needs of those learners who cannot be successfully integrated in the general education classrooms. It is recommended that those learners who cannot cope in the general education classes are taken to special schools where they can be better served. Strategies such as student motivation and accommodation, and parent sensitization have increased the enrolment of students with disabilities in general education settings. On the other hand, inadequate funding and shortage of trained teachers have affected integration.

Student motivation and accommodation. Teachers in these Ochwoga primary schools have devised various ways to motivate pupils with disabilities to participate in class activities. Students with disabilities integrated in Ochwoga's general education schools do not perform as well as their regular education peers. If no accommodations are made these students are likely to get discouraged and quit school. Some teachers have developed methods of accommodating these students in the class. One of them shared a motivational strategy,

When they bring their books for marking, do not just put a wrong because that discourages them. They are very happy when they see that tick, even if it is nothing

good, they have written. But that tick motivates them so give even one tick and sign and write the date. Then the learner feels motivated and she comes to school every day. Teachers give the ticks to learners with disabilities to show they have tried and should continue trying. The tick does not signify the answer given by the student is right. Instead, the tick serves as motivation to keep trying.

Another way the teachers motivate the students is by giving them responsibility. When students are assigned a responsibility in the class, they feel good and want to do their best. One teacher participant stated, "We say, 'Today we appoint you the class monitor. You are the one to take the books to the office' and they perform well." Some teachers also recognize effort by these learners with disabilities. The teachers rate them at their own performance level without comparing them to their peers in the general education class. One teacher with a cognitively impaired learner in her class said, "When asked to read she tries to read, even though she does not know how to read. But her attention is captured. And when instructed to write, she writes something that can earn her a tick in math." This recognition of effort made learners with disabilities feel they were making progress and they put in even more effort.

Other learners received individualized attention when the teachers realized they were lagging because of their learning disabilities. During class activities, some of them scored poorly and the teachers took time to review their work repeatedly to help them learn more than they would have if left on their own. A teacher who had one student with a learning disability suggested, "Identify the individual learner's area of weakness and give what you are supposed to give to her even if it means repeating what you did in your lesson." Teachers commonly used this strategy to accommodate learners with disabilities in the general education classes.

Parent sensitization. Sensitization involves educating parents to make them see sense in supporting the education of their children with disabilities. The teachers in the three Ochwoga general primary day schools went out of their way to convince parents of school-aged children with disabilities to enroll them in school. One teacher stated, "Once we know there is a child somewhere, we talk to the parents to bring the child in to start school." Most teachers believe parents failed to enroll their children with disabilities because they thought their children could not do well in school. A teacher informed me, "The community believes these children are incapacitated and not fit" to learn, a view consistent with community values and beliefs about persons with disabilities. The teachers viewed these parental behaviors harshly. Because of these ignorant beliefs one said, "Parents leave them home while other parents do not care about these [educational] necessities." Given the prevailing situation, the headteachers allowed these children to come in anyway with the hope "the parents will develop interest later and provide the requirements," as one headteacher put it. Once these children were in school, the teachers followed up to monitor their progress. A teacher described this process as, "We monitor her progress in the school. Is she coming regularly and if not, then why?" Parents of children with disabilities acknowledged the teachers went the extra mile to ensure that learners attended school regularly. One parent explained, "The teachers always follow up with me as a parent and I, in turn, ensure that my child goes to school every day." One teacher said she "uses her motherly instincts" to support the children with disabilities in her class. This teacher did what she would do if her own child were in a similar situation.

Shortage of trained special education teachers. Teachers trained to teach pupils with disabilities are in short supply and in some cases totally lacking in the three Ochwoga general primary day schools. Akuno primary school has three teachers trained to teach special needs

education and is therefore slightly better off than the other three schools in terms of special education staffing. Teachers in Ngango, Mareba, and Lando schools stressed the need for teachers specially trained and qualified to teach students with disabilities. A teacher pointed out, “If only we had a special education unit with a trained teacher to deal with special needs education only and the teaching/learning facilities available then that could help.” Yet another teacher said, “The government should provide teachers specialized in different areas of special needs education and help implement the special needs program within the school.” The learners with disabilities are already enrolled in the schools with no program for special needs education in place.

Teachers articulated that integration is not beneficial to learners with cognitive disabilities especially when the teachers are not trained to handle them. According to these teachers, learners with cognitive disabilities attend school with their nondisabled peers but do not seem to learn and progress to secondary schools like their nondisabled peers. A teacher suggested that learners with cognitive disabilities should be enrolled in special schools if they are to get any valuable education in the schools. In the teacher’s experience with learners with cognitive disabilities, they are made to attend classes and promoted to the next class until they get to class 8 but they are not registered for the Kenya Certificate of Primary Education (KCPE) examination. At the end of it all they are not able to proceed to secondary school because they do not have any KCPE results to get admission. This teacher shared a story about a girl with cognitive disabilities who had repeated class 8 three times,

She wants to come to school because at home there is nothing she is doing; the school is not helping her to gain anything which can help her in future. Had she been taken to a

special school she could have been taught something good which can help her in the future.

As much as integration is recommended for the benefit of learners with disabilities, teachers still believed some severe and profound cases need to be enrolled in special schools where their specific needs can better be served. Most of the teachers in the three Ochwoga general primary day schools are not trained to handle special needs learners and therefore have a hard time incorporating them in curricular and co-curricular activities.

Parents were also of the view that their children were not benefitting from the regular education schools they were enrolled in. One parent observed,

I have realized that my child is not gaining any education in this school because he is of very low standard. He is in class 6 at 14 years. Obviously, he is not supposed to be in that class. He should have been in form one but because of his disability he is still here. He has got challenges because he is bigger than the other learners and sometimes beats them. Sometimes he absents himself from school. He doesn't want to come to school because it is as if he has realized that there is nothing he is gaining from school.

Another parent also pointed out that her daughter with a cognitive disability was not progressing as expected in her regular education class. This parent pointed out that she was not able to monitor her daughter to make sure that the girl attended school regularly. Her daughter would be released from home to go to school but would instead go elsewhere to play. This parent believed her child would benefit more at a boarding special school where the teachers could monitor her more closely. The parent lamented, "Sometimes she does not go to school; instead she goes to play. If I can get a boarding school where she can be monitored better, I can visit her and ensure that she is comfortable in school." Most parents are overwhelmed by the deviant behaviors of

their children with disabilities because they lack the skills to address them. Such parents depend on teachers to train their children to acquire replacement behaviors that are acceptable. Yet, the teachers are not trained in special needs education. A head teacher shared, “You know that some teachers are not aware that these are learners with disabilities. They refer to them as children who cannot make it in education.” These learners with disabilities are placed in schools that do not seem to cater to their learning needs.

Understaffing

Ngango, Mareba, and Lando general primary day schools do not have enough teachers to teach the regular education pupils, much less cater to the needs of students with disabilities. The recommended teacher/student ratio per the Ministry of Education is 1 teacher to 40 pupils. Because of the availability of free primary education, enrollment in all schools has increased. A headteacher informed me, “Enrollment in public schools increased immensely after the introduction of free primary education. The largest number in a class in our school is sixty-five pupils. Most classes have fifty pupils and above.” The number of teachers has not increased proportionate to the increase in pupil enrollment. This translates to a high teacher/student ratio.

Understaffing results in teachers not being able to take time to cater to the needs of learners with disabilities. In some cases, teachers trained to teach learners with disabilities are assigned other duties not related to their teaching requirements. A teacher of special education shared, “I was to teach from 08:00 a.m. to 12:00 noon, release the learners with special needs, and then make home visits to learners with disabilities. I was assigned regular education lessons in the afternoon and the syllabus had to be covered.” Head teachers and teachers interviewed concurred that almost all schools lacked enough teachers, for both general and special education.

Per the headteachers, it is a big problem having learners with special needs in schools with large class sizes and no resources for teaching and learning. The government's policy does not state clearly how these learners with disabilities are to be integrated in the general education schools. A head teacher shared, "The Ministry of Education should have a plan for identifying these learners, absorbing them in the local primary schools, and monitoring how they progress in those schools otherwise they should have special schools for them." The learners are already within the schools yet the headteachers and teacher do not have any structures or guidance from the Ministry of Education on how to integrate them into the schools.

Inadequate Funding

The Ministry of Education sends funds known as The Special Education Capitation to schools to finance the needs of pupils with disabilities. The Special Education Capitation is sent to a school and should be accounted for under the following vote heads: Tuition, Overhead Costs, Activity, Transport, Textbooks, Stationery and Supplies. According to the head teachers interviewed, only a few schools were selected by the Ministry of Education to cater to the needs of learners with disabilities. Out of the four schools Mareba, Lando, Ngango, and Akuno primary schools, only Mareba and Akuno primary schools were selected as integrated schools to receive additional funding. The headteacher of Mareba primary school specified, "Only a selected few schools were registered as special education schools by the Ministry of Education, but students with disabilities are everywhere." Schools designated by the Ministry of Education as integrated schools like Mareba and Akuno are the only ones that receive the capitation for special education and are staffed with teachers trained in special needs education, yet there are learners with disabilities in all schools. The special education capitation is an additional Kenya shilling (K. Shs.) 2000 over the K. Shs. 1050 that is paid for each regular education student in every primary

school. Lack of funding has also resulted in inappropriate school facilities and infrastructure and inadequate teaching and learning resources for students with disabilities.

Regular education schools like Lando and Ngango primary schools that admit students with disabilities can register with the Ministry of Education as integrated schools. Such schools benefit from the grants other special schools routinely receive. The head teacher of Ngango Primary School who had initiated this registration process shared, "Last term I registered the school with the Ministry so that students with disabilities can get assistance from grants which other schools get but the school has not received any funds yet." The grant can be used to purchase special needs teaching and learning resources and other necessary items such as eyeglasses, orthopedic shoes, hearing aids, special desks, and crutches.

School facilities and infrastructure. There is a big difference among infrastructural facilities existing in the four schools studied. While Akuno and Mareba have been able to modify and improve the existing school facilities, Ngango and Lando primary schools still have a long way to go. These two schools have poorly constructed classrooms and playgrounds, insufficient and broken-down toilet facilities, gender insensitive location of toilet and bathroom facilities, and inadequate and inappropriate desks and other furniture. The infrastructure existing in these two schools is not friendly to learners with disabilities especially those with physical and visual impairments.

Although the Ministry of Education has directed schools to modify the infrastructure to be user friendly to learners with disabilities, only those schools that receive special education capitation, such as Mareba and Akuno, have been able to make modifications. Even where the government has funded the construction of classrooms, only two or three classrooms have been constructed to the government specified standards. Due to the high enrollment of pupils realized

after the introduction of free primary education the classrooms are congested and the pathways in between desks is narrow. The congestion inhibits movement of pupils with disabilities within the classrooms. The rest of the schools have not been able to do the same because of lack of funds. The headteacher of Ngango primary, a school that has students with disabilities but does not receive special education capitation, stressed the need to disburse the special education capitation to all schools that have learners with disabilities. One headteacher argued that the Ministry of Education has directed headteachers to admit learners with disabilities in all schools because they are supposed to be integrated with their nondisabled peers, thus all schools should get the special education capitation. Parents are also aware that primary education is free and compulsory for all children whether disabled or not. Another head teacher shared, “Before there were special schools for the disabled but these days special education is integrated in all schools and therefore for these children to benefit, special education funds should be distributed to all schools.” Headteachers are left with no other option than to admit learners with disabilities without appropriate physical structures to facilitate their movement within the schools.

Inadequate teaching and learning resources. Most schools in Ochwoga, including Akuno, Mareba, Ngango, and Lando, have insufficient teaching and learning resources for learners with disabilities. Teaching resources such as modified curriculum, timetable, and other instructional materials are either in short supply or completely lacking. Learners with disabilities enrolled in these schools are taught using the regular education curriculum, timetable, and instructional materials. Learning resources like clay, plasticine, clocks, paint, paint brushes, manipulatives, and play materials are not available to the learners. The students also lack other assistive devices such as wheelchairs for those with physical disabilities, communication devices for the nonverbal, and white canes for the visually impaired.

Observations conducted in each of the schools indicated that pupils with disabilities had no modified schedules. The pupils attended classes with their regular education peers using the regular education schedules. They were taught using the regular education curriculum because there was no modified curriculum for special education. On inquiry, teachers reiterated, “The Ministry of Education has not provided a modified curriculum to schools and none of us is a trained special education teacher, so we do not know who to ask for these provisions.” The pupils with disability are taught, tested, and graded the same way their regular education peers are taught, tested, and graded.

Experiences of Students with Disabilities in Ochwoga Schools

The experiences of students with disabilities in Akuno, Mareba, Lando, and Ngango schools vary depending on which school they are enrolled in. Students with disabilities are protected from child abuse because members of the community think they cannot perform any tasks. Attitudes of villagers also are the same reason students with disabilities enroll in schools in their late years, suffer low self-esteem, and are labelled with names and nicknames. The experiences of pupils with disabilities are presented below under the subheadings: child abuse, delayed enrollment into school, low self-esteem, and labels.

Child Abuse

Under the Children’s Act 2001, it is a crime to subject any child to any form of abuse such as early marriage, female genital mutilation, caning, child labor, or discrimination (The Government of Kenya, 2010). The community does not perform female genital mutilation or consider children with disabilities suitable for marriage or labor, therefore for that reason they are safe from any of those forms of child abuse. Caning is a form of corporal punishment where the offender is hit with a cane on the bottom, legs, or hands. I noted signs of corporal

punishment in all schools I visited. I saw teachers walking around with canes in their hands and some staffrooms had canes on teachers' desks or under tables. However, I did not witness corporal punishment being administered. In theory, corporal punishment is outlawed in schools but in practice it is still a common form of punishment. A parent lamented, "If my child was not disabled, I would cane her to stop soiling her pants, but I cannot do that because I know that she is cognitively impaired." Parents believe in the phrase "spare the rod, spoil the child." This is a proverb taken from the bible which implies if a parent refuses to discipline an unruly child, that child will grow accustomed to getting his own way (Proverbs 23:13-14).

Delayed Enrollment into School

Ochwoga village children with disabilities start school later than their nondisabled peers. According to the village chief, some parents of disabled children do not know the procedures to follow to get their children enrolled in school. The chief said, "These parents do not know what to do with their children with disabilities. Some are not even aware that special schools exist and the ones that are aware do not know how to secure chances for their children." Instead of sending them to school, many parents leave their children with disabilities in the homes to play. Their children with disabilities are also not assigned any tasks to perform because these parents believe they are incapable of doing anything constructive. Others were concerned about their children being ridiculed or treated badly at school. A parent to a child with disabilities clarified, "I took my child to school when he was older than the other children because I feared that my child will be bullied and ridiculed. He is now old enough to defend himself." Some parents believe that children with disabilities are helpless away from home, should not be away from their parents, and thus refuse to enroll them in school. Headteachers and teachers also pointed out that children with disabilities are taken to school in their late years when they are much older

than their classmates. A teacher reiterated, “Parents of children with disabilities normally bring their children to school when they are much older than their classmates. They come to school when they are ten or older.” In some cases, it takes the intervention of headteachers, teachers, or local leaders to get parents to enroll these children in schools. In a few instances, legal action has been instituted to compel parents to enroll school aged children with disabilities in schools. An assistant chief stated, “When I get information that a school aged child is not in school, I advise the parents of such a child to take the child to school. If they do not take my advice, I take legal action against the parents.” All children have a right to education in Kenya and village leaders will take the necessary steps to ensure children with disabilities attend school.

Low Self-esteem

Learners with disabilities in Ochwoga village exhibit low self-esteem when around their nondisabled peers. A teacher stated, “Pupils with disabilities in my class do not mix with peers, or even join in class activities like singing, dancing, and clapping. It takes a lot of effort to get them to attempt class assignments.” It is not clear whether this feeling emanates from the treatment they get from their peers or how they are socialized in their homes. They avoid mixing with their nondisabled peers when they are in class. They are usually reluctant to do class assignments. Another teacher shared, “Students with disabilities in my class have very fragile emotions. They get easily upset, act out when they do not have their way, and sulk, withdraw, and walk away from class activities.” The village has treated them as outcasts, and they have learned to get through life by not participating in activities. The community believes these children with disabilities are incapacitated, and unfit. This has in turn rubbed off on the learners with disabilities themselves and therefore they do not want to participate in activities with others. In the words of another teacher, “They feel like they are special, which of course they are not.

They are special yes but whenever they are doing activities with others, they should just do it.”

The unwillingness of learners with disabilities to participate in activities with their peers is interpreted by some teachers as learned helplessness. Learned helplessness is a condition in which a person suffers from a sense of powerlessness, arising from a traumatic event or persistent failure.

Other teachers think that most teachers are always in a hurry to cover the lesson objectives hence do not allow adequate time for these learners with disabilities to complete the assigned tasks. One teacher shared, “These children should be given enough time to execute the tasks or activities assigned to them. We should be patient with them so that they will be at par with others since they have problems.” The teachers pointed out that when these learners with disabilities are given opportunities to participate, some of them exhibit talents in various fields such as singing, playing musical instruments, and leadership.

Labels

Disabled persons in Ochwoga are labelled with names that correlate to the kind of disability they have; some of which are the true names of those disabilities in the Luo dialect while others are created to ridicule disabled persons. The chief pointed out that the names used to refer to persons with disability are not unique to Ochwoga village but sound negative in the Luo dialect “because that is just how our language refers to them. I can say generally our language doesn't refer to them well.” The nicknames created are metaphorical and, in some cases, liken disabled persons to faulty electrical devices. For instance, a cognitively impaired person is likened to a mobile telephone that loses network signals from time to time. A head teacher shared, “They describe them as ‘this one has lost all network signals. This one is not picking at all’ especially pupils in the lower section.” In the community, disabled persons are identified by

their disabilities. For instance, a physically impaired person might be described as “the cripple” in place of his or her name. A religious leader shared, “These people have names and yet they are described as ‘that cripple who sells shoes’ or ‘That tailor who has a hunchback’ while nondisabled people are referred to by their names.” A document collected from one of the schools had the pupils listed with their disabilities. The pupils were identified in the class lists by their type of disability, which became how they were labeled and viewed; that is, as a disability rather than a person. These labels exist in the community, schools, and among local leaders.

These labels do not exist in some schools where the teachers have eliminated these nicknames and all pupils whether disabled or not are referred to by their official names. The head teacher of Akuno Primary school reiterated, “Here at school we don't allow those funny names. We have talked to all pupils to use their official names.” The labels do not exist in schools where efforts have been made to eliminate them.

Parents of Students with Disabilities

Overall, parents of learners with disabilities take their responsibilities seriously although a few were viewed as negligent and acted out of ignorance while others were afraid, ashamed, or embarrassed to be associated to children with disabilities. A headteacher said the parents who supported their children, "Really support their disabled children just like their nondisabled children. They buy school uniforms, pay their levies, and accompany their children to school every day to be sure they make it to school." These parents "take their children to hospital when they are sick, prepare food and feed them, toilet train them, and teach them life skills like washing their clothes." The head teacher of Akuno Primary School described the parents of learners with disabilities in the school as "very supportive" while another teacher at Mareba Primary School reported "parents of pupils with disabilities attend meetings whenever they are

convened." Mareba and Akuno are integrated schools with twenty-two and thirty-nine pupils with disabilities respectively. A parent of a learner with disabilities emphasized, "I usually arrive earlier than most parents for meetings." Such parents realize that to a large degree, the performance of their parental responsibilities determines the progress of their children in school.

Supportive parents ensured their children got to and from school safely and on time. A parent of a child with disabilities listed what she does for her child: "I prepare her for school and make sure she comes to school on time. When she gets back from school I feed and talk to her." Another parent described his role as follows,

My role as a parent is to encourage my child and help her accept her disability. I advise her to go to school and compete favorably with her peers and I use examples of other disabled persons who hold good jobs and earn a decent living.

The roles described by most parents revolved around assisting their children with disabilities perform activities of daily living and supporting them in their quest for education.

Parents served as counsellors to their children even though some admitted not knowing how to handle some of the problems their children were going through. One such parent confessed, "I try as much as possible to deal with my children equally but because of my daughter's disability, there are times when I am not able to deal with her challenges effectively because I am not trained." When discussing the roles of parents, a religious leader concurred, "A parent to a disabled child is a counsellor, continuously counselling the child so she will not be troubled when others walk, talk, hear, and see normally, especially if one of those might be the child's disability." Community leaders also pointed out "Parents of students with disabilities always ensure their children attend school every day, advise them to do assignments from school,

and follow school rules and regulations." Parents of pupils with disabilities did their best to counsel their children even with the little knowledge they had regarding education.

Teachers described the role of parents as, "Huge and heavy because a child with a disability has more needs than a non-disabled child." This was true even though other teachers opined that some parents are negligent of their responsibilities because of ignorance. One teacher informed me, "Some do not understand their role. When we come across such a parent, we intervene and advise him on the importance of educating a child who is disabled." Such parents shy away from parents' meetings and do not report to the schools even when invited to discuss matters related to their children's education. A head teacher narrated an experience with a parent:

Sometime back, we invited a parent to come to school because we identified that her child had some challenges. I sent a boy from near her home to [tell her], but to date, the parent has not come. I sent a parent to invite this same parent to come in for a discussion, but to date, she has not come.

The problem is that many parents do not want to associate with these children. Such parents are afraid the teachers have reached the conclusion their child is uneducable or are ashamed to be associated with a disabled child.

Some parents only identify with the disabled children if they expect a financial benefit to come their way. As one participant explained, "They register them in programs that promise to give money to the disabled very fast but then do not use the money on the disabled children." Their association with their disabled children is dependent on financial gain and once achieved, they sideline them again. Parents such as these were said to love and pay attention to their nondisabled children more than their disabled children. An assistant chief noted it would benefit these families more if they gave priority to the disabled children. He commented, "If a disabled

child is sidelined and loved less than non-disabled siblings, the disabled one will be tortured mentally and feel like he is orphaned." The assistant chief suggested it was best to give the disabled child priority in everything to make that child feel loved and accepted in the family.

The Role of Religious Leaders in the Education of Students with Disabilities

The four schools the participants are associated with are affiliated with Christian churches and sponsored by the Anglican church of Kenya (ACK), Catholic Church, Seventh Day Adventist (SDA) Church, and New Apostolic Church. Cocurricular activities that were previously held on the weekends have had to be moved to school days because the SDAs observe sabbath on Saturday while the other denominations observe sabbath on Sundays. Pastors and Vicars visit the schools to conduct pastoral studies with pupils on Wednesdays in some schools and Fridays in others.

Religious leaders support school-aged children with disabilities by fundraising to finance their education, soliciting bursaries from the Members of the County Assemblies (MCAs), counselling pupils with disabilities and their parents, and offering prayers to pupils and their parents to grow them spiritually. A religious leader shared, "We fundraise to assist them so that even if the head teacher demands school fees and whatever else these families can pay for it with the donations from the church." Religious leaders have traditionally raised money in the churches and donated to children to finance their education. To supplement the monies raised in the church, religious leaders also solicited bursaries from the MCAs on behalf of pupils with disabilities. These bursaries are sent to the schools where the pupils with disabilities are enrolled. One religious leader explained, "We take the matters seriously because we don't want the child who is disabled to be left on their own. We contact the MCAs to get bursaries for these children

to go to school." These church activities are organized each time issues relating to pupils with disabilities come to the attention of religious leaders.

Counselling was another role played by religious leaders to support school-aged children with disabilities. Religious leaders counselled the parents and then advised the parents to counsel their children. A religious leader stated,

We counsel the parents to counsel their children and encourage them to continue with their schooling because education will guarantee a comfortable life for them.

If they don't go to school, they will have no future.

According to religious leaders, counselling was a major function of parents. Overburdened by the high costs of educating their children with disabilities or influenced by the cultural beliefs and views of the community towards their children, many parents were unlikely to perform this function well enough to benefit their children. In recognition of these circumstances, the church prioritized making room for counselling sessions to empower and encourage parents to counsel their children.

Prayers were also offered to school-aged children with disabilities and their parents. Guided by biblical teachings, religious leaders tended to be more accepting of persons with disabilities. According to one religious leader,

We pray for the victim such that he or she can grow spiritually. To the community they may be different but to us as church leaders, we treat everybody the same. We are guided by the bible teachings that we are all children of God and equal before God.

The religious leaders reported the church treats persons with disabilities just like everybody else. Whenever issues relating to persons with disabilities were raised in the church, these issues received attention of the church congregation.

The Role of Local Leaders in the Education of Students with Disabilities

Local community leaders are chiefs, assistant chiefs, and clan elders. A chief explained these leaders made efforts to ensure that all children born in the homes were registered and that during registration they established whether these children were born with or without disabilities. The chief said, "We have village elders and we always want to know from them the number of children born in the area and whether they are born with disabilities or not." The chiefs issued birth notifications to parents to register their children born either in the home or at traditional birth attendants' homes with the district registrar's office.

Registration was important because it enabled chiefs to determine the number of children in the community with disabilities. When the children attained school going age, the chiefs advised parents to take them to school. A local leader described how this system worked, "This way we know how many are born with disabilities. When they reach school-going age, we invite their parents in and tell them these children should be taken to school." The local leaders advised parents on the procedure they needed to follow to get the children admitted into schools. If the children qualified for admittance into the regular education schools, the leaders let the head teachers know they referred some parents to them, and they should expect the parents to approach them for admission. If the children needed to attend special schools, the leaders wrote letters of introduction and gave these letters to the parents. A head teacher noted,

They identify children with disabilities living in the home and whether they go to school or not. This is the responsibility of those chiefs, sub chiefs, and village elders. They have information about the children in homes including the ones with disabilities and are therefore best placed to encourage the parents to allow the children to go to school.

The identification by local leaders of school-aged children kept in the homes has helped a great deal to ensure school enrollment of children with disabilities.

Local leaders advise parents on the need to take school-aged children with disabilities to school but in cases where a parent did not heed this advice, local leaders initiated legal action against the parents. All children, whether disabled or not, have a right to a free primary and secondary education as enshrined in the constitution and the laws of Kenya. A local leader informed me that parents choosing to hide disabled children in the homes even after the leaders advised them on what to do were liable to "legal action because disabled children now have a constitutional and legal right to education." Local leaders ensured children were enrolled in school to receive a formal education from the people best qualified to assist them in their education. According to local leaders, parents kept children with disabilities in the home because they had no idea what to do with them. Many parents thought these children were unable to achieve much in schools and would never become independent.

Sensitization of the community on the need to educate school-aged children with disabilities was another role played by local leaders. Community beliefs and views of persons with disabilities influenced the way parents treated their children with disabilities. Some hid their children in the home to keep them away from public view because they were ashamed and embarrassed to be associated with disability. Local leaders implemented programs targeted at community members to change their perceptions of disability. Parents also received counselling in such programs. One local leader shared, "There are programs where these parents are counselled not to seclude these children from others. We tell them these children should lead a normal life because it is not their own wish they are disabled." The programs instruct parents about the dangers of secluding children with disabilities. Other local leaders use forums such as

funerals and chief's baraza (public meetings) to sensitize the community on issues relating to disability.

Local leaders also advocated for the construction of special schools and units in the local area to enroll more learners with disabilities. The long distances travelled to look for admission in special schools that were far away discouraged some parents from seeking admission for their children. A head teacher shared, "Community leaders ensure there are special schools and units staffed with teachers who are qualified to handle pupils with disabilities." These leaders also gave priority to learners with disabilities when they distributed bursary funds. One leader told me, "The government sends funds for persons with disabilities and when we issue bursaries, we allocate more funds to learners with disabilities." The funds for development from the government are channeled through the local administration as well as funds for disability programs.

Additionally, local leaders received a lot of useful information they conveyed to the parties concerned. For instance, there were mobile clinics that provided resources and services to persons with disabilities. When such clinics are scheduled to take place in the area, the local leaders communicate this information to the relevant persons. One parent of a child with disability shared, "Sometimes local leaders walk around telling parents when there is a clinic around for people with disabilities." This also applied to pre- and postnatal clinics. Local leaders advised expectant mothers to attend clinics before and after delivery to get medical care that could reduce or eliminate the chances of disabilities arising out of childbirth complications. Postnatal clinics ensured that children received all available immunizations to protect them from diseases that could lead to disabilities.

Despite all the supportive programs and legal protections outlined above, some participants opined that local leaders have not done enough to assist persons with disabilities. A head teacher told me that some local leaders only took an interest in persons with disabilities when given directives by their superiors to perform a task and submit a report. This head teacher said, "If they are instructed by the District Commissioner to establish the number of learners with disabilities, then they come to school to get the names." This head teacher stressed that local leaders do that as a routine part of their job and only because they are required to give a report to the district commissioner. Similarly, a religious leader emphasized that local leaders are good at making promises but not following through on delivering those promises. This religious leader said, "The local leaders just make false promises, but they do not do anything." On the same note, a parent to a child with a disability informed me, "Not much has been done by community leaders. Last term they told me there was a program for persons with disabilities but so far nothing has been done." These participants were convinced that community leaders say more but do less. Other participants informed me that even though many local leaders were committed to identifying children with disabilities hidden in the homes and advising parents to enroll them to school, a small but undetermined number of local leaders hypocritically hid their own disabled children in the home. According to a head teacher, "If a clan elder is keeping a grandchild in the home, what do you expect them to do about other children with disabilities?" Such a leader would be a weak advocate for advising parents with disabled children in the homes to take those children to school.

The purpose of this study was to examine the influence of culture on the education of individuals with disabilities. The community's understanding of disability has led to discrimination, and segregation of persons with disabilities in schools, community activities, and

social life such as marriage. Participants reported that government policies and legal legislations have improved efforts to provide services to pupils with disabilities in the community and school settings. Parents of learners with disabilities were found to be supportive of their children although a few were negligent and acted out of ignorance. Some parents are not even aware that special schools exist and the ones that are aware do not know how to secure chances for their children. Religious leaders stated that they support school-aged children with disabilities by fundraising to finance their education, soliciting bursaries from the Members of the County Assemblies (MCAs), counselling pupils with disabilities and their parents, and offering prayers to pupils and their parents to grow them spiritually. Local leaders reported they established the number of children born with disabilities through registration of births, sensitized and advised parents on the need and procedures to follow to enroll their disabled children to school. The local leaders instituted legal action where necessary to compel parents with disabled children to enroll them in schools.

Chapter 5

Conclusions and Implications

The purpose of this study was to examine the influence of culture on the education of individuals with disabilities. Using Whyte and Ingstad (1995) theory of culture and disability, I focused on the perceptions of religious leaders, chiefs, assistant chiefs, parents of students with disabilities, head teachers, and teachers of students with disabilities to examine the influence of culture on the education of pupils with disabilities. Findings indicate that the cultural understanding of disability in Ochwoga village has led to discrimination and segregation of persons with disabilities in schools, community activities, and social life such as marriage. However, government policies, legal legislations, and advocacy by headteachers, teachers and parents of pupils with disabilities have improved efforts to provide services to pupils with disabilities in the community and school settings. Conclusions highlight negative attitudes towards disability, the prominence of labels and stigma in Ochwoga Village, challenges in the implementation of an all-inclusive education policy, and disabled persons viewed as having flawed personhoods and bodies. Implications propose creating attitudinal change towards disability, implementation of an all-inclusive education policy, and ensuring a transition of persons with disability to higher education and employment.

Negative Attitudes Towards Disability Persist in Ochwoga Village

The cultural understanding of disability determines the position or status that individuals with disabilities are given in a specific society. The culture and disability theory states that disability is defined by society and the culture of that society assigns meaning to it (Benedicte & Lisbet, 2007). The culture of that society decides what it means to be disabled, what is wrong and what is right and how one should feel about their disability. The social relations of a

community culture influence the ways in which disability is defined. In Ochwoga village just like other communities in Kenya, disability is associated with functional impairment. Beliefs about persons with disabilities are tied up with community cultural myths and such persons are viewed as having little to no value. They are not really seen as persons. The assumed functional impairments limit the opportunities availed to persons with disabilities to participate in social events and activities in the community to the same degree as the nondisabled individuals. The meaning and significance of disability is defined by the treatment of the person with disability by the community in which he or she lives which in turn, is dependent on how the community views the individuals with disabilities. Although the national policy in place gives equal rights to persons with disabilities, there is little direction on how to implement the policy and limited funding to support local efforts (Bii & Taylor, 2013).

Religious leaders have a huge influence on the way the community views persons with disabilities. Religious leaders accept persons with disabilities and counsel couples dealing with disability issues in their families. Nondisabled persons married to disabled seek refuge in the church when their spouses are rejected by their families. Religious leaders support the education of pupils with disabilities financially and through counselling and prayers. The traditional, contemporary biblical and theological views on disability had a bearing on the way in which society responded to the presence of people with disabilities (PWD) in Kenya (Otieno, 2009), and how they impinged on their human rights but that is no longer the case. Previously, disability denoted sin, lack of faith, or punishment for wrongdoing but today the church views persons with disabilities as God's creations. Religion can and has played a significant role in changing the perception of the community towards persons with disabilities. The community views persons with disability as having no value, evil, born of cursed parents, and are outcasts

that should be segregated while the church advocates for the inclusion of persons with disabilities in all activities. For attitudinal change towards disability to be realized faster the churches need to take a stronger stand against the cultural beliefs and taboos that currently exist in the community.

The chief talked about affirmative action law that requires nomination of persons with disabilities in committees of all kinds in the community but there was no mention of positions in the community currently held by persons with disability. There was no demonstration that the legislations are implemented as stated in the constitution. The community members are aware of what this law states but there was no evidence that the law is observed. Headteachers, teachers, religious leaders, and parents expressed that some chiefs make a lot of promises and do little to follow through on their statements. Again, Kenyan national legislation supports this view of persons with disabilities having rights (The Government of Kenya, 2010), but some village leaders and community members go against this position because of cultural norms. National legislation should be diligently implemented and supported by all and not just lip service from local leaders to look good and compliant before the public.

The chief, teachers, and some headteachers alleged that the chiefs establish through village elders the pupils with disabilities who are hidden in the homes and not going to school and advice their parents on how to get these children enrolled in schools. There was no evidence to support that the chiefs are actively identifying children with disabilities hidden in the community. If anything, some headteachers reported that chiefs only come to schools when invited to meetings or when they need information from schools to relay to their superiors. The chiefs also stated that they institute legal action against parents who refuse to heed their advice

concerning enrolment of pupils with disabilities in school. However, there are no reports of cases instituted against any parent in the law courts.

In Ochwoga village children with disabilities are not assigned any tasks to perform because of the belief that they cannot work. It is therefore assumed that one form of disability affects all their abilities. Disability implies inability. A defect in one area is assumed to affect the functioning of all their faculties. The children with disabilities are treated as though they are a burden to the community and cannot contribute in any way to the community. Since they do not work, they are provided for only after their nondisabled siblings have been adequately provided for and they also get only the bare minimum such as hand me down, tattered clothes. The theory of culture and disability describes the concept of spreading as the tendency of people to assume that a person with one form of disability naturally has other forms of disabilities that are not related in any way (Whyte & Ingstad, 1995). In another example of spreading, disabled persons in Ochwoga are considered unsuitable marriage partners, and this extends to other family members who are not disabled. There are certain kinds of disability that are genetic and therefore hereditary but there are many others that are not hereditary. The community in Ochwoga lumps all kinds of disabilities into one marked group – disabled - and therefore unsuitable marriage partners. In Ochwoga village, persons with disabilities are labeled and stigmatized and viewed as having flawed personhoods and bodies because of negative cultural beliefs and attitudes towards persons with disabilities.

Narratives explaining the presence of disabilities have been passed down by the old to the younger generations but some of these explanations do not have anything to do with disabilities. Some of the explanations revolve around curses, punishments for evil past deeds by forefathers, retribution of the gods, and certain lineages giving birth to children with disabilities. The

possible causes of disabilities that have been scientifically determined are not available to members of Ochwoga village. Culturally, it is the norm to seek information from elders in Ochwoga village and therefore limited access to knowledge maybe a contributing factor to the attitudes and beliefs about persons with disabilities (Bunning, Gona, Newton, & Hartley, 2017).

Labels and Stigma were Prominent in Ochwoga Village

According to the theory of culture and disability, the social identity of the person in monocultural societies is based on family, clan, and other physiognomies and not on disability (Engel, 1991). However, in Ochwoga village, which is a monocultural community, disabled persons are identified by their disabilities except in Akuno primary school where all pupils are referred to by their official names. In Akuno primary, where effort has been made to eliminate labels, persons with disabilities are not discriminated or isolated. These labels are created by members of the community and not by the persons with disabilities themselves. It has been argued that labels are not entirely bad because they can help a pupil receive financial support, professional services, or enter a special needs program (Browder & Spooner, 2011), but nicknames created to ridicule an individual can lead to stereotyping, discrimination, and segregation of individuals with disabilities. Labels are only useful when leaders and educators need to identify the kind of professional and educational services each pupil requires to be successful. The collective effort of community leaders, headteachers, and teachers can eliminate labels used negatively.

The labels in Ochwoga village seem to have influenced the behavior of pupils with disabilities. The teachers reported that students with disabilities exhibit low self-esteem, have very fragile emotions, act out when they do not have their way, and are usually reluctant to participate in class activities. Labels affect how individuals think and perceive of themselves, set

boundaries on what they can accomplish, and influence how others perceive them (Riddell & Watson, 2003, 2014).

The values held by the larger society ultimately define how an impaired person feels about him or herself and his or her impairment. There is no middle ground. The impaired person is either stigmatized or fully integrated into the daily activities of the given society. Cultures that stigmatize impaired individuals create an environment that nurtures a preoccupation with the disability (Whyte & Ingstad, 1995). The belief among members of Ochwoga Village that if you spend a lot of time with disabled persons you will become disabled arises from the stigma associated with disability. It seems there is a general belief in the community that disabled persons should be segregated. An education officer on a field visit advised a special needs teacher to reduce the amount of time he spent with pupils with disabilities lest he became like them. The education officer oversees special needs education as a form of employment but does not care about or believe in the education of pupils with disabilities. This may apply to several people who implement government directives they may not necessarily support. It is possible that the policies in place can yield positive outcomes for pupils with disabilities, but the personnel charged with the implementation of the policies still hold negative views and therefore do not follow through in the implementation.

Disabled Persons were Viewed as having Flawed Personhoods and Bodies

In Ochwoga, disabled persons' personhood is directly related to their social function, physical appearance, and their social interactions. The community believes all persons with disabilities have flawed personhoods and bodies and disability damages all aspects of the individual ranging from cognitive to physical abilities. Personhood means that the person is an individual with strengths, preferences, and aspirations capable of identifying their needs and

making choices about their life (Ingstad, 1995). Most of the time decisions are made on behalf of disabled persons based on the assumption that they lack the capacity to do so themselves. When it comes to individuals with cognitive disabilities it is assumed that they lack capacity, independence, and autonomy. Persons with disabilities are excluded from community activities, only employed because of the affirmative action law otherwise are considered unemployable, and only admitted into general education schools because it is a government policy. Every individual whether disabled or not desires some level of independence and an opportunity to decide what happens in their life even if it is as little as a choice from two options.

The whole body is perceived as being flawed if one aspect of it is amiss (Murugami, 2009). The concept of spreading discussed earlier is connected to various levels of impairments and in various contexts (physical, social, or activities) across different cultures just like in Ochwoga. Some teachers may also take advantage of disability and not teach according to the needs of pupils with disability claiming that those pupils do not have the cognitive capacity to learn the concepts taught simply because they are identified as having some form of disability.

Challenges to the Implementation of An All-Inclusive Education Policy

Persons with disabilities in Ochwoga Village have a marginalized status and community attitudes toward them are inconsistent with Kenya's national policy that supports the education of children with disabilities (The Government of Kenya, 2010). That is, national policy does not align with local cultural beliefs, even though chiefs, headteachers, teachers, religious leaders, and parents of pupils with disabilities are advocating for change. Integration of pupils with disabilities in general education settings gives these pupils similar opportunities like their non-disabled peers (Browder & Spooner, 2011) but cultural beliefs prevent them from fully benefitting from these chances. Some parents keep their disabled children hidden in homes,

others send them to school in their late years, and yet others do not disclose to the school administrators that their children have disabilities. Community members shun persons with disabilities and do not see them as human beings with anything of value to offer. These cultural beliefs about disability are culturally entrenched and it will take time to change the community's views. Positive outcomes for children with disability realized over time will enhance attitudinal change in the community.

While there is a national policy in Kenya to provide educational services to children with disabilities, little direction has been given on how to implement the policy. Even more problematic is the Ministry of Education has appropriated limited funding to support local community efforts. This situation has resulted in the heaviest burden of implementing integration in general education settings being born by headteachers, teachers, and parents of pupils with disabilities. The Ministry of Education directed headteachers to admit pupils with disabilities into general education schools (Ministry of Education Science and Technology, 2014) but has not provided special education teachers, teaching and learning resources for special education, nor special education capitation to all schools that have pupils with special needs.

There has been no clear guidance on, or support provided for the implementation of the integration policy. Guidelines for, supervision, and evaluation of the implementation process is non-existent. Headteachers and teachers seem to be fumbling with the implementation of the policy without any training, or capacity building. The Ministry of Education has also provided insufficient funds for the implementation of the all-inclusive education policy. The purpose of educating children with disabilities, especially those with more severe and profound disabilities is also unclear. Some of the pupils with disabilities are in primary school beyond the primary school age limit because they repeat classes multiple times when they realize they cannot

transition to the next level. The policy has not assured transition of pupils with disabilities to secondary school, college, employment, and finally independent living.

Implications

The attitude of the community towards disability contradicts the policies established to improve the education of pupils with disabilities. For significant progress to be realized, there must be a change in the attitude of the community towards disability, all stakeholders must be involved in the development and implementation of an all-inclusive education policy that assures a transition of persons with disability to higher education and employment.

Creating Attitudinal Change Towards Disability

To speed up attitudinal change in communities like Ochwoga, national policy makers need to understand the culture of the community so that the policies are developed and implemented to benefit the children with disabilities. Literature revealed that inclusive education struggles with problems of policy implementation, a socio-educational environment that is not conducive for practice, and inadequate involvement of stakeholders (Kiarie, 2006; Ministry of Education, 2008; Muuya, 2002). The policies in place need to have clear guidelines for implementation, supervision and oversight of implementation, and accountability for positive results to be realized. Guidelines for implementation will ensure accurate, uniform, and consistent implementation of policy in all schools throughout the country. Supervision and oversight will provide implementers with feedback on what aspects are on track and what aspects need to be reviewed and implemented a different way. Accountability will serve as an evaluation tool for what has been done against the results. If the policies in place can assure transition of pupils with disabilities to gainful employment and independent living, then the community's

attitude towards individuals with disabilities might change faster. Individuals with disabilities will be viewed as members of the community who can make meaningful contributions to society.

Disability is associated with witchcraft, evil spirits, curses, retribution from gods among others in several communities all over the world just like in Ochwoga. According to literature, this belief dates back to the medieval times and still has a strong influence on the way persons with disabilities are treated to date (Murugami, 2009; Mutua & Dimitrov, 2001; Schur et al., 2013). Perhaps an explanation of the causes of disability that have been proven scientifically might influence the perception of communities about disability. Information on possible causes of specific disabilities exist but this information is not readily available to everybody.

Community leaders, headteachers, and teachers can bridge this gap by sharing information about causes of disability and actively educating the community. References can be made to the sources of information so that those in doubt can verify the facts. Individuals with disabilities can then be viewed as human beings and not aliens or outcasts.

Local leaders should invite agencies that support persons with disabilities into the community to advocate for change in attitude towards disabilities. In most cases agencies are only viewed as sources of finance but these agencies can do more than that. The Association for the Physically Disabled of Kenya (APDK), Catholic Charities, Care Kenya, and Plan International are a few organizations that support persons with disabilities in neighboring communities. If invited into the village, these organizations would initiate projects that could go a long way in normalizing disability in the community. Community beliefs socialized members to segregate and discriminate persons with disabilities and therefore it is necessary to invite agencies that support persons with disabilities to introduce a different kind of socialization.

Educating the local community on how to relate to persons with disabilities giving them an opportunity to participate and contribute in community activities whichever way they can.

Churches and religious leaders wield a huge influence on the way the community in Ochwoga village views persons with disabilities. Findings from the field show a shift from negative treatment and attitudes towards disability held by the churches in the past to support for persons with disabilities today. The church and religious leaders no longer view persons with disabilities as sinners or evil outcasts but as members of the congregation that are equal before God just like the nondisabled congregants. Besides supporting couples dealing with disability issues and supporting the education of pupils with disabilities through prayers, counselling, and bursaries, the religious leaders can also preach against labeling, segregation, and discrimination of persons with disabilities. The community members are also the church's congregation. Religious leaders are also members of the Board of Management (BOM) of the local primary schools. Their membership in the BOM should also be used to advocate for pupils with disabilities to get admission into regular education schools. Both literature review and findings indicated some headteachers deny pupils with disabilities admission into regular education schools (Chomba et al., 2014; Mukuria & Korir, 2006). After these pupils have been admitted into regular education schools, the religious leaders sitting in these boards of management should monitor their progress to ensure they are enrolled for KCPE so that they can transition to secondary schools. Consequently, these religious leaders should provide the same kind of support they provide to pupils in primary schools to students with disabilities in secondary schools and colleges to ensure that they do not drop out before completion.

Integration of pupils with disabilities in regular education classrooms reduces stigma and gives all learners an opportunity to interact with one another (Charema, 2007). In the long run,

pupils with disabilities transition into the work environment and community with ease because they have learned age-appropriate social skills from their interactions with their peers. The challenging environment offered in the integrated setting help pupils with disabilities to become independent, acquire developmentally advanced skills, form friendships, and develop a more positive self-image by having the opportunity to do what other students do (Salvia et al., 2012). Special units and schools segregate pupils and conditions them to isolate themselves or only mix with other pupils with disabilities, which defeats the purpose of integration.

Disabled persons may require advice, advocacy, and consultancy to be able to identify their needs and decide on what services they require. They may need advice on what services are available to them and how they can benefit from those services. When unable to articulate their wishes, they may need another person to advocate for them, to help them express their wishes or even to ask questions before they can decide. They may consult experts to establish what services are available, cost of services, the location of those services and possible sources of funds. In most cases the decisions made by persons with disability are overridden on grounds that their choices were not in their best interest. When this happens, their autonomy and hence personhood is taken away. From literature review, pupils with disabilities are not enrolled in schools because headteachers reject them on grounds that they are ineducable or that their management in regular education settings strain the scarce financial resources (Chomba et al., 2014; Oketch, 2009). This rejection robs them of their autonomy and hence leaves them with only one option which is segregated special schools.

Local leaders should actively educate the community about the possible causes of disabilities and ways to reduce the chances of giving birth to children with disabilities or acquisition of disabilities after birth. Birth defects can be prevented through prenatal care, good

nutrition, and adopting healthy behaviors before and during pregnancy. Prenatal care ensures that a mother and her unborn child are healthy, and any health problems are spotted and treated early. Early treatment can cure many problems and prevent others. Healthy behaviors include but are not limited to avoiding harmful substances such as illicit drugs, managing other health conditions such as diabetes, hypertension, and obesity. Disabilities that develop after a child is born can be prevented through immunization and seeking treatment from qualified doctors.

Implementation of An All-Inclusive Education Policy

Inclusive education in Kenya still faces problems with policy implementation and a negative community attitude towards disability. According to Mukuria and Korir (2006), Buhere and Ochieng (2013), and Muuya (2002), inclusive education in Kenya is still in the domain of theory and yet to be put into practice. From the data collected in the field it was clear that the headteachers and teachers tasked with responsibility did not have clear guidelines and support for the implementation of an all-inclusive education policy. The existing integration policies seem to be contradictory due to lack of designated supervisory and implementation mechanisms (Mukuria & Korir, 2006). Such mechanism should ensure that existing policies are aligned and what is articulated in special education policy documents is translated into action. School administrators and educators need to be provided with support structures and training in organizational features that can make inclusive education work. Such training would provide school managers and educators the skills and knowledge to coordinate and enhance collaboration between special education and regular education teachers (Rombo, 2007).

Perhaps involving all stakeholders in developing policies related to inclusive education would ensure that policies are aligned, and implementation mechanisms stated clearly. When stakeholders, especially the ones directly involved in the implementation of the policies such as

teachers and headteacher are involved in initial stages of policy development, they may identify gaps early enough and help bridge the gaps before the actual implementation. Another advantage of involving them at the development stage is ownership. When stakeholders own a project, they work extra hard to ensure it is successfully implemented. A study by Buhere and Ochieng (2013) revealed that inadequate involvement of stakeholders was a hindrance to the implementation of an all-inclusive education policy.

The implementation of all-inclusive education policy requires an effective system for the planning, development, production, and distribution of support materials for facilitating inclusion on a local, regional and national level (DiPaola, Tschannen-Moran, & Walther-Thomas, 2004). When support materials are developed, the needs of pupils with various forms of disabilities should be considered. For instance, support materials should be available for visually impaired, hearing impaired, cognitively impaired, and verbally impaired.

In-service special capacity building programs can be developed to prepare general education classroom teachers to adopt strategies to teach pupils with disabilities. Regular education teachers need help identifying areas of the curriculum where students require assistance, suggested teaching strategies, adapting lessons, coordination of assessments, and extra curriculum activities. Providing teachers with capacity building in these areas would ensure full participation of pupils with disabilities. Consistent with the literature, it was established in Ochwoga Village that trained personnel qualified to identify, assess, and teach students with special needs was inadequate resulting into inappropriate placements and poor quality of education for pupils with disabilities (Mukuria & Korir, 2006).

An awareness of cultural issues surrounding disability is a key part of the process of integrating disability into regular education activities (Coleridge, 2000). Parents of pupils with

severe and profound disabilities do not know the procedures to follow to enroll their children in special schools. Local leaders, headteachers, teachers, religious leaders, and other stakeholders should educate and sensitize the community to demystify disability and beliefs about disability such as disability is a curse, vengeance of gods for past evil deeds, disabled persons are unable to learn, work and be productive people in the community. Local leaders and educationists have a lot of influence in the communities and have the capacity to change community attitudes towards disability. Cultural beliefs should not be a hindrance for inclusion of pupils with disabilities. When the community is inclusive, education would also become inclusive.

Teachers trained to teach special education are in short supply in the schools. Class size and teacher-to-student ratios are very high, making instruction difficult. Kiarie (2006) and Muuya (2002) cited shortage of teachers and large numbers of pupils in classes as problems faced in the education of pupils with disabilities in Kenyan schools. The educational system is overloaded, underfunded, and with classes that are too large to handle an influx of children with special needs. There is a need for the Ministry of Education to enforce the recommended student teacher ratio in regular education classes and in special education. Regular education classrooms integrating pupils with disabilities should have a smaller number of pupils than those classrooms without pupils with disabilities to enable the teachers to give the pupils with disabilities the attention they require. The Ministry of Education should provide guidelines on itinerant, special needs, and regular education teachers' job description to clarify what duties head teachers can assign them and what assignments are not theirs so they can focus on their respective duties. Schools designated by the Ministry of Education as integrated schools are the only ones staffed with teachers trained in special needs education, yet there are learners with disabilities in all schools.

Out of the four schools studied, only Akuno school that was established as a special education school and later integrated general education pupils has special education teachers. This is also the school that identifies all pupils by their first name whether disabled or not thereby eliminating labels and nicknames used to ridicule disabled persons in other settings. This reverse integration is perhaps the way forward for other special education schools. Instead of segregating pupils with disabilities into special schools, the existing special schools could integrate nondisabled pupils.

Efforts to provide services to persons with disabilities should be coordinated. According to a 2012 Ministry of Education report, ineffective coordination existed among service providers such as non-governmental organizations (NGOs), faith-based organizations (FBOs), community-based organizations (CBOs), and parents of children with disabilities (Ministry of Education Science and Technology, 2012). One department within the Ministry of Education should be assigned the responsibility of overseeing and coordinating the services provided by various stakeholders such as the church, local leaders, Semi-Autonomous Government Authorities (SAGA) and other service providers. Chiefs and assistant chiefs have data on children born with disabilities, the Ministry of Education has data on children enrolled in schools, and headteachers have data on pupils enrolled in the schools they lead. A special education coordinator at the district should be charged with the responsibility of crosschecking with these state facilities to ensure that all children with disabilities are enrolled in schools. This would also eliminate the problem of children with disabilities enrolling in schools in their late years.

Another challenge the implementation of an all-inclusive education policy faces is underfunding. A special education capitation of Kenya shillings 2,000 for each pupil with disability besides the Kenya shillings 1,020 provided for nondisabled pupils was proposed when

free primary education was introduced in 2003 (Ministry of Education Science and Technology, 2004, 2012). The reality is, the schools are so seriously underfunded that the chiefs, religious leaders, and parents must source for funds to supplement what little the Ministry of Education provides. The Ministry of Education has articulated the integration policy in writing and what remains is to align the written policy with what is implemented in the schools. The Ministry of Education needs to ensure the schools have trained personnel, enough funds, guidelines and directions on the implementation of the special education policy, and supervision to provide appropriate feedback on progress at various stages of implementation of the policy. The implementation of the integration policy needs to reflect what is articulated in writing without which it will remain a pipe dream for the Ministry of Education and a nightmare for the headteachers, teachers, and parents.

Transition of Persons with Disability to Higher Education and Employment

Children with cognitive disabilities do not progress as well as their nondisabled peers unless enrolled in special schools. It is apparent that learners with cognitive disabilities are made to attend classes and promoted to the next class until they get to class 8 but they are not registered for the Kenya Certificate of Primary Education (KCPE) examination. The special education coordinator should ensure that all students are registered for KCPE whether disabled or not. If they cannot be registered in the regular education schools, then they should be transferred to special schools where they can sit for KCPE and proceed to special secondary schools. The community's view of persons with disability as being worthless could possibly be stemming from their inability to transition to high school, college, and finally employment. There should be a plan for pupils with disability to progress in the education system and employment so that the community attitude towards them can change. Data available in literature

is scanty and inconsistent on the number of Kenya training institutions for disabled persons however the whole country had 17 special schools, 30 special units, three pre-vocational schools, one vocational school, and one sheltered workshop sometime in the 1980s (Ndurumo, 1993). A total of four training institutions could not possibly provide training to all students graduating from the 17 special schools and 30 special units. The only plausible explanation is most of the pupils dropped out of the school system before college.

The National Longitudinal study on transition rates among students with disabilities in the US revealed that 30% of students with disabilities dropout at high school, 8% dropout before secondary, and the average age of dropout was 18years having earned less than half the credits required to graduate. Only 37% of students with disabilities attended postsecondary education compared to 78% of students without disabilities (Wagner & Blackorby, 1996). For postschool success, transition planning should begin from the age of 16 years centering instruction on developing skills necessary for community functioning and identifying an array of postschool service programs (Kohler & Field, 2003). Effective transition planning should be student focused, involve family, and collaborate with other agencies (R. L. Morgan, Moore, McSweyn, & Salzberg, 1992).

The special education coordinator should liaise with the district education officer to create extra curricula activities that include pupils with disabilities. Alternatively, the special education coordinator can develop a calendar of cocurricular activities for pupils with disabilities at zonal, district, county, and national levels. This would encourage pupils with disabilities to participate in extra curricula activities if they can compete at zonal to national levels with pupils with disabilities from other schools.

Data collected from the field revealed that there are no supports for newly acquired disabilities in the community. Community leaders should find out ways that other communities use to support people with newly acquired disabilities and implement what is practical and within their ability to provide to people with newly acquired disabilities. The only form of support discussed during interviews was counselling but some may require more supports such as wheelchairs, physical therapy, crutches, or different placements in schools. It is evident from literature review that persons with disabilities lack assistive equipment and devices such as wheelchairs, white canes, communication devices, among other things (Mukuria & Korir, 2006). The government needs to empower the local leaders, headteachers, and teachers to provide more supports to persons with newly acquired impairments.

Future Research Directions

Further research is needed to fully understand the influence of culture on the education of school aged pupils with disabilities, particularly from the perspectives of the children with disabilities. The current study examined the influence of culture on the education of pupils with disabilities but from the perspectives of chiefs, headteachers, religious leaders and parents of children with disabilities. The voices of the school aged children with disabilities would go a long way in highlighting the challenges they face in their education. Also, a study examining the influence of the school feeding programs on the enrolment of pupils with disabilities could help establish a way to support pupils with disabilities in regular education schools. The explanation provided for the feeding programs was to supplement the dubious meals pupils may be getting at home and to save them a trip home and back to school during lunch break. There is a possibility these feeding programs attract and retain pupils with disabilities in regular education schools. Another area for future research is on transition from primary schools to secondary schools,

college, employment and independent living. What factors influence transition from one level to the next? How can transition rates be improved? What keeps these pupils from progressing in their education and how can they be supported to keep them in the education system all the way to college? A study that would address all those issues surrounding transition would provide a solution to the problem of low transition rates for pupils with disabilities in the education system. Another study could involve testing an intervention on the community attitude toward disability. This would involve administering an Attitude Toward Disability Scale pretest, administering the intervention to change the attitude towards disability, and then administering a post-test on the participants to determine the effect of the intervention on the attitude towards disability in the community.

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LIST OF APPENDICES

Appendix A

03/06/2018

Dear **Sir/Madam**,

RE: Invitation to participate in a Research Study

This is an invitation to consider participating in a study I am conducting as part of my Doctoral degree in the **Department of Counseling, Educational Leadership, Educational & School Psychology** at **Wichita State University (WSU)** under the supervision of **Dr. Eric Freeman**. WSU is a university in the state of Kansas, U.S. A. The purpose of this study is to examine the influence of culture on the education of individuals with disabilities in a small, low-income, rural, and traditional community in Kenya.

This study will focus on students with disabilities; therefore, the services of interest will be how students with disabilities are provided with accessible instructional materials, assistive technology, curriculum access and alignment, dropout prevention, family engagement, least restrictive environments, positive behavior supports, and transitions to general education, college, employment, or independent living. I believe that because you are involved in the education of students you are best suited to speak to the various issues, such as the role of community leaders and parents in the education of students with disabilities.

Participation in this study is voluntary. It will involve an interview of approximately 45minutes to an hour in length to take place in a mutually agreed upon time and location. With your permission, the interview will be audio-recorded to facilitate collection of information, and later transcribed for analysis. Shortly after the interview has been completed, I will send you a copy of the transcript to give you an opportunity to confirm the accuracy of our conversation and to add or clarify any points that you wish. All information you provide is considered completely confidential. Your name will not appear in any thesis or report resulting from this study, however, with your permission anonymous quotations may be used. There are no known or anticipated risks to you as a participant in this study.

If you have any questions regarding this study, or would like additional information to assist you in reaching a decision about participation, please contact me at +1-316-730-0652 or by e-mail at fjobat@wichita.edu. You can also contact my supervisor, **Dr. Eric Freeman** at, +1-316-978-5696 or e-mail Eric.Freeman@wichita.edu.

I would like to assure you that this study has been reviewed and received ethics clearance through the Institutional Review Board (IRB) at Wichita State University. However, the final decision about participation is yours. If you have any comments or concerns resulting from your participation in this study, please contact the IRB Administrator at IRB@wichita.edu.

I look forward to speaking with you and thank you in advance for your assistance in this project.

Sincerely,

**Florence J. Obat
Doctoral Student
Department of CLES
Campus Box 142
Wichita State University
Wichita, KS 67260**

**Dr. Eric Freeman
Assistant Professor
Department of CLES
Campus Box 142
Wichita State University
Wichita, KS 67260**

03/06/2018

Kuom Migosi/Mikai,

Thoro Mar Wach: Gwelo Mar Bedo Ja Kanyo Mar Timo Nonro Mar Somo

Agweli kendo akwayi mondo ibed achiel kuom jogo mabiro konya timo nonro e somo mara mar laktar e migao mar telo e yore hoch ma kweyo paro, telo mar yore somo, kod ng'eyo pach josomo e buo mbalariany mar Wichita State ka otelna gi japuonj mbalariany Dr. Eric Freeman. Mbalariany ma Wichita State nitie e piny miluongo ni Kansas, Amerka. Wach maduong' masomo ni biro nono en kaka kit wa gi chike anyuola tayo chenro mag somo mag jogo man gi ng'ol ma opogore opogore.

Somo ni biro tenore kuom somo mag jopuonjre man gi ng'ol ma opogore opogore kuom mano nonro biro bedo ewi weche ma odok korka yore ma jopuonjre man gi ng'ol yudoe buge, gige konyruok kaluwore kod ng'ol ma gin go, yore ma igeng'o go weyo somo, kaka giyudo buge mag somo kod gik mamoko makonyo somb gi, kaka giriwore kod jopuonjre mamoko maonge kod ng'ol, kaka gi idho ngas mar somo ka gi dhi e mbalariany kod kaka gidak e kind anyuola ka gisebedo joma dongo. In kaka jatelo mar location, jalup jatelo mar location, japuonj, japuonj motelo e sikul, jatend kanisa, kata janyuol man kod nyathi man gi ng'ol an gi yie ni inyalo konyo timo nonro ni kuom duoko penjo machalo kaka ting' ma gwenge kata anyuola kawo e riwo luedo somo mar nyithindo man gi ng'ol mopogore opogore kata ting' ma jotend kanisa kata jotend location kawo mondo osir somb nyithindo man gi ng'ol mopogore opogore.

Bedo achiel kuom jogo mabiro konyo nonro en yiero mari. Ka iyie bedo jatimo nonro to wabiro goyo mbaka e yor penjo gi duoko kuom saa ma nyalo chopo achiel kama wabiro winjore kendo e thuolo maber kodi. Kuom yie mari abiro mako duondwa saa ma wawuoyo ewi weche gi kendo abiro. Bang' thuolo machuok abiro ndiko weche ma amako gi kendo abiro kelo ni mondo isom mondo ine ka be andiko weche gi maler kaka iwacho gi kendo ibiro bendo thuolo mar medo lero tiend wach moro amora ma ok ineno ka owuok maler. Weche ma wa wacho gi abiro rito kendo kano e kinda kodi kende. Nyingi kata nying gweng' ma iae ok abi ndiko kamoro amora ma andiko nonro ni. To ka iyiena to anyalo tiyo kod weche moko ma iwacho magero nonro ni ma ok aluongo nyingi. Onge chuanyruok moro amora ma nonro ni nyalo kelo ni kak jaduok penjo.

Ka in kod penjo ma idwaro ni mondo olni maber mondo okonyi ng'ado rieke mar bedo ja nonro ni kata tamruok bedo ja nonro to inyalo manya an Florence Obat e namba simu +1-316-730-0652 kata e mbui na fjobat@shockers.wichita.edu. Bende inyalo penjo japuonjna e mbalariany Dr. Eric Freeman e namba simu +1316-978-5696 kata e mbui mare eric.freeman@wichita.edu.

Amedo jiwi ni nonro ni opuodh gi Institutional Review Board (IRB) man mbalariany mar Wichita State. Yiero to en mari kata idwaro bedo ja nonro kata ik idwar bedo ja nonro. Ka in kod weche ma inyalo dwaro ni mondo olni bende inyalo ndiko ne jatend jononro e mbui mar IRB@wichita.edu.

Ageno mar wuoyo kodi kendo agoyo ni erokamano kuom yie mar kanya kod timo nonro ni.

En an mogeni,

Florence J. Obat
Doctoral Student
Department of CLES
Campus Box 142
Wichita State University
Wichita, KS 67260

Dr. Eric Freeman
Assistant Professor
Department of CLES
Campus Box 142
Wichita State University
Wichita, KS 67260

Appendix C

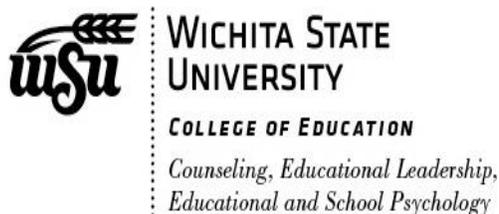
Protocol Questions

1. Tell me your name and describe your position in the community (i.e., chief, assistant chief, teacher, religious leader, or parent to a child with a disability)
2. a). Describe community beliefs and attitudes about persons with disabilities.
b). Are there any unique names used in the community to refer to specific disabilities?
3. a). What experiences have shaped your beliefs and views of persons with disabilities?
b). What is your perception the community's view of the human body in relation to persons with disabilities?
4. Describe the process that families typically follow to gain admission to school for their children with disabilities?
5. a). Are there particular supports in place that enable students with disabilities to attend school?
b). Are these supports adequate for meeting the special needs of children with disabilities or do additional supports need to be in place?
6. Are there supports in place that enable students with newly acquired impairments to adjust to their new status?
7. If a student with disabilities is unable to attend school, what is done to resolve the situation?
8. What is the role of parents in the education of students with disabilities?
9. What is the role of community leaders in the education of students with disabilities?
10. Is there anything else I have not asked that you would like to share with me?

Appendix D

Penjo Mag Nonro

1. Nyisa nyingi kendo lerna migoa ma imako e anyuola ni (jatelo mar location, jalup jatelo mar location, japuonj, japuonj motelo e sikul, jatend kanisa, kata janyuol man kod nyathi man gi ng'ol kata jachung' machiwo gigo makonyo yore somb nyithindo man gi ng'ol)
2. a) Pimnae kaka anyuola ni okawo jogo man gi ng'ol ma opogore opogore kata kaka gi neno jogo man gi ng'ol.
b) Bende nite nyinge moko ma anyuola ni tiyo go ka gi wuoyo kuom jogo man gi ng'ol?
3. a) En ang'o gini ma iseneno e kit ngima ni maosemiyo ibedo kod paro ma in go kaluwore gi jogo man gi ng'ol kata ma osemiyo ineno joma ong'ol eyo masani inenogie?
b) Nyisa pachi kaka ineno kaka anyuola ni neno ringruok dhano(dend dhano) ka otenore kod jogo man gi ng'ol.
4. Lerna yo ma jonyuol luwo mondo girwak nyithindgi man gi ng'ol ei sikul.
5. a) Bende nitiere gigo maoketi masiro nyithindo man gi ng'ol makonyo gi chopo e sikul kendo miyo ok gilew?
b) Bende yore maoketi gi oromo siro somb nyithindo man gi ng'ol kaluwore ni dwach gi samoro nyalo bedo ni nimalo kose onego omed moko? Lerna gigo ma onego omedi
6. Bende nitie yore ma isiro go nyithindo ma ng'ol oyudo apoya nono ewi duong mondo kik gichandre kapod ok ging'iyo gi ng'ol manyien ma oyudo gi no?
7. Ka dipo ni chopo e sikul tamo nyathi man gi ng'ol, chandruok ni ikonyo ga nade?
8. Ting' mar janyuol mar nyathi man gi ng'ol en mane o yore mag somo mar nyathine?
9. Ting' mar jotelo mag anyuola en mane e yore somo mag nyithindo man gi ng'ol?
10. Bende dibedie wach machielo mapok apenji ma diher wachona?



Consent Form

Purpose: You are invited to participate in a research study assessing the perceptions of effective leadership in Wichita Public Schools. We hope to learn how district administrators, principals, and aspiring principals define principal leadership and how they view the balance between managerial tasks and instructional leadership.

Participant Selection: You were selected as a possible participant in this study because you are one of the following in Wichita Public Schools: district administrator, principal, or an aspiring principal who can share their views on effective principal leadership. Approximately thirty-five participants will be invited to join the study.

Explanation of Procedures: If you decide to participate, you will be interviewed by a member of the Wichita State University field study team. Individual interviews will allow the team to collect data regarding the perspectives of district leaders, principals, and aspiring principals. The interviews will be conducted once, and audio recorded. Interviews will last approximately forty-five minutes to an hour. Interviews will be scheduled at a mutually convenient location and time. Interviews will be transcribed, and participants will be provided a copy of the written transcription to check for accuracy. An example of an interview question is: What does an effective principal do?

Discomfort/Risks: There are minimal risks anticipated in this study. Individual interviews will maintain confidentiality. You may feel minimal stress discussing your personal experience within Wichita Public Schools. Participation is voluntary and you may withdraw from the interview or refuse to answer questions at any time. In order to protect subjects from any repercussions, responses to interviews will be confidential and your anonymity will be maintained in the final report.

Benefits: This study will aid Wichita Public Schools in answering questions connected to perceptions of effective leadership and identifying leadership potential. These benefits will cultivate new awareness in identifying and hiring of quality principals.

Confidentiality: Participants names will be kept confidential. No names will be used in the final report. Digital copies will be stored in an encrypted, secure online password protected location. Every effort will be made to keep your study-related information confidential. However, in order to make sure the study is done properly and safely there may be circumstances where this information must be released. By signing this form, you are giving the research team permission to share information about you with the following groups:

- Office for Human Research Protections or other federal, state, or international regulatory agencies;

- The Wichita State University Institutional Review Board;

The researchers may publish the results of the study. If they do, they will only discuss group results. Your name will not be used in any publication or presentation about the study.

Refusal/Withdrawal: Participation in this study is entirely voluntary. Your decision whether or not to participate will not affect your future relations with Wichita State University and/or the Wichita Public School district. If you agree to participate in this study, you are free to withdraw from the study at any time without penalty.

Contact: If you have any questions about this research, you can contact: Dr. Jean Patterson, 316-978-6392, jean.patterson@wichita.edu

If you have questions pertaining to your rights as a research subject, or about research-related injury, you can contact the Office of Research and Technology Transfer at Wichita State University, 1845 Fairmount Street, Wichita, KS 67260-0007, telephone (316) 978-3285.

You are under no obligation to participate in this study. Your signature below indicates that:

- You have read (or someone has read to you) the information provided above,
- You are aware that this is a research study,
- You have had the opportunity to ask questions and have had them answered to your satisfaction, and
- You have voluntarily decided to participate.

You are not giving up any legal rights by signing this form. You will be given a copy of this consent form to keep.

Printed Name of Subject

Signature of Subject

Date

Printed Name of Witness

Witness Signature

Date



Chiwo Thuolo Mar Timo Nonro

Thoro Mar Wach: Ogweli mondo ibed achiel kuom jogo mabiro konyo timo nonro e yore ma kit wa gi chike anyuola tayo chenro mag somo mag jogo man gi ng'ol ma opogore opogore. Ageno nono pach jatelo mar location, jalup jatelo mar location, japuonj, japuonj motelo e sikul, jatend kanisa, kata janyuol man kod nyathi man gi ng'ol mondo awinj kaka ting' ma gwenge kata anyuola kawo e riwo luedo somo mar nyithindo man gi ng'ol mopogore opogore kata ting' ma jotend kanisa kata jotend location kawo mondo osir somb nyithindo man gi ng'ol mopogore opogore.

Yiero Jogo Mabiro Timo Nonro: Ogweli kaka achiel kuom jogo manyalo bedo jakony timo nonro kaluwore ni in achiel kuom: jatelo mar location, jalup jatelo mar location, japuonj, japuonj motelo e sikul, jatend kanisa, jachuny ne agency machiwo konyruok ne nyithindo man gi ng'ol, kata janyuol man kod nyathi man gi ng'ol. Duto ji piero adek gi ariyo ma hikgi oromo kata okalo higa apar gi aboro ogwel mondo obed jogo mabiro konyo timo nonro.

Chenro Mag Timo Nonro: Ka iyie bedo achiel kuom jogo mabiro konyo timo nonro, to an Florence J. Obat abiro penji penjo. Penjo gi biro kawo thuolo ma ok okalo saa achiel kendo wabiro romo e thuolo kod kama wayieree kodi ji ariyo. Kuom yie mari abiro mako duondwa saa ma wawuoyo ewi weche gi kendo abiro. Bang' thuolo machuok abiro ndiko weche ma amako gi kendo abiro kelo ni mondo isom mondo ine ka be andiko weche gi maler kaka iwacho gi kendo ibiro bendo thuolo mar medo lero tiend wach moro amora ma ok ineno ka owuok maler. Weche ma wa wacho gi abiro rito kendo kano e kinda kodi kende. Nyingi kaka nying gweng' ma iae ok abi ndiko kamoro amora ma andiko nonro ni. To ka iyiena to anyalo tiyo kod weche moko ma iwacho magero nonro ni ma ok aluongo nyingi. Aina mar penjo mabiro bedo e nonro ni en: Pimnae ting' ma janyuol man gi nyathi man gi ng'ol kawo ewi somb nyathine?

Chunyuok/Masira: Onge chuanyruok moro amora ma nonro ni nyalo kelo ni kak jaduok penjo. Weche ma wa wacho gi abiro rito kendo kano e kinda kodi kende. Nyingi kata nying gweng' ma iae ok abi ndiko kamoro amora ma andiko nonro ni. To ka iyiena to anyalo tiyo kod weche moko ma iwacho magero nonro ni ma ok aluongo nyingi. Inyalo mana winjo lit mar chuny matin ka igloo pachi ewi weche mag chike kod somb nyithindo man gi ng'ol. Duoko penjo en yiero mari kendo kadipo ni nitie penjo ma ok iwinj ka idwaro duoko to bende iweyo aweya. In thuolo mar loko pachi e saa asaya kata mana ka wasetieko penjo bende inyalo ng'ado bedo ni ei nonro ekore ma onge rach moro amora mabiro timore.

Ber Ma Nonro Ni Nyalo Kelo Ne Oganda: Nonro ni biro konyo jatim nonro fwenyo yore ma kit anyuola gi chike tayoe somo mag nyithindo man gi ng'ol kendo kaka isiro somb nyithindo man gi ng'ol gi a sikunde. Rieko manyien biro yudore manyalo kelo konyruok ne gwenge ka otenore kod chike anyuola ka oriwore gi somo mar nyithindo man gi ng'ol ma opogore opogore.

Kano Weche: Nyinge jogo mabiro bedo jokony timo nonro abiro kano apanda. Weche ma omaki gi ramak mar dwol abiro kano e computer ma aloro gi ralar ma iluongo gi dho ngere ni password kuom higni 5 bang' timo nonro. Mondo mi nonro ni otim e yo makare, nyalo chuno ni weche moko aket e lela. Kai keto lueti a fom ni to imiya thuolo mar nyiso jotelo mag pinje marito yore mag timo nonro kaka:

- Office for Human Research Protections or other federal, state, or international regulatory agencies;

- The Wichita State University Institutional Review Board;

Tamruok/Weyo Nonro Ekore: Bedo achiel kuom jogo mabiro konyo nonro en yiero mari. Bende kadipo ni nitie penjo ma ok iwinj ka idwaro duoko to bende iweyo aweya. In thuolo mar loko pachi e saa asaya kata mana ka wasetieko penjo bende inyalo ng'ado bedo ni ei nonro ekore ma onge rach moro amora mabiro timore.

Tudruok: Ka in kod penjo ewi nonro ni to inualo tudori kod Dr. Eric Freeman e simu +1-316-978-5696, Eric.Freeman@wichita.edu, kata Florence J.Obat, +1-316-730-0652, fjobat@shockers.wichita.edu.

Ka in kod penjo ma otenore kod ratiro mari kaka jalno mabiro konyo timo nonro to inyalo tudori kod Office of Research and Technology Transfer at Wichita State University, 1845 Fairmount Street, Wichita, KS 67260-0007, namba mar simu +1-316-978-3285.

Onge gima ochuni ni nyaka ibed acheil kuom jogo mabiro konyo timo nonro ni. Lueti ma iketo kae ni nyiso ni:

- Isesomo kata ng'ato osesomo niweche ma owachi malo kanyo,
- Ing'eyo maler ni mae en nonro,
- Isebedo kod thuolo maber mar penjo kendo oseler ni penjo duto ma ipenjo kaka dwarore, kendo
- In iwuon ema iyiero mondo ibed achiel kuom jogo mabiro konyo timo nonro.

Onge ratiro ni moro amora ma iwito sama iketo lueti e fomb ni. Ibiro kawo kopi mar otas mar chiwo thuolo mari ni kendo ibiro dong' kodo.

Nying Jaduok Penjo

Luet Jaduok Penjo

Tarik

Nying Janeno

Luet Janeno

Tarik