

INCLUSIVE EDUCATION

A Study of Opportunities and Challenges for Children with Disabilities

A Case of Zambia

In Partial fulfillment of the requirements for a Master of Science in Social Work



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Abbreviations

AIDS- Acquired Immune Deficient Syndrome

ART- Anti Retroviral Therapy (Drug)

CBR- Community Based Rehabilitation

CRPD- Convention on the Rights of People with Disabilities

CRPD- Convention on the Rights of Persons with Disabilities

CSO- Central Statistical Office

EENET- Enabling Education Network

EFA- Education for All

GRZ- Government of Republic of Zambia

HIV- Human Immunodeficiency Virus

ICF- International Classification of Functioning, Disability and Health

ILO- International Labour Organization

MCDSS- Ministry of Community Development and Social Services

MDG- Millennium Development Goals

MoE- Ministry of Education

MSTVT- Ministry of Science, Technology and Vocational Training

NGO- Non Governmental Organisations

SADC- Southern African Community

SEN- Special Educational Needs

UN- United Nations

UNESCO- United Nations Educational, Scientific and Cultural Organization

UNZA- University of Zambia

WHO- World Health Organization

ZAFOD- Zambia Federation of the Disabled

ZAMISE- Zambia Institute of Special Education

ZAPD- Zambia Agency for Persons with Disabilities

Abstract

Background: “Inclusion” has become a catchphrase, not only among the educationists, but also among administrators, policy makers/implementers, human rights advocates (particularly those who advocate for the rights of people with disabilities) and social workers (who advocate for social justice and empowerment of vulnerable members of society).

Aim: The main aim of this study was to investigate and analyze opportunities and challenges for the social inclusion of children with disabilities within the context of inclusive education

Method: This was a qualitative study, and data was collected using primary and secondary sources.

Results: The findings were; people have negative attitudes towards people with disabilities; disability is associated with cursing; and poor families fail to send children to school. Girls with disabilities are vulnerable to sexual abuse because they are perceived to be HIV free and safe. Distance between homes and schools poses a challenge to people with disabilities. Infrastructure is also said to be inaccessible. Teacher-student ratio is also high, and there is lack of legal and policy frameworks to foster the inclusion of children with disabilities in mainstream schools. Social workers sensitize non-disabled students on the need to embrace their peers with disabilities; CBR is being implemented to change people’s negative perceptions against persons with disabilities. Standard officers have been employed to oversee the inclusion of children with disabilities in the mainstream school system.

Conclusion: To promote inclusive education in Zambia, it is vital that students with and without disabilities have on-going chances to interact with, and learn from, each other. This is the only way that stereotypes and ill-informed misconceptions about disabilities can be dismantled.

Keywords: *Challenges, Disability, Inclusive Education, Opportunities*

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1.0. INTRODUCTION

“There are currently some 5.6 billion different people in the world. Some have a difference called disability.”

Disabilities Dimension in Development Action: Manual on Inclusive planning, (2000).

Inequality in the access of social services and participation in social activities are arguably some of the greatest challenges that the world has been experiencing for some time. People have been excluded based on their abilities. In the education sector students have been excluded based on their lack of finances to pay school fees and other requirements-- such as books and uniforms; high drop out rates especially in the systems that emphasize on meritocracy in terms of progressing to higher educational levels; and on the basis of disabilities (Miles, 2009).

While inclusion of people with disabilities in social activities is slowly making headway, because of limited resources, caution is called for when planning so that the resources can be utilized in the most efficient and effective manner. It is important to state that having an inclusive society is dependent on how well social services are planned, prepared and supported. This involves qualified personnel (administrators), community involvement and support, and a political will from the government. In the area of education, Enabling Education Network (EENET) was created to promote the inclusion of the marginalized groups such as people with disabilities in ordinary schools. EENET believes that all education systems should be accessible to all regardless of their abilities. This means that people with disabilities should be able to access community social services without being discriminated against (ibid).

It was for this reason that this study was set to investigate the opportunities and challenges that exist for the inclusion and participation of children with disabilities in social services. In this paper the focus within the social services was the education sector, and the target for the children with disabilities was the age group of six (6) years to eighteen (18) years. Further social networks in this paper implies; community, family and friends.

Pre-knowledge and Experience

My interest in the subject matter stems from the course we did in first year of master programme at Linnaeus University on disability, this made me develop a keen interest in studying disability. The course accorded us an opportunity to carry out field studies on disability in Sweden, and I was privileged to interview two people with disabilities- one of them is a consultant with one of the Kommuns in Sweden. They provided me with a lot of different issues surrounding people with disabilities in Sweden. This enabled me to gain deeper knowledge and understanding of issues dealing with disability, and to reflect on my own cultural background. From then on I decided to start researching on issues dealing with disabilities. This resulted in my decision to carry out a study dealing with disabilities within the context of inclusive education.

Thesis Structure (Disposition)

Chapter 1 (Introduction); this chapter describes the background, Literature review and relevance of the study in the field of social work.

Chapter 2 (Theoretical Framework): This describes the Social Inclusion. This is the theoretical model that guided the study.

Chapter 3: This discusses the research problem, the aim and research questions of the thesis.

Chapter 4 (Methodology): This chapter discusses the data collection processes, sampling, participants, data sources, data analysis, ethical considerations and the limitations of the study.

Chapter 5 (Findings): This chapter describes and discusses the results in relation to the social inclusion model and other studies.

2.0. BACKGROUND

“Inclusion” has become a catchphrase, not only among the educationists, but among administrators, policy makers/implementers, human rights advocates (particularly those who advocate for the rights of people with disabilities) and social workers (who advocate for social justice and empowerment of vulnerable members of society). In the education sector, the desire to attain *Education for All* (EFA) by 2015 has propelled the advocates of EFA to start looking for ways in which they can overcome the barriers to inclusion and participation that vulnerable members of society face. Some stakeholders in the EFA have been critical of the omission of people with disabilities in the Millennium Development Goals (MDGs) (Croft, 2010). Thus, there is a need to mainstream disability issues as countries strive to achieve the MDGs. Some critics of the MDGs have stated that it will be impossible to achieve them, especially the education goal, if children with disabilities are left out of the education system for various reasons (i.e., inaccessible buildings, not enough—or improperly trained—teachers, poverty, negative attitudes and perceptions surrounding disability, etc.). It has been shown that many children with disabilities do not have equal access to many social services. More often than not, children with disabilities start school late, have slower progress in the classroom, and have higher dropout rates than their non-disabled peers (ibid).

Most children with disabilities are not educated in the mainstream school system but rather in the parallel special schools system. This problem is thought to be more pronounced in developing countries. The exclusion of people with disabilities from education often leads to severe consequences in later life: many do not gain the necessary skills to enter the competitive labor market and thus get excluded from economic activities (Noyoo, 2000). Therefore, many are denied the opportunity to lead an independent life (and experience the dignity that economic independence affords). Other offshoots of exclusion from education are increased crime rate, street children and other social problems such as destitution (ibid).

However, in trying to understand inclusive education, it is important to see how it has evolved over the years. Levin (1997) asserts that prior to the adoption of the inclusive school system, education for people with disabilities was mainly provided through special schools. The services were first initiated in order to cater for children who were blind and deaf, and such services were provided in residential schools. The genesis of special schools can be traced to Europe and North America during the eighteenth and twentieth centuries respectively. However, children with intellectual special needs were perceived to be uneducable; hence,

they were mainly institutionalized. At that time, the provision of *Special Educational Needs* (SEN) was mainly the domain of charitable and religious organizations and was viewed not as a right but as a privilege (Peter, 2004).

The provision of SEN to children with disabilities was seen as discriminatory (mainly by people with disabilities); hence, after World War II, people with disabilities started organizing and mobilizing themselves and began to advocate for the end of discrimination and inequalities in accessing social services. Many countries in the west started enacting social policies and legislations meant to eliminate all forms of barriers to participation in various life activities- and to better the living conditions of people (Noyoo, 2000). Therefore, the twentieth century marked the new dawn on the rights perspective, social participation and a new disability perspective (Levin, 1994). It was during this time that the term “inclusion” began to be used. The term referred to a dynamic process of people’s participation within their social networks, regardless of their abilities. Thus, *Special Education Needs* was being transformed into a more democratic perspective. With that, different conferences were held to foster inclusion in different spheres of life (ibid).

The *Dakar Framework for Action* adopted a World Declaration on *Education for All* (EFA) in 2000. This was the genesis for the establishment of the goal of universal primary education to all children regardless of their sex, age and abilities. In line with the adoption of the aforementioned framework, inclusive education has been cited as one of the strategies for meeting the goals of the *Dakar Framework for Action- Education for All*. However, as much as inclusive education is considered to be one of the most important strategies for meeting the goals of *Education for All*, inclusive education within the *Education for All* framework is quite complex because disability issues cut across many sectors such as health, education, social welfare, and employment (Cameron & Valentine, 2001).

Despite the complexity of inclusive education, many countries have seen the importance of educating children together, regardless of their abilities. The inclusive education philosophy recognizes and appreciates that all humans have a right to social services regardless of their orientation. It accepts individuals as unique, recognizing that all have a right to develop their abilities/capabilities (Cameron & Valentine, 2001). It focuses on the need to foster people’s participation and eliminating all forms of discrimination in society. The philosophy of inclusion is thus important in ensuring that people develop social skills needed for their daily living (Noyoo, 2000).

Inclusive schools are thus perceived to be vital in providing education to children with special needs and those without special needs, alike. Croft (2010) posits that getting children with disabilities into schools is one thing, but overcoming attitudes, bureaucratic, and economic barriers is another. Therefore, presence alone is not enough to guarantee participation in all activities- a conducive learning environment must be ensured, as it is a prerequisite to inclusive education. These days, there are unprecedented efforts by policy makers and implementers in trying to come up with acceptable social policies that promote the wellbeing of all children regardless of their abilities. Noyoo (2000) argues that change agents such as social workers are also advocating for social policies that would facilitate higher living standards for marginalized groups in society. Further, governments world over, including Zambia, are enacting laws and social policies that are meant to incorporate children with disabilities into the mainstream society by ensuring that all people are accorded equal opportunities in all spheres of society (MoE, 1996).

2.1 Definitions of Concepts

2.1.1 Inclusive Education

The concept of inclusive education is not an easy term to define. Different organizations define it differently, depending on what their interests and concerns are. Armstrong, Armstrong and Barton (2000) argue that inclusive education focuses on different perspectives. It *“offers a way of dealing with the negative connotations of ‘normalization’, a principle which has been a major force for change in the social services, and which has had a particularly important role in the critique of segregated special schooling”* (ibid: 22). Inclusive education, therefore, provides an opportunity for students--regardless of their abilities--to be educated in the same environment and sharing the same facilities. On the other hand, Barron and Amerena (2007:103) make reference to UNESCO’s (2004) definition of inclusion where *“Inclusiveness is seen as a process of addressing and responding to the diversity of needs of all learners through increasing participation in learning, culture and communities, and reducing exclusion with and from education”* (ibid).

2.1.2. Disability

Disability is a multifaceted concept that has been defined differently by different people and organizations. There is no agreed upon definition. As a concept, it has been defined from medical, economic, social, political, and administrative perspectives (Altman, 1984 as cited by Albrecht, Seelman & Bury, 2001). Functional definitions tend to focus on disability as the

restriction of bodily functions. An example of this definition is by Oliver (1990:11) who states that disability is “*the disadvantage or restriction of activity caused by a contemporary social organization which takes no or little account of people who have physical impairments and thus excludes them from the mainstream of social activities.*” From the administrative perspective, disability is defined as incapacitation in which the affected person can hardly engage in gainful activity due to medical, mental or physical limitation. While from the clinical point of view, disability is defined on the basis of the authority that is closely linked to medicine and is determined by the clinicians. On the other hand, scholarly research definitions of disability take into account the diverse factors that are at play in the relationship between health, functioning and other dynamic factors that go with the label ‘disability’ (Albrecht et al, 2001).

Leonard et al (2006:2012) make reference to the World Health Organization’s *International Classification of Functioning, Disability and Health (ICF)* definition of disability as “*person// who have long- term physical, mental, intellectual, or sensory impairment which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others.*” This is the definition adopted by this paper. The rationale behind the selection of this definition is because of its consistency and holistic elaboration of the concept as it covers medical, psychological and social aspects of disability.

2.2. The Zambian Context

2.2.1. Disability in Zambia

The population of people with disabilities in Zambia is estimated to be between 700,000 to 1 million, representing around 7 to 10 percent of the total population. The majority of people with disabilities are found in the rural areas of the country. Further rural areas in Zambia are characterized by limited basic services (health and education facilities). People with disabilities are mainly involved in agriculture activities- accounting for 80 percent of the common occupation among persons with disabilities (Mubita, 2009). Hence, the majority of people with disabilities are impoverished since agriculture in a country like Zambia does not offer high returns. Further a significant number of persons with disabilities have low literacy levels, and a considerable number of them are involved in street begging as a survival strategy, especially in the major cities (ibid).

Within the education sector- according to MoE (1996), about 15% of children in Zambia have special education needs, meaning that in 1995, there were between 160,000 and 250,000

primary school children with Special Education Needs (SEN). However, most SEN schools in Zambia hardly cater for children with intellectual special needs. The ultimate goal of the government is to ensure that children with SEN are included in mainstream classrooms so that social inclusion can be fostered. Thus, in Zambia, inclusive education is perceived as an extension of special education, administered alongside the ordinary school system (ibid).

2.3. Government's Support for Persons with Disability

2.3.1. Legal and Policy Frameworks

The Zambian government has adopted a number of policy and legal frameworks aimed at enhancing the inclusion and participation of people with disabilities in various social activities (Matafwali, 2007). Among the various legal instruments enacted include; The Persons with Disabilities Act of 1996- this forbids discrimination and stigmatization of people with disabilities. Then there is the National Policy on Disabilities- this was enacted with a view of ensuring full integration of persons with disabilities within the mainstream society. Other than that there is the National Policy on Education (Educating Our Future) of 1996- this recognizes the importance of people's right to education regardless of their abilities. Above all the constitution of Zambia Article 23 (3) prohibits discriminating against persons with disabilities. It provides for just and fair distribution of social benefits to meet the needs of people with disabilities. The above legal and policy frameworks are in line with the international instruments that Zambia signed and ratified- such as the United Nations Convention on the Rights of Child, Convention on the Rights of people with Disabilities and the Salamanca Statement on Principles, Policy and Practices on Special Needs Education. However, the country does not have a policy specifically on inclusive education (Noyoo, 2000; Mubita, 2009).

2.3.2. Institutional Frameworks

In terms of institutional frameworks, there are many organizations dealing with the issues of people with disabilities. These include; the Ministry of Community Development and Social Services (MCDSS) - It is responsible for policy formulation and implementation dealing with people with disabilities. Social workers and social welfare officers under the ministry are responsible for facilitating higher living standards, and ensuring that people with disabilities are conscientized and sensitized so that they can come to terms with the realities of their

living conditions (Noyoo, 2000). Zambia Agency for Persons with Disabilities coordinates and supervises all organizations dealing with people with disabilities. It is also responsible for overseeing the implementation of policy on disability. There are also other organizations interested in the welfare of people with disabilities; Zambia Federation of the Disabled (ZAFOD) is the mother body. It provides *inter alia* small loans and training in business management, and advocates for the rights of people with disabilities. Under ZAFOD, there are many organizations representing different interests of different people with different disabilities (Mubita, 2009).

2.4. Key International Instruments on Disability

Priestly (2003) asserts that within the framework of the rights and resources, issues of social inclusion of people with disabilities in the community (social) activities have taken a centre stage at global level. He makes reference to Article 28 of the United Nations Convention on the Rights of a Child (UNCRC) that articulates the need for the holistic wellbeing of a child. Other international instruments include; the Convention on Rights of People with Disabilities (CRPD)- this is aimed at protecting, promoting and ensuring that people with disabilities enjoy all the basic rights irrespective of their abilities. The Salamanca Statement on Principles, Policy and Practices in Special Needs Education emphasis on the need to educate all children together regardless of their circumstances. The Standard Rules on the Equalization of Opportunities for Persons with Disabilities on the other hand aims at ensuring that all barriers to effective participation of persons with disabilities in social activities are removed (UN, 1993; Guernsey, Nicoli & Ninio, 2007; Barron & Amerena, 2007; Clement & Read, 2008; Croft, 2010;).

2.5. Models of Working with People with Disabilities

Attempts have been made to come up with models of disability. The well-known ones are the medical and social models. The models present different perspectives on inclusion and empowerment of people with disabilities. The services and support—and the levels of participation of people with disabilities—are to a large extent influenced by the two models (ibid).

2.5.1. Medical Model

The model is an early approach aimed at helping people with disabilities the world over. The model takes the traditional approach in assuming that disability is a biological reality due to impairment. Disability is thus a result of a person's inability to perform activities due to impairment. This view of disability has influenced the development of rehabilitation approaches for people with disabilities (Albrecht et al, 2001). Therefore, the support rendered to a person with a disability is designed to help such an individual adjust to society's demands. At the political level, the response takes the form of changing or reforming health care policies. Because of its emphasis on diagnosis, the model has been criticized for focusing too much on the impairment and not enough on the person (ibid). It therefore ignores the society in which a person lives. The model also falls short on mentioning the role that structural and physical environments play in affecting the functionality of people with disabilities. This model has had an influence on the way in which society views people with disabilities. For instance, in institutions such as schools, children with disabilities may be seen as individuals who have limits. Children with disabilities may be viewed relative to their impairments (Barron & Amerena, 2007). Thus in terms of the application of the medical model to inclusive education, a lack of access to education was, in the past, perceived to be the norm for people with disabilities, their "lot" in life due to their medical impairments. It is further argued that children with special needs were expected to be educated in special schools or, if need be, adapt themselves so as to be educated in the mainstream school system (Croft 2010).

2.5.2. Social Model

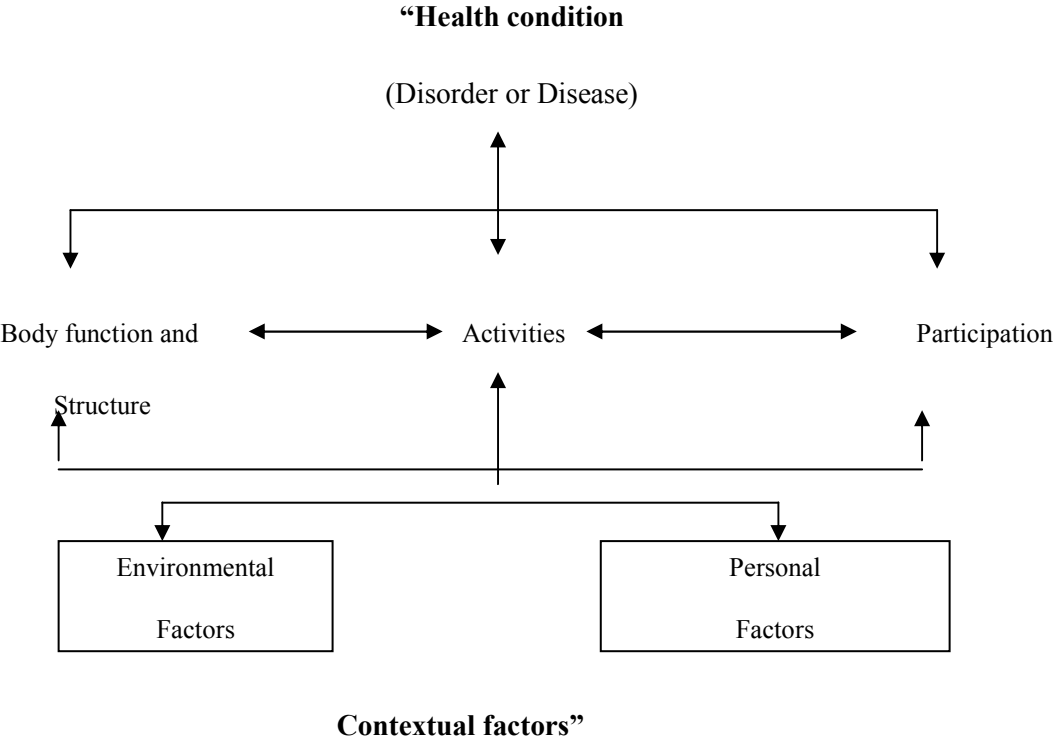
The social model takes a different view of disability. According to this model, disability is a socially constructed problem. The model thus asserts that society excludes, discriminates and stigmatizes people with disabilities (Goodley, 2000). In a nutshell people face attitudinal and environmental barriers in society. There is need to effect changes in society as a way of uplifting the living standards of people with disabilities (Barron & Amerena, 2007). For example, buildings should be accessible to people with disabilities by having elevators (lifts) and not only stairs or providing hearing aids for those with hearing problems (Oliver, 1996). Using this model, activists for the inclusion of people with disabilities in mainstream society have focused on social inclusion dealing with increasing access of people with disabilities to education, employment and other facilities within the community. The model is closely connected to the Declaration of Human Rights so that assessment and treatment involves

overcoming barriers so as to ensure equality of opportunities in society regardless of ones abilities. Advocates for the rights of people with disabilities are thus credited for the increased understanding of disabilities as being socially constructed (Finkelstein, 1993; Croft 2010).

However, both models (medical and social) are said to have shortcomings, one of the criticisms is that they both take on a narrow perspective of disability (Oliver, 1996). On the basis on the critiques leveled against the two models, the World Health Organization’s International Classification of Functioning, Disability and Health (ICF) came up with one that combines social and medical models- it is a coherent perspective of health from biological, individual, and social point of view (WHO, 2002).

Figure 1

Interaction between the different components of the ICF: Reproduced from WHO (2002:9)



The diagram above illustrates how ICF disability and functioning are seen as outcomes of interplay between the health conditions and Contextual factors. The former includes diseases and disorders among others while the later include environmental factors such as people’s attitudes and social structures, and personal factors such as gender, education, personal experiences and behavioral factors. Disability according to ICF, entails malfunctioning at one

or all of the following levels: impairment, reduced and/or restricted activity participation (ibid).

2.6. Literature Review

Different researchers have conducted different studies on issues of education and disabilities. This section discusses different findings of studies on disabilities and inclusive education.

People with disabilities can be marginalized through negative societal attitudes. Galvin (2005) used a grounded theory approach to investigate how people with disabilities were treated by the non-disabled in four different countries involving 92 people. His findings revealed that the people with disabilities had fewer opportunities for affection, and there were mostly considered as unattractive and not good enough to engage in a relationship. These views were as a result of negative societal attitudes and behaviors against people with disability. The study further revealed that the people with disabilities were mainly excluded from many societal activities.

On the other hand, Edwardraj, Mumtaj, Prasad, Kuruvilla and Jacob's (2010) qualitative study focused on the perceptions of intellectual disability in Vellore- South of India. The study collected data using focus group discussions with mothers of children with intellectual special needs, teachers and the community health workers. The study focused much on the cultural and religious beliefs on disabilities. The findings of the study revealed that structural barriers and religious beliefs were responsible for advancing the negative stereo types towards disability. The study also discovered the presence of different models of disability drawing from religious and social factors.

Scheiderrer, Lovelock and Kinebanian (2010) carried out an ethnographic study on the experiences of two (2) Tibetan families in the countryside that had a child with disabilities. The study findings revealed that both families' views on disability were influenced by their Buddhist religious beliefs. It was discovered that both families believed that the condition of a disabled child "*arose from the Karmic (belief in rebirth) actions of the previous life, and that the individual is born to undertake the consequences of those action*" (ibid: 294). Karma has its roots in the Buddhist belief of life after death.

Bedini's (2000) research was on the perceived stigma and community recreation for people with disabilities. The sample size of the study was 15 and in-depth interviews were carried out. The study revealed that the major factors that were responsible for the negative perceptions of people with disabilities were traditional beliefs. This resulted in the people with disabilities becoming helpless, and this led to accepting their situation- of being stigmatized.

In Zambia, Mung'omba (2008) did a study on Comparative Policy Brief Status of Intellectual Disabilities. The findings of the study were that traditional beliefs about the causes of intellectual disabilities were cited as the main reason why persons with intellectual disabilities were discriminated and stigmatized in society. They were considered to be at the margins of society despite the enactment of antidiscriminatory policies and laws. The study further discovered that there were many Non-governmental organizations (NGOs) and faith based organizations that were trying to ameliorate the sufferings of children with disabilities but that their efforts were hampered by high poverty levels in the country. Apart from that, the country lacked adequate social safety nets to support people with disabilities.

Some studies done in the school settings in the United States, United Kingdom and New Zealand suggested that proximity between children with disabilities and the nondisabled children did not always promote social integration and interaction (Cooke, Cooke, & Appoloni, 1978 cited by Ronning & Nabuzoka, 1993). Other researches such as the one done by Parkin (1979) found that one of the most effective ways in fostering social interaction was through peer mediation. This involved using the non-disabled children as behavior change agents. These children were trained in different behavior techniques on how to reinforce positive behavior and performance in their peers who had disabilities. Studies done later on revealed that the approaches had immediate success in fostering positive performance among the children with disabilities (ibid). Similar studies done in Africa by Serpell (1988 cited by Ronning et al, 1993:279) using the "social-friend" approach revealed that families and friends played an important role in fostering positive behavior and performance among children with disabilities.

Tavares (2011) carried out an evaluation of the programme called Kids are Kids in Ontario Canada. The project's aim was to promote the positive interaction between children with and those without disabilities in inclusive social settings. The other objective of the project was to enhance the opportunities for social success of children with disabilities. The results of his

evaluation revealed that the Kids Are Kids project had a positive impact on the children attitudes towards their peers with disabilities. Two of the three children with disabilities who were interviewed stated that there was increased social inclusion one month after being admitted in the project.

Other studies such as the one done by Abbott and McConkey (2006) focused on fostering social inclusion from the perspective of the persons with intellectual special needs in residential homes in the Northern Ireland. A group of 68 respondents were interviewed. The findings were that the people with disabilities felt that there were barriers to social inclusion; they identified lack of skills and knowledge, location of houses, the role of care givers, and people's attitudes and lack of social amenities as the major barriers.

Clark (2008) carried out a study on the perspectives of students with learning disabilities in an inclusive classroom in New York at Oswego. The purpose of his study was to find out if the students with disabilities felt accepted and included in the mainstream system. The study used semi-structured interviews, and observation over a period of three months. The findings of the study were that the respondents stated that they felt included in the mainstream system. 67percent of the respondents said that they liked the reception from their peers and the help they were receiving from their teachers. All the respondents stated that they interacted well with their peers.

Many theories that explain children's attitudes towards people with disabilities have been developed. One such theory is the theory of mere exposure effect. According to this theory, continuous exposure to something leads to change of an individual's attitude towards it. In the context of inclusive school systems, negative attitudes and behaviors of children towards their peers with disabilities ought to change when placed in the same classrooms (Zajonc, 2001). However, studies done by Cambra and Silvestre (2003), and Odom (2002) revealed that despite being in the same classrooms, and despite having opportunities to mingle with their peers, children without disabilities ignored their peers with disabilities- they viewed them as inferior.

Other theories that explain the importance of proximity include the persuasive theory. According to this theory, individuals change their attitudes when presented with new knowledge regularly. Thus individuals can use their power, authority and status to influence the behavior and attitudes of others by presenting them with new knowledge (Olson & Zanna, 1993). Studies done in line with the persuasive theory revealed that the teachers' attitudes

towards students with disabilities had great influence on the non-disabled students. The more positive the attitudes of the teachers were the more non-disabled children interacted with their disabled peers (Jones & Sherman cited by Tavares, 2011).

Hayat's (1994 cited Rasheed, 2003: 9) study on mainstreaming of children with disabilities into the ordinary school system in Pakistani revealed that most children with special needs were interested in attending schools as they stated that it was amusing studying and playing with other students. They had a conviction that the more they interacted with other children the less discrimination and stigma they would suffer. A similar study by Noor and Khokhar (2002 cited Rasheed, 2003: 9) in the same country found that children with disabilities in an ordinary school were happy with the attitudes of the school authorities towards them at an ordinary school. However, their biggest challenge was accessing the school buildings since they were not user friendly to them. Hussain and Javed (1997 cited Rasheed, 2003: 10) tried to develop a model for mainstreaming of children with disabilities in ordinary classes. The results were that education experts in Pakistan were not willing to accept these children (with disabilities).

Mitchell and Desai (2005) assert that many countries in Asia have legislation and policies in place that deal with issues of special education but now with an emphasis on inclusive education. They attribute the formulation of legal and policy frameworks on inclusive education in many countries to the international conventions that these countries have signed and ratified. They further stated that the implementation of legal and policy frameworks is one of the steps that countries are taking in incorporating the many children with disabilities that remain out of inclusive school systems or out of school completely. However, despite the efforts being put in place, there still remains a huge discrepancy in attainments between students with and without educational special needs. One example is that of Indonesia, where the gap at enrollment is between 30-40percent but at completion the gap increases to 60-70percent (ibid).

Benjamin et al (2003) carried out a study in England, and the findings of the study were that inclusion and exclusion complex especially between teachers and students. They further stated that the relationship between teachers and students was more of power relations. The conclusion of the study was that inclusion was a dynamic process that needed to be worked out continuously at interpersonal, social and political level.

Reviewed literature shows that there has been a growing tendency by many developing countries that are signatories to the various international instruments on the promotion of education, to promote inclusive education (ibid). However, studies done show that people in some of these developing countries are dissatisfied. A survey done by Mutara (2008) in Zimbabwe, respondents were asked to identify factors that they considered as hindrances to learning faced by people with disabilities, many respondents pointed at the community attitudes towards people with disabilities, distances to schools and lack of user friendly facilities for people with disabilities.

The World Bank (2010) carried out a study in Uganda, South Africa and Zambia on the relationship between Disability, gender and HIV/AIDS. The findings were that girls with disabilities were more susceptible to sexual abuse in all the three countries. The reasons were that people with disabilities were generally considered to be free of HIV/AIDS; hence, they were safe.

2.7. Relevance of the Study

The study was carried out in the field of Social Work because education is very cardinal in effecting positive change in individuals. Social Work is anchored on promoting positive change in individuals and society at large, so education for students with disabilities is pivotal in providing them with equality of opportunity, improving their living standards, and contributing to the development of the country (Pincus and Minahan 1973 cited by Noyoo, 2000). Education is also important in that it augments the problem- solving and coping capacities of people, and social work is all about improving people's problem solving abilities so that they can lead a decent lifestyle devoid of social problems. Hence, an all inclusive education system is important in social work (Noyoo, 2000). Further, Oliver (1996) states that welfare provisions such as education play a vital role in the integration of people in society. Hence, education is important in social work. Further, it is important for Social Workers to have an in-depth knowledge and understanding of disability because theories of disability do influence their practice and future research in the sense that social workers ought to effective positive functioning among the marginalized people in society through evidence based knowledge (Cunningham & Fleming, 2009).

However, the studies done indicate that many students with disabilities have been discriminated against, and denied the access to education on an equal basis with other children without disabilities. Further as much as studies (such as those by Mung'omba, 2008, and Ronning & Nabuzoka, 1993) have been done, the area of disability and inclusive education remain under researched in Zambia. Literature reviewed indicated a gap in the area of opportunities and challenges students with disabilities face in schools, hence justifying the need to carry out this study. Apart from that, issues of disabilities are not considered important in most poor countries like Zambia. Many researches focus on issues that are considered to be of political importance, and that can contribute to the development of the country. Hence, issues of disabilities tend to be overlooked because of the misconception that people with disabilities cannot contribute as effective as the able bodied towards socioeconomic development of the country (Noyoo, 2000). It is thus, incumbent upon social workers to carry out more studies in the area of education and disabilities so that they can come up with better ways of ensuring that people with disabilities who are often marginalized in countries like Zambia are treated on an equal basis in accessing social services and in contributing to the development of the country.

A study such as this (this thesis) is also important in that it can help social workers to become better skilled and knowledgeable in the analysis of the role of education in community development. Further empirical evidence can help social workers to advocate and lobby for social action; this in turn can influence social policy directly or indirectly. According to Noyoo (2000: 90) empirical evidence through research *“enables social work practitioners to promote social justice by lobbying for institutional changes in favor of the marginalized and also the passing of government policies that are responsive to the needs of vulnerable groups.”* Advocacy and lobbying can thus help in overcoming the structural inequalities that characterize many spheres (such as education) of the Zambian society. A study on inclusive education was thus appropriate in the field of Social Work.

3.0. THEORETICAL FRAMEWORK

3.1. Social Inclusion Theoretical Model

Disability can better be understood by using a number of theoretical models drawn from different disciplines of social sciences. The theoretical models thus form the “*the basis for social welfare’s understanding of disability*” (Cunningham & Fleming, 2009:2). The theoretical model that guided the study is the Social Inclusion (Exclusion) Model. However, it is worthy mentioning that Social Inclusion and Social Exclusion are intertwined, hence, the two cannot be discussed in isolation. Social exclusion has its roots in France in the early 1970s; it was meant to describe vulnerable members of society who included people with disabilities- who were excluded from participating in certain social activities. Social exclusion is thus defined as processes, the means by which people are excluded from participating in certain activities. It thus focuses on institutions that facilitate or hinder human interaction. (de Haan. 1998). Social exclusion leads to marginalized groups failing to realize their meaningful and effective participation in daily activities.

Williams (2008) argues that whereas up until 1998 social exclusion covered different groups of vulnerable people, and it was closely connected to employment, by 1997, the term became more specific and focused not only on employment but also on education and training. Beeker (2000 cited by Gates 2007) asserts that social exclusion results in vulnerable members of society being denied equal opportunities and access to social services. The major factors that predispose vulnerable people to social exclusion include their personal circumstances and wider family indicators that might call for a need for increased support.

Bigby and Frawley (2010) argue that social exclusion entails analysing various factors that perpetuate the exclusion of people from the mainstream society. The factors that ought to be examined include social attitudes, processes and structures that create segregation and exclusion of certain category of people from the mainstream society. These factors are seen to form the core of social inclusion/exclusion model.

According to the social exclusion model, people with disabilities are often present but not part of the community. Presence entails sharing the same facilities in a community on a non-segregative way. However, participation goes beyond merely being present to include a growing and valuable social network. Thus in understanding social inclusion, it is important to distinguish between presence- the right to have access or a position- and participation-

which entails being part and parcel of the community. Presence is thus considered as one of the prerequisites of participation but that in itself is not enough to guarantee participation (Bigby and Frawley, 2010). De Haan (1998) thus states that social inclusion can be fostered or hampered by the presence or absence of structures in society. At national level, policies and laws play a significant role.

Yanagisawa, Masui, Onoda, Furutani, Nomura, Yoshida and Ura (2011) state that according to the social inclusion model, human always have a relationship with society. Thus human beings by nature have a strong desire to form and maintain social relationships; if excluded from social activities- this ignites psychological pain. Social exclusion can be said to be a form of relational aggression because of the damage caused to the social relationships among people. Geniole, Carre and McCormick (2011: 137) argue that according to social inclusion model *“psychologists from a broad array of theoretical perspectives concur on the importance of social relationships for human drive. There is much evidence that the quality of a person’s social bonds impacts on physical and mental health.”* However, the opposite happens when they are socially included; they experience pleasure.

Social inclusion was thus developed to challenge the discrimination that the minority groups faced in society. According to Bigby and Frawley (2010: 181) *“social inclusion means enabling people with disabilities to do those ordinary things, make use of mainstream services and be fully included in the local community.”*

Gynnerstedt and Blomberg (2004 cited by Gates, 2007) state that issues of activity, participation and accessibility are important in social inclusion. People should thus be seen not only as actors but subjects and part and parcel of the mainstream society. Understanding disability from such a perspective forms the core of social inclusion. The model of social inclusion entails that people with disabilities should be provided with the much needed support and social services within their own neighbourhoods rather than putting them at the margins of society and providing them with services in special settings (ibid).

Gates (2007) posits that, for those with disabilities, access to goods and services, to education and employment, and to the general community, is not simply akin to finding the ‘right key to the right door.’ Instead, the argument is that access is better understood as one of the processes of inclusion. In other words, when those with disabilities are intentionally empowered and included in all spheres of life, not out of charity, but out of the recognition

that they have much to contribute to a society, then the question of access becomes a moot point (ibid).

Putnam (2000 cited Gates, 2007) has particularly argued that the key to social inclusion model is to focus on the positive contributions that people with disabilities can make, rather than highlighting the negative. Furthermore, Gates (2007) suggests that the locus of action and responsibility to promote such inclusion falls—not on the shoulders of those with disabilities (although their self-advocacy efforts are crucial), or on one ministry but on the shoulders of the entire society. Indeed, all levels of society need to be involved so that access to services for those with disabilities can be seen as a human rights' issue, and just as human rights are not relegated to one department for oversight, neither should disability issues be.

Bigby and Frawley (2010) maintain that using the social inclusion model, from a wider perspective social inclusion occurs at two different levels;

-It occurs when people regardless of their abilities are able to use community facilities without discrimination, and can participate in social organisations such as education, religious groups, and occupy social positions for which they are qualified.

-Social inclusion also occurs when people can have both formal and informal social networks with or without disabilities.

Hence achieving social inclusion requires a lot of changes within the social structures; buildings have to be accessible, facilities and services such as education and health, social processes and social networks within society (Bigby and Frawley (2010).

“People with disabilities are first people, that is, they are not just citizens, but human beings in the first place. They are not only bearers of institutional roles, they are also- and more importantly- identified by their proper names// we need to include them in our informal relationships as well as our institutions” (ibid: 187).

The rationale behind the choice of this model is that it allowed the investigator to assess, not only how social, economic, physical, and environmental factors can hinder or support the effective inclusion of people with disabilities, but also the adequacy of existing structures on inclusion education.

4.0. RESEARCH PROBLEM

The Zambian government undertakes to adhere to the obligations of the international treaties that it has signed and ratified- such as the Convention on the Rights of People with Disabilities, the Convention on the Rights of the Child, and the Salamanca Statement on Principles, Policies and Practice in Special Needs Education together with the Draft Framework for Action, and the United Nations Standard Rules on Equalization of Opportunities for Persons with Disabilities, among others (Mubita, 2009). For this reason, the country's social policies state that the government will ensure that every person has equal opportunity to social services- in terms of accessibility, quality, participation and benefits derived thereof. The government also undertakes to put in place measures and interventions aimed at ensuring that the vulnerable children are supported in accessing social services. However, despite all the pronouncements about equality and equity of access to social services, Zambia does not have a policy specifically promoting the inclusion of children with disabilities in the mainstream school system (MoE, 1996).

However, as much as Zambia has signed and ratified international obligations that aim at upholding the rights of children with disabilities, and promoting equality of access to social services such as an inclusive school system- like many developing countries- Zambia is still not doing well in terms of discharging its obligations on the principles of an inclusive education system. There is little evidence of the strategies to show that children with special needs are being included in the regular school system. Apart from that, as much as many proponents of inclusive education state inclusive schools enhance integration and interaction between students with disabilities and those without, the few available literature indicate that there is growing concern that many children with disabilities who are in the inclusive school system feel socially secluded (Tavares, 2011).

The few studies that have been done on inclusive education and disabilities have focused on the importance of social networks for people with disabilities in schools-- Serpell, (1988), Teachers and students' perceptions of inclusive education by Chilangwe, (2010). Mung'omba's (2008) study was on the traditional beliefs about the causes of intellectual disabilities, and the World Bank (2010) carried out a study on HIV/AIDS and Disability in South Africa, Uganda and Zambia. All the above stated studies had little focus on opportunities and challenges in social inclusion and participation of children with disabilities in inclusive school system. This growing conception that there is lack of, or inadequate,

strategies to strengthen the inclusion of children with disabilities in the midst of fragmented government policies such as those on inclusive education, gave rise for a need to carry out a study to ascertain the opportunities and challenges for the inclusion of children with disabilities in education.

5.0 AIM

The main aim of this study was to investigate and analyze opportunities and challenges for the social inclusion of children with disabilities within the context of inclusive education in Zambia.

The study focused on the challenges and opportunities for children with disabilities of the ages ranging from six (6) years to 18 years. The rationale for choosing this age group was that in Zambia this is usually the age at which children start their primary school, and complete high school respectively.

5.1 Research Questions

1. Are there any challenges to the inclusion of children with disabilities in the ordinary school system? If they are, to what extent have these challenges affected the inclusion and participation of children with disabilities in school activities
2. What strategies are in place to foster effective participation and inclusion of children with disabilities in the mainstream school system? What has been the effect of these strategies?

6.0 METHODOLOGY

This was an exploratory study in that it was carried in order to investigate the opportunities and challenges for the social inclusion of children with disabilities in the education sector in Zambia. The study went beyond just observing and describing but investigated the factors that promote, and those that hinder the effective inclusion and participation of children with disabilities in social activities (Polit and Beck, 2010).

6.1. Data Collection

The study was qualitative in nature and it captured both secondary and primary sources. The collected data was triangulated using data triangulation. This entailed that apart from collecting data from documents and books, data on the subject of inclusion and participation of children with disabilities in the education sector was also collected from different respondents and informants- this was meant to ensure validity of data as different people gave their different perspectives on the subject of inclusion of children with disabilities in social amenities in Zambia (Mikkelsen, 2005). It also facilitated drawing conclusions on what constitutes the truth surrounding the subject under study. The study thus captured a more complete and contextualized picture of the opportunities and challenges within the context of social inclusion of children with disabilities in education (Polit and Beck, 2010).

6.1.1. Sampling Procedure

Purposive sampling was used in selecting the respondents and the informants; that is, the researcher chose the respondents that he felt they could best provide information that was needed for the study. In this case, those people who were perceived to be well informed about issues of social inclusion of children with disabilities in social services, as well as those with diagnosed special needs and care givers (parents), were chosen for the study (Polit& Beck 2010).

6.1.2. Inclusion/Exclusion Criteria for Participants

The respondents and key informants had to meet certain criteria in order to be included in the study. Government officials were those who work with issues dealing with inclusive education and/or disabilities. Head teachers and teachers had to be staff at a school that had both non-disabled and children with disabilities (an inclusive school); students- only those with disabilities were included as respondents; only parents of children with disabilities were

included in the study; and social workers- only those working with issues of disability were included in the study.

6.1.3. Informants/Respondents

The interviews were held with key informants and respondents in Zambia. These were drawn from different backgrounds. Fifteen (15) of the participants were males while eighteen (18) were females. The following were the key informants:

- Government Officials (Ministry of Education, Curriculum Development Centre, University of Zambia, Zambia Institute for Special Education and Zambia Agency for the Persons with Disabilities)
- School managers (Head teachers)
- Teachers
- Social Workers

The respondents were:

- Parents of children with disabilities who attend the mainstream school system.
- Students with disabilities

The rationale behind the researcher opting to settle for a sample size of thirty three respondents was because of time constraints and logistical reasons (i.e., the study was undertaken during the rainy season, and most areas were flooded).

Table 3: Characteristics of key informants and respondents

Gov't officials		Parents		Students		Teachers		Head teachers		Social workers	
4 Males	4 Females	4 Males	2 Females	3 Females	1 Male	3 Females	3 Males	2 Males	5 Females	2 Females	

6.1.4. Interviews

Semi-structured interviews were used to collect primary data. The interviews were held with the key informants and the respondents. The interview guides were pretested prior to final data collection. The data collection instruments were pretested in two different ways; the first was by peer reviewing by my research supervisor and a professor in the school of social work at Linnaeus University. The supervisor and another professor suggested alternative wording to the way the questions were earlier phrased in the interview guide. The interview guides were

pretested on a few individuals in Zambia who provided responses to the questions. The few participants in the pretesting of the interview guide were also requested to paraphrase the questions in the guide in their own words. This was meant to ensure that the questions were not ambiguous to the participants (Tappen, 2011).

Semi structured interviews helped the researcher to have a deeper discussion based on the themes that were of interest to the study. The semi structured interviews had open ended questions in order to allow for flexibility, and this enabled the researcher to formulate follow up questions based on the responses but in line with the study objectives. Questions were further phrased in such a way that the respondents were able to explain rather than getting responses with “YES” or “NO”. Explanations from the respondents enabled me to get the different perspectives on social inclusion of children with disabilities (Polit& Beck 2010).

I also held one focus group interview with teachers at Linda Community Open School- this enabled me to get the views and experiences from the teachers simultaneously. I however made sure that the discussion did not get off track but I tactfully guided the discussion in line with the objective of my study. The focus group interview accorded me an opportunity to get valuable knowledge and understanding as the teachers appeared comfortable and at ease discussing their experiences in teaching children with disabilities and the communities’ perceptions of such students. All the interviews were conducted in English except for two that were done in the Zambian local language (Nyanja).

6.1.5. Secondary Sources

Secondary data sources were also used in this study. Literature pertaining to issues of social inclusion of vulnerable members of society in social services, and disability both in Zambia and other countries were used. Books, other research reports, Journals and government documents were used. Linnaeus University library (Växjö, Sweden) was very resourceful- various library databases - such as JSTOR, Sage Journals Online, PsycInfo, Social Science Index, Sociological Abstract, Science Direct, PubMed and LibHub among others were used to source information. The search in the databases involved using the key words in my study, and these were; disabilities, inclusive education, achievements and barriers. I was also searching for the references in the articles, and downloading those that met the criteria I had set- peer reviewed articles.

6.2. Data Analysis

As already alluded to, collected data was qualitative, thus it was analyzed thematically-- interviews were recorded on an audio recorder. The recorded interviews and the field notes were the major data sources. The interviews were transcribed as accurately as possible by listening to the recorded interviews again and comparing them with the transcriptions. Open coding was thus done to gain an initial first impression of the themes and patterns that emerged from the interviews. Data was then coded according to different conceptual categories and thus themes such as traditional beliefs; religion, accessibility, gender and economic barriers were created. It was clear that a number of themes were consistent with the Social Inclusion/Exclusion Theoretical Model, and more careful selective coding revealed that most of the themes could fit in the model. A matrix display was also constructed which had research questions in the columns while the responses from every respondent were in the rows (Mikkelsen, 2005).

6.3. Ethical Considerations

Dealing with human beings in research requires that research ethics are adhered to. According to Mikkelsen (2005) research ethics are important in social sciences. On the basis of Mikkelsen's assertions this study adhered to ethical principles. Since data was collected in Zambia, the author had to get clearance from the ethics committee of the University of Zambia. Further adherence to issues of ethics included getting written consent from the respondents, being honest and respectful and upholding confidentiality. The respondents were also assured that the data was to be solely used for the purpose of this study. I also got a letter of introduction (which outlined the scope and aim of the study) from Linnaeus University- that I was presenting to all respondents before collecting data from them. A consent form was also obtained from the university- it also explained the nature of the study, and that the respondents were free to decline participation or discontinue the interview if they so wished (Tappen, 2011). The introduction letter and the consent form were both signed by my research supervisor (A/Prof. Barbro Blomberg), and they had her (supervisor's) contact details in an event that the respondents had reservations about the study; they were free to contact the research supervisor.

6.3. Limitations

Although the researcher received overwhelming support from the different stakeholders such as the key informants and other respondents, there were some limitations that were encountered during the study that need to be acknowledged. These included;

- Inadequate resources- the study was only done in Lusaka, as the researcher did not have enough resources to visit other places within Zambia.
- Some (5) potential respondents backed out on the days we were supposed to have interviews, citing various reasons for their withdrawal. However, their withdrawal did not affect the findings of the study as I had enlisted more potential participants- such setbacks were foreseen, and I needed to take precautions.
- The search in the databases revealed that the field of disability is under researched in Africa, so most of the studies in the literature review are from other continents whose way of doing things might be quite different from that of most African countries (especially those in sub-Saharan).

7.0 RESULTS

Data collected from the interviews and secondary data sources revealed that the social inclusion of children with disabilities into the mainstream society and ordinary school system has had both challenges and achievements. The following section is about the findings of the study. The findings are presented according to the main themes that came out from the interviews with the key respondents.

7.1 Disability Causation

This study revealed that some parents interviewed were not sure why their child had a disability. Of the six (6) parents who participated in the study, three (3) had a child with a severe disability, and all the 3 did not know why they had a child with a disability while the other three believed that it was as a result of God's will. 9 of the 33 participants in the study believed that disability was as a result of traditional factors such as bad spirits. 18 participants reported that disability was caused by the impact of among others poor maternal health and nutrition, genetic and other unhealthy lifestyles during pregnancy such as drug and alcohol abuse.

7.2 Traditional Beliefs and Attitudes

One of the themes that emerged from this study was the existence of traditional beliefs and attitudes towards people with disabilities. The participants- parents, social workers, teachers and government representatives expressed their concern about the negative perceptions towards persons with disabilities that society continue to have. It was discovered that the negative attitudes towards persons with disabilities especially children are twofold- that is, they are from both the parents and the society at large. From the societal point of view, the findings were that despite the awareness campaigns that have been undertaken worldwide and at the national level, there are still some people who do not want their children to mix with children with disabilities both in schools and outside school activities. The negative attitudes that people hold towards persons with disabilities go back to time immemorial.

Traditional attitudes also come in as a barrier to social inclusion, especially in the typical areas (remote areas), where there is a lot of initiation ceremonies. This has led to putting people with disabilities, whether old or young, at the margins of society. There are strong beliefs that people with disabilities especially those with intellectual disabilities cannot perform most of the social activities such as academic work-- they are seen as excess load to

society. And in certain families, they are not allowed to do certain household chores, because it is believed that they cannot perform because they are disabled: hence, they are stereotyped. For example one parent of child with an intellectual disability reported:

“I often wonder what my child did to be in this state. I do everything for him; he can’t do a single thing on his own. Am devastated, I have cared for him since he was born. His grandfather doesn’t even want to see or touch him; he is fed up with him because he can’t perform any duties at home// when this happens I cry.”

Many respondents especially the teachers reported that there is a tendency by some parents to live with the knowledge that their disabled child are an embarrassment to their families especially if their child had intellectual disabilities since some of them demonstrate behaviors that are not socially appropriate. As the parent of a 10 year old boy with cerebral palsy said:

“My relatives don’t like seeing my child come out of his room whenever we have visitors. They also don’t want him to be exposed to the public because they see him as an embarrassment to the family. They compare him with other children in the neighborhood and say my son is ‘mad’. Such comments make me feel really bad, and I even entertain thoughts of committing suicide. It is neither my wish nor his wish to be in this state”

One of the respondents (from Zambia Institute of Special Education) carried out a study on the perceptions of teachers towards children with disabilities. Her findings were that the majority of the respondents (teachers) felt that students with disabilities should be excluded from the mainstream and instead be taught in special schools. She commented:

“So people perceive special education to be only for those with special needs, but there are gifted and talented students in special education too// Parents are therefore frustrated by negative professional attitudes from teachers.”

The above mentioned findings were supported by one parent whose daughter was at first refused to write examination by the teachers and the head teacher of the school on the grounds that she had intellectual disabilities so it was not going to be easy for her to pass.

“Her teachers had negative perception, for example, the head teacher advised me that the child was not fit to write the exam, and it was better for the girl to repeat grade 9. But, I told her that if the girl was willing to attempt the next grade, let her do it. If she fails, then

that's it. So, when she wrote the exam, she made it to the 10th grade with flying colours”
(Parent of child with mild intellectual special needs)

However, another parent had the different view on the ability of his child to perform at school. For example he stated;

“My son stopped school because of his inability to perform. The teachers advised me to take him to another school because they could not handle him, and because of his condition, he was unable to cope with the workload at school. Apart from that, there was need for someone to constantly monitor him because at times he behaves in a strange manner. So I thought that it would be better if he stayed at home where his mother can be taking care of him rather taking him to another school where he may be rejected too.”

Another example of negative community attitudes that was brought up during the interviews was that of Bauleni Street Kids School; they started to incorporate children with disabilities into the mainstream school. When the community in Bauleni learnt of this, they asked the school authorities to vacate the buildings they were using as a school. This was mainly, because they had children with intellectual disabilities. The community around the school felt that it was an infectious condition. So, despite having several workshops to explain that intellectual disabilities were not infectious, they were asked in a polite way to leave that place, and to find an alternative place for people with special needs. The school had to move to another location, and currently 150 children with special needs attend regular classes at the new school premises, while twenty five (25) children with severe intellectual special needs are on home based programme- teachers follow these children to their homes and teach them skills for daily living. The teacher from the above school stated;

“Such negative perceptions by the community towards children with disabilities are militating against the inclusion of such children in social activities. The people strongly opposed our being in their neighborhood just because we were taking on board all children regardless of their abilities//even those with intellectual disabilities.”

Four (4) out of the six (6) parents interviewed revealed that a lot of superstitious attitudes surround disabilities, and some people think disabilities such as intellectual- are communicable, some parents feel that their children can get epilepsy if they interacted with a child with such a condition, so they would not be comfortable to allow their children engage in social activities such as being in the same class with a child with disabilities. Because of

the negative attitude that society has towards people with disabilities, even most the able-bodied children are influenced such that they do not want to mingle with the children with special needs, hence, stigma and discrimination continues because the children who are able-bodied look down upon their peers with disabilities. For example a person with disabilities lamented;

“Even when you visit a home, when a child comes to play with crutches, the parent will say, No, no, no. So, this makes the parents to be very protective, so very few disabled children mingle with able-bodied children. Traditionally in Zambia, when you meet an albino, you spit in your shirt (especially pregnant woman), so that they don’t bear an albino child. Even when you are walking as a disabled person in the street, you will find that the mother will pull the child to let the sick person (disabled person) pass. So they perceive us to be sick people.”

The majority of the respondents revealed that some parents also have negative attitudes towards children with disabilities. For example there is a tendency by parents to delay in enrolling their children with special needs in schools. The majority of the respondents (26 out of 33) said the delay to enroll children in school is because of fear of their children being looked down upon. One of parents said that society and tradition have not accepted disability; they have always associated disability with curse. Even when a couple has a child with disabilities, the wife is usually the culprit- she is blamed. The wife can even be accused of having had differences with elderly people when pregnant, thus became cursed and ended up having a child with disabilities. The respondents also stated that there is a tendency especially in rural areas- by parents to lock up their children with disabilities (especially those with intellectual disabilities) in homes. One of the respondents (with disability) said;

“So that is the background- traditional beliefs. And from that, most of the disabled children who go to school go when they are over-aged...at the age of 10 or 12...that’s when they start grade one. So the parents say who is going to do these things? Who is going to take him to the toilet? Who’s going to lift him when he falls? So until he grows, and grows confidence, that’s when they will let go of a disabled child. So, most of the disabled children do not have social networks. This is how traditional beliefs negatively affect the emotional, psychological, social, mental and physical development of disabled people.”

On the other hand, some parents have played a pivotal role in ensuring that their children get integrated into the mainstream society. One parent reported that his child who had mild intellectual disabilities was performing far much better than his peers without disabilities in many social activities. He cited the academic performance of his child as being above that of his peers who do not have disabilities in class. However, the parent pointed out that the greatest challenge was that whenever his child had a seizure attack, his friends and teachers got distracted and inconvenienced, hence, at times he preferred that his child remained at home than to inconvenience people at school. The parent said;

“As much as my child is disabled, but I can proudly say his performance at school is outstanding. He has been able to compete favourably with his peers who are not disabled. I have been encouraging him a lot to associate with his classmates// I encourage and assure him that he is not different from others.”

However, one of the students with a physical disability reported:

“I really feel bad when my classmates avoid me, it is painful- it’s not my wish to be in this state. I would also love to be like them.”

Some participants such as teachers complained of the bad attitudes of some parents. They said that most educated parents with children with disabilities, especially those with intellectual disabilities do not understand that such children have their own levels of learning certain skills. They would want to force them into social activities that are not of their mental age. This makes it difficult for the teachers to perform their duties effectively. The participants said that the process of including children especially those with intellectual disabilities required careful assessment of a child’s intellectual capacity. They thus saw the interference from the parents as a challenge to effective social inclusion and participation of children with disabilities in many social activities.

In the same vein, one of the social workers interviewed said that some parents oppose the initiatives of social workers to link children with disabilities with systems such as schools that can provide such children with services and resources. The reason for this was that some parents felt that their children were misfits in society.

7.3 Religious Beliefs and Disability

The role of religion in understanding disabilities was one of the themes that came out in the study. The majority (8 out of 10) of the parents and the children with disabilities who participated in the study expressed their faith in God. Dependence on the supernatural powers was seen as important because they did not expect help from any other source apart from God. They stated that since society did not accept people with disabilities, faith was vital. So their personal faith was seen as a major source of comfort and hope. A few participants attributed disability to curse from God while others felt that it was a matter of fate. One participant (a parent of a 7 year old girl with a physical disability) said:

“The only hope we have is in God, my child may suffer now but who knows- maybe in future she will be fine. God has promised to remove all sickness on earth. So we have to be faithful and wait upon his promise. I don’t want to see my daughter having such a disability; it is devastating. Otherwise if it is God’s will then I just have to accept it. It is him who gives children”

Another participant, a parent of a 10 year old boy with mild cerebral palsy had a similar perspective when she said:

“I ask God to make him better but sometimes I feel like losing hope especially when his condition worsens but my faith strengthens me, and then I don’t give up// thanks to God I feel that am getting stronger each day. He gave me this child for a purpose.”

However, on the contrary another parent felt that disability was a curse from the supernatural powers. The participant said that the disabled have not been accepted from time immemorial. The parent’s views were different from the views of other parents and students interviewed. The parent reported:

“Even God refused to receive a disabled animal for a sacrifice. No deformed animal could be given as a sacrifice. He wanted a fat animal. That is number one// even just having a disabled child was a taboo. It was a curse // generation to generation have not accepted disability. So, you see these are the challenges that disabled people have.”

Because of the perceptions that some members of society have towards persons with disabilities, some parents proposed that it would be better to have children with disabilities separated from other children when it comes to engaging in social activities because they

faced a lot of ridicule in society. Even the children in mainstream schools had a tendency of linking disabilities to cursing from supernatural being.

7.4. Disability, HIV/AIDS and Gender

The respondents reported that children with disabilities are more vulnerable to HIV/AIDS. There is a misconception that people with disabilities are free of HIV. The majority of the participants said that society generally perceives people with disabilities not to be sexually active; hence, they are HIV free and safe. The social workers said that this makes particularly girls with disabilities to be more vulnerable to men since most men believe that they cannot contract HIV from girls with disabilities. Apart from that, because of the stigma associated with disability, and the social conditions in which most people with disabilities live, most of them become very vulnerable to sexual abuse. One social worker said:

“Most people with disabilities live in poverty and they hardly have access to social services such as education and health facilities, hence, they receive less information about HIV/AIDS- particularly the blind neither get it in sign language nor in Braille. Further, most people with disabilities lack self esteem and confidence, so they are more likely to accept whoever comes to them (proposes love to them). Because of that children with disabilities are at high risk of contracting HIV/AIDS.”

The teachers in the focus group interview stated that there are many factors that are intertwined and mutually reinforcing that predisposes children with special needs to HIV/AIDS. Among them include factors such as income, lack of education, unemployment and gender. These daily challenges they face often overshadow their concern about HIV/AIDS. The teachers also stated that they often administer Anti Retroviral Drugs (ARTs) to students with HIV/AIDS since these children spend most of their time at school and they need to adhere to the treatment regime. So when they are at school, teachers help in administering the drugs. One teacher lamented:

“But there is no risk allowance. So we need risk allowance in special education. That’s why some of the teachers don’t want to teach in special schools. Some of the kids are HIV positive. So, now, if you are the only teacher in that class, you have to teach and also help children with special needs, and at times help in administering ARTs if there is child who is HIV positive since most of them cannot follow the treatment regime. This is an added burden to us- its not part of our job description.// So that in itself can undermine the efforts of ensuring that

such children are integrated since once their friends know their status they begin to shun them”

7.5. Financial Constraints

Financial constraints were one of the themes that came out in the study. High poverty levels that most families face in Zambia increases the likelihood that children with disabilities will fail to access education. Most of the respondents especially parents; cited the expenses of providing school uniforms, shoes and books as some of the factors that prevented children from enrolling or progressing in schools. Four (4) out of the six (6) parents interviewed said that it was too costly to send a child with a disability to school because besides the school requisites, such children require other special equipment such as wheelchairs for those with physical disabilities.

“My wife and I have been trying everything possible to have our child in school but it’s not easy. I don’t work and so is my wife so whatever money we get from our small business, we use it for food. In fact we hardly have all the meals per day. Life is hard. They say basic education is free- but when you look at it, it’s not because there are uniforms, shoes and books to be bought, so where do we get the money? So for now my daughter who has a physical disability doesn’t go to school because of lack of money. We are suffering.”
(Father of 9 year old girl with physical disability)

Then the other thing is that the teaching-learning aids are very expensive, individual schools cannot afford. Another issue that all the teachers said was that absenteeism was high especially among children with special needs. One of the reasons they cited were that most of these children lacked appropriate school uniforms. It was reported that most parents opt sending children without disabilities to school- especially when resources were inadequate for all children to go school. The rationale behind it is that the able bodied can look after their siblings with disabilities in future. Poverty was thus reported as an underlying cause for excluding children with disabilities not only from schools but other social activities.

“What I have observed is that there is a tendency by most families to send an able-bodied child to school than one with a disability especially if the disabled is a girl. Generally people feel that their siblings can help those with disabilities materially. So, dropout rate and absenteeism is very high among students with disability.” *(Teacher at a government school)*

The social workers said that the inability by some children with disabilities to attend school would have severe consequences in future because in Zambia and other developing countries, education was one of the means of empowering people to take control of their lives, and it was a weapon used to overcome poverty especially among the vulnerable members of society such as people with special needs. School was further cited as one of the places that promote community cohesion especially if it does not discriminate against some members of society.

Apart from that, the government officials and three of six teachers confirmed that funding to the education institutions was inadequate to effectively run most inclusive schools. There is a lot of equipment that is needed to teach both children with special needs and the non-disabled children simultaneously. This results in most schools failing to take on board children with different abilities so as to promote social inclusion and participation in different activities of society.

7.6. Lack of Policy and Legal Frameworks

Respondents from the government and training institutions confirmed that despite the country advocating for inclusive education, there is no legal backing. One of the government officials said:

“Some of the social policies that have been implemented such as free basic education are against the principles of inclusive education because inclusive education demands that learners with disabilities should be given additional support which is not provided in regular schools. Currently, there is no policy specifically focusing on special education in general and inclusive education in particular. The policy in place at the moment is the general education policy.”

So in a nutshell, Zambia does not have social policies that directly require that children with disabilities are educated in the same classes as those without disabilities. Five out of six teachers said that failure to educate children together regardless of their abilities was undermining efforts of mainstreaming issues of disabilities in many societal activities. This was said to be creating social distance between children with disabilities and the non-disabled children.

From the interviews it was stated that people who formulate social policies themselves do not understand issues of social inclusion and inclusive education. The people at the top who are making policies are excluding people (such as social workers and teachers who are on the

ground) who are supposed to be bringing out their opinion and other things. They forget about the implementers, and they bring out the policies that cannot be implemented. The teachers and social workers stated that it was difficult to implement most social policies such as those on education because most policies were not dealing with the main issues on the ground. The teachers cited pronouncements on inclusive education as mere rhetorics. One teacher said:

“You see, we are the people who are on the ground, we know what these disabled children go through, but the government just comes up with policies without consulting us- teachers, our colleagues like the community workers, social workers, and social welfare officers. That is why inclusive education is not working because the government neglects us.” (Teacher)

The respondents (teachers) further said that the country does not have a law to guide the effective inclusion of children with disabilities into the ordinary school systems. The Education Act of 1966 has a mere statement on special education. Inclusive education was not one of the policies at that time. Inclusive education has not been reflected in the Education Act as it is. However, there are some pieces of legislation that supports provisional special education in Zambia. One of those is the Disabilities Act, which supports the provision of inclusive education, and people’s inclusion, and education for children with disabilities, although it does not really have a specific provision on inclusive education.

Furthermore, the teachers and government officials reported that the 1996 constitution, does not recognize the right to education as a fundamental human right, it is merely a directive policy principle in the Zambian constitution, it is rumbled together with other rights, like the right to health. No part of the constitution has direct principle on the right to education that can be justified in the courts of law-- so it cannot enforced as a right.

“What this means is that if children with disabilities are not included in the ordinary classroom, they cannot sue the government. So this is one of the greatest challenges to inclusion of children with disabilities in the mainstream school systems. This is as a serious hindrance to social inclusion of such children in the mainstream society as schools played an important role in integrating people in society.” (A lecturer at a training institution)

The respondents from University of Zambia and Zambia Institute of Special Education stated that Zambia is trying to adopt policies from other countries. They further said that the country has signed and ratified a number of international instruments, one of them is the Covenant on

the Rights of the Child that Zambia ratified in 1995, this one provides for the right to education, its one of those international obligations that Zambia can draw inspiration from. The country also signed the African Charter on People's Rights and the Southern African Development Community's protocol, which also has a provision on education. So, these are some of the legal frameworks from which Zambia can draw inspiration to promote inclusion of people with disabilities in the education sector.

On the other hand, the government officers said that international obligations do not have a direct application in the country unless they have been domesticated. For example, the Salamanca Statement has not been domesticated. It is one of the guiding principles, when it comes to including children with disabilities in the ordinary schools. Zambia undertakes to take a progressive approach in achieving these international obligations, depending on the availability of resources in the country. Basically the country has no codified legislation providing for inclusive education.

7.7. Barriers to Accessing Services

The participants also spoke of the challenges of infrastructure and resources. When it comes to issues of accessibility that is, infrastructure, most of the buildings are not user-friendly to people with disabilities. One of the officials from an organization representing people with disabilities said;

“These schools were built a long time ago so they may not have been aware of the changes that are needed now. Hence infrastructure is not good enough to meet the needs of people with disabilities. The world is also changing so there is a problem of adjusting to technology, so people are not trained to help people such as those who are blind. So those are some of the challenges that we people with disabilities are going through.”

Apart from that distance from homes to most social services especially in rural areas poses a great challenge to persons with disabilities. Parents and teachers said that some schools are as far as up to 20km away from home. They further said that most pupils stay very far away from schools, so they are affected; some parents do not take these children (with disabilities) to school. At times pupils can stay for a term or two not reporting to school. One parent stated this about his son:

“He is not studying at the moment because the school is very far away, and there's no one to take him there. So, it's because of the distance that he stopped school. So, because of the

distance, and since at times he behaves like a mad person, it would be very difficult for his classmates to bring him home if need be.” (Parent of a child with a disability)

The above observations by a parent were supported by one of the teachers who participated in the study.

“So distance from homes to schools undermines the efforts aimed at promoting inclusive education. Most parents with students with disabilities- especially those with intellectual disabilities find it difficult to take their children to school especially when schools are very far away from their homes especially in rural areas.” (Teacher at an inclusive school)

As for those in urban areas, their challenge was mainly in the area of transportation. 20 out of 33 participants said that public vehicles have no provision to cater for, especially, the physically disabled- those with wheel chairs. Some cannot access certain social services because they cannot find suitable transport that can cater for their needs. The respondents said that that hindered some persons with disabilities from accessing some social services.

A great majority of (5 out of 7) of head teachers reported that some of the teachers who are teaching in inclusive classes do not necessarily have a background in special education, so this compromise on the quality they offer to students. One head teacher reported:

“The system aligns itself too much to special education. The training institutions train teachers in special education who may not understand partial and full inclusive education.”

The teachers further said that as a result, some children were not included in the mainstream classes. This, they said was also hindering some children with disabilities from integrating with their peers without disabilities.

The respondents from University of Zambia (UNZA) and Zambia Institute of Special Education (ZAMISE) said that some of the students who graduate from the UNZA and ZAMISE do not teach they take up other careers, because they are not compelled to teach. So the staffing levels at the moment are inadequate to meet the ever-increasing demand of inclusive education services. Then the teacher-pupil ratio is high and that puts a lot of pressure on teachers. In most cases children with disabilities who are included in ordinary classes go unnoticed. The situation is worse in rural areas where the teacher-student ratio is too high.

Besides the general concern about accessing services, participants from government and the organization representing people with disabilities reported other barriers to meeting inclusive education goals as training; teachers are not trained on how they can help children with disabilities get integrated in the mainstream society. They said that teachers and social welfare officer were among the cadres who could help children with disabilities accept their status and realize that they could compete favorably with their peers without disabilities in many spheres of life as education because these were the cadres who often come into contact with children with disabilities in their work.

Then the teaching and learning materials are inadequate in most cases. A significant majority of (12 out of 13) teachers and head teachers agreed that there are also challenges when it comes to examination, according to the participants- teachers particularly, the education system in Zambia has not provided for transcribers who can transcribe things to braille. There is also the issue of marking the scripts for the blind, they have their own language, so when they write, they write in their own language so a marker may not know the language, so it is a challenge.

7.8 Human and Capital Resources

In terms of human resources, the government has embarked on recruiting qualified personnel to overcome the shortage. Participants from the government stated that the interests of the Ministry of Education (MoE) and Ministry of Community Development and Social Services (MCDSS) are to foster the social inclusion of persons with disabilities in the mainstream society. Apart from that, the government's aim is to improve the quality of the education for all learners through decentralization of services from the ministry headquarters to the provinces and eventually to the districts. Through education, persons with disabilities would then be in a position to take control of their lives. The participants from the government departments further stated that MoE has put a lot of things in place. Among them structures; the government has employed some curriculum specialists that have been tasked to come up with curriculum that is good for all learners in an inclusive set up.

Further administrators have been employed specifically to oversee the inclusion of persons with disabilities in the education system. For example the participants from government and University of Zambia (UNZA) said:

“Various offices have been put in place, like up to 2003, there were only four (4) officers specialized in special education in top management positions in the Ministry of Education, but at the moment they are more than fifty (50). There is one standard officer per two (2) districts; there are seventy two (72) districts in Zambia so they are thirty six (36) standard officers in the country. Then at provincial level there is one standard education officer, at the ministry headquarters they are four (4) officers responsible for promoting inclusive education. In total there are fifty one (51) officers in top management employed specifically to oversee how students with disabilities are being integrated in the mainstream schools.”

The social workers also said that Ministry Community Development and Social Services (MCDSS) has been recruiting more social workers and social welfare officers who are charged with the responsibility of ensuring that vulnerable members of society such as persons with disabilities are provided with social safety nets and have access to social services. The officers under the MCDSS also conduct assessments to ascertain the needs of vulnerable members of society, and on the basis of individual needs services are provided on an equal or on equity basis. MCDSS provides scholarships to students in need such as orphans and persons with disabilities. One of the social workers interviewed reported:

“The social welfare department helps in ensuring that children such as the disabled have equal access to education just as their peers. So we make sure that they are educated in the same schools as their friends. You know it is through education that we can help them come out of poverty// actually the disabled are among the poorest in Zambia. So we encourage them to attend ordinary schools. Moreover it is also through being in same classes with their peers without disabilities that they get integrated and feel that they are part and parcel of the larger society.”

7.9. Capacity Building

The respondent (teacher) said that in order to counter the challenge of high teacher-student ratio, schools such as Bauleni Street Kids Centre started a programme where they train local people who are eventually employed so as to assist in taking care of children especially those with intellectual disabilities. A teacher at the centre said:

“Because of this initiative, children with intellectual disabilities especially those with mild intellectual special needs have also been included in the ordinary classes. So this presents

a good opportunity for such children to learn in an inclusive environment. The school also enrolls children with severe intellectual special needs- however; such children are mainly taught different social skills for daily living; so that in future they can live independently.”

The teacher from Bauleni Street Kids centre further stated that through the community based intervention, teachers go in the community and they identify children with severe intellectual special needs within the age group of three to six years, then they initiate early intervention programmes where these children are placed in special units so that they can progress from severe to mild intellectual disabilities- and later they are moved from the special unit to the mainstream classes.

“The programme has worked out well so far, and more and more children are being included in the mainstream classes. Through such initiatives children with intellectual special needs are able to participate in many social events that the school organizes.”
(Teacher at Bauleni Street Kids Centre)

Another programme that Bauleni Street Kids Centre is undertaking to increase the opportunities of children with disabilities is the skills training programme. According to the teachers, the school realized that most children with intellectual special needs were unable to pass examinations and proceed to the eighth grade, so they started a skills training programme. The programme enables those that do not make it to a higher grade to have an alternative of going into skills programme. The school also links those who graduate from the programme to potential employers, and some have been employed through such trainings and connections.

One of the social workers interviewed also mentioned the Bauleni School programme. The respondent said that that skills training have enabled some people with disabilities to be self employed. The respondent emphasized that the goal was to enable them become productive members of society, and to contribute to social development within their communities and in the country as a whole.

7.10. Social Networks

Social networks in this study meant the family, the community and friends.

The teachers and head teachers confirmed that they had started programmes that were meant to change the negative attitudes of students without disabilities towards their peers with

disabilities. One such programme is at Bauleni Street Kids Centre. The teacher at the school said:

“Child to Child Education is a programme whereby a child without a disability would help a child with a disability. The children are taught right from the beginning how they can help their peers who have disabilities such as fits. And this has enabled the children not to shun children with disabilities.”

The above sentiments were echoed by one of the social workers who said that they carry out programmes aimed at sensitizing students against discriminating and stigmatizing people with disabilities.

Other than that, Bauleni School also formed a Sign Language Club. All pupils are free to join the club and learn sign language, and they learn to communicate with those who have hearing impairments. So that has meant that all the students have been able to understand that all students with special needs are part and parcel of the school and the society at large. Students both with and without disabilities do a lot of programmes together, like during assemblies, there is always a sign language interpreter (by a student). This fosters social inclusion and cohesion among the students, and it has also helped in overcoming stigma and discrimination among students such that students with disabilities are now part and parcel of the mainstream society. A parent of a child with mild intellectual disability said:

“Bauleni Centre and the staff there is very nice and helpful// my child is now able to do many things on his own. Apart from that a lot of his peers from school come to visit him. I really want him to get better.”

The social workers, two teachers and three head teachers said that many schools and Zambia Agency for Persons with Disability (ZAPD) have started Community Based Rehabilitation Programmes aimed at sensitizing the community on the need to change their negative attitudes, and the need to encourage social inclusion and educate children together regardless of their abilities. At Bauleni Street Kids Centre, the programme is called Home Based Rehabilitation Programme. According to one of the social worker:

“Volunteers and home based assistants are trained in order to help change communities’ attitudes towards people with disabilities. The volunteers, community workers, social workers and teachers identify the negative attitudes, and then they sensitize the community on the need to change their attitudes, and the importance of children to play and learn

together regardless of their abilities. This has resulted in a significant change of negative attitudes over the years.”

8.0. DISCUSSION

8.1. Discussion of Methods

The study relied on both primary and secondary data in understanding the opportunities and challenges of social inclusion of children with disabilities in education. The findings arising from the two methods used in collecting data had both merits and demerits.

8.1.1. Strengths

The findings of the study were both reliable and valid in that many comparisons (triangulation) between the collected data were done. Triangulation involved both methodological and source triangulation. As regards methodological, data collected from both primary and secondary sources were cross-checked to ensure consistency (Tappan, 2011; Polit & Beck, 2010). Apart from that, data was collected from different respondents and key informants; this helped in comparing the responses from different participants (source triangulation).

Further both individual and focus group interviews were held. This method of data collection helped in obtaining convincing and grounded knowledge and understanding as government officials, teachers, social workers, care givers (parents) and students were involved in the study and they gave their different perspectives on the opportunities and challenges for people with disabilities in societal activities such as education (Tappen, 2011). Apart from that, through interviews, I was able to probe the feelings of the respondents, and the ways of their thinking and perception of disabilities and inclusive education. This increased the trustworthiness of my findings (Boswell & Cannon, 2011). In addition to that, the trustworthiness and dependability of the data was enhanced in that paper was peer reviewed by both my tutor and external peer reviewers (who were a native English speaker and lecturer in disability studies).

Furthermore, the findings were valid in the sense that the responses from the participants related to the general aim of the study. Regarding the secondary data, it was collected from

reliable sources such as the government official websites, United Nations website and the databases at Linnaeus University. The findings were later interpreted in relation to other studies on issues of disabilities, social inclusion and inclusive education (Mikkelsen, 2005; Tappen, 2011).

8.1.2. Weaknesses

The weaknesses may have mainly been with the secondary data sources. The major ones could be that the statistics on disabilities in Zambia may be outdated; the latest statistics for 2010 had not yet been officially released so the statistics reflected in the paper are those of 2008. Suffice to say, the author had no control on statistics but to rely on the ones available on government website and official documents. Other than that, the secondary sources were collected by other people who may have had their own interests, different from that of the author of this paper; so depending on their interests, the data collected may have been tailored to suit their desires, and not reflecting what was on the ground. Thus the data may have lost its richness. Secondary data was also restrictive in nature in the sense that there was no way of probing further on what was already presented in the documents. On the other hand, the data collected through interviews may have had its own weaknesses, for example, it is possible that the participants in the study may have been saying things they regarded as socially acceptable, and not in fact what they believed (Boswell & Cannon, 2011).

8.2. Discussion of Results

This study was set to investigate the opportunities and challenges for children with disabilities within the context of inclusive education. This research uncovered important findings concerning traditional beliefs and attitudes, and religious beliefs regarding disability. The study further revealed how financial constraints and distance between schools and homes poses a challenge to the inclusion of children with disabilities in the mainstream school system. Furthermore, the efforts of fostering inclusive education are hampered by the high teacher-student ratio and lack of legal and policy frameworks.

However, despite some challenges, there has also been achievements such as the presence of standard officers who specifically oversee the inclusion of children with disabilities in the ordinary school system, Community Based Rehabilitation Programme (CBR) is been implemented to try and change people's negative perceptions towards people with disabilities,

and social workers are playing a leading role in community education on the need to have children educated together regardless of their abilities.

In the light of the above, the findings below are discussed in relation to other studies done and social inclusion theoretical model.

Traditional Beliefs and Attitudes

In this study it was discovered that there was a strong connection between perception of disability and traditional beliefs and attitudes. This study's findings showed that the strong negative attitudes towards people with disabilities poses a great challenge to their full inclusion and participation in social activities such mainstreaming them in the regular school system. A strong belief that people with disabilities cannot perform most social responsibilities was uncovered in this study. Apart from that, disability was closely associated with embarrassment in the family. The feeling of embarrassment and shame by some families can be linked to lack of knowledge about the causes of disability. Three of the parents interviewed did not know why their child had a disability. Such beliefs and interpretation of disability have important implications, not only on how society perceive disability but also the way people with disabilities perceive themselves; that it can lead to discrimination and stigmatization by society on one hand, and on the other it can lead to feelings of hopelessness on the part of people with disabilities.

The social inclusion theoretical model used in this study validates the above findings. According to the Social Inclusion theoretical model, social exclusion involves looking at various factors that perpetuate the exclusion of people from the mainstream society. These factors include among others attitudes, processes and structures- these create segregation and exclusion of certain categories of people from the mainstream society. Negative attitudes thus form the core of exclusion (Bigby & Frawley, 2010). The theoretical model points to the fact that attitudes can hinder or foster the inclusion of people in various social activities. As much as people of different abilities have coexisted in all society, the extent to which they are excluded or integrated in community activities is largely determined by the dominant value perceptions of their differences. In line with the findings of this study, negative attitudes and beliefs hinder the inclusion and participation of persons with disabilities from various social activities. Within the context of inclusive education, negative attitudes and beliefs are a barrier to the inclusion of children with disabilities in the ordinary school system.

The findings of my study are concurrent with the Bedini's (2000), whose study revealed that the major factors that were responsible for the negative attitudes towards people with disabilities were traditional beliefs. This resulted in the people with disabilities becoming helpless, and accepting their situation of being stereotyped by the mainstream society. My findings are also similar to that of a study done by Edwardraj et al (2010) on society's perceptions of intellectual disability in India. Their findings were that negative attitudes and beliefs among the mainstream society were responsible for stereotyping and exclusion of people with disabilities from societal activities.

Religious Beliefs and Disability

This study further discovered that there was a strong link between religious beliefs and the way people perceived disability, suggesting that disability was perceived from a spiritual perspective. A majority of parents who participated in the study revealed that they had faith in God, while others perceived disability as a result of fate. The study further found that there was a strong belief among people that disability was as a result of cursing from the supernatural powers. One participant said that even God rejected disabled animal sacrifices, an indication that people with disabilities are always at the margins of society. Such views have a strong influence on how people perceive the disabilities. Furthermore, the study revealed that some children with disabilities were discriminated and stigmatized by their peers at some schools because of the belief that disability is due to cursing. Findings from this study thus provide a framework from which to consider how these negative perceptions society has on people with disabilities may have an impact on the kind of schools parents seek for their children with disabilities.

The above points relate to the social inclusion theoretical model. According to this model, exclusion from social activities can be due to the social structures and processes in society. In this context, social structures can be the school environment. The hostile environment at school can seriously hamper the efforts of integrating students with disabilities in the mainstream school system. Presence alone is not sufficient enough to warrant inclusion and participation in social activities in society (Bigby and Frawley, 2010). Thus the tendency by some students to look down upon their peers with disabilities reflects the medical model. This model locates the disability within a person with special needs- it individualizes the

‘problem’, and does not take social construction of disability into consideration. Thus this results in exclusion of people with disabilities in social activities.

Further, McCormick et al (2011) argues that from the social inclusion theoretical perspectives, being excluded from social networks impacts negatively on the physical and mental health of the victim. In validating the findings of this study within the framework of social inclusion as articulated by McCormick et al, my study revealed that the children with disabilities who were isolated by their able bodied peers at school on the pretext that they were outcasts in society (because disabilities were as a result of cursing), experienced emotional pain-- which had the potential to damage them- both physically and mentally.

A similar study done by Cambra and Silvestre (2003), and Odom (2002) using the theory of mere exposure (the theory states that continuous exposure to something leads to change of attitudes towards it) collaborated with the findings of my study. Cambra and Silvestre (2003), and Odom (2002) studies revealed that despite being in the same classroom with children with disabilities, and having opportunities to mingle, the able bodied children’s attitudes towards their peers with disabilities remained negative. This was mainly attributed to their strong held religious beliefs that disability was as a result of cursing.

The role of religion in disability and the will of God were also revealed in a study done by Kinebanian et al (2010) in Tibet. The study was on the families’ views on disability. The findings revealed that people’s views of disability were influenced by the religious (Karma) beliefs that an individual is born to undertake the consequences of his/her previous life. Further, Edwardraj et al’s (2010) study also discovered the presence of different models of disability drawing from religious and sociocultural factors. The study discovered that disability is usually blamed on curse from the supernatural powers. The findings in these other studies back up the findings of my own study.

Financial Constraints

According to social inclusion model, exclusion results in the vulnerable members of society being denied equal opportunities and access to social services. The major factors that predispose marginalized members of society include their personal circumstances and wider family indicators that might call a need to increased support (Gates, 2007). In line with the above social inclusion theoretical model, personal circumstances within the context of this study are disabilities that people have while family indicators are financial capabilities of a

family. The findings of this study discovered that poverty afflicts many families in Zambia, and this makes it difficult for most of them to have all their children enrolled in school especially when fees have to be paid. In such circumstances, the study revealed that most families prefer having non-disabled children in school than the disabled.

Most parents interviewed said that it was expensive to have children with disabilities in school because besides the school requisites, they need special equipment such as wheel chairs for the physically disabled. Besides, there is a belief that able-bodied people are more likely to be economically independent than their peers with disabilities. The lack of education among people with disabilities creates a vicious cycle as lack of education is closely tied to poverty, and so does poverty lead to lack of education in most developing countries. Hence, most people with disabilities are trapped in a culture of poverty, and they remain the most vulnerable members of society. Thus the social inclusion theoretical model is concurrent with the findings of my own study. This study revealed that personal circumstances and family factors are some of the determining factors on whether a child is integrated or excluded in the education system-- as the resources of a family determine whether a child is enrolled in school or not.

Social Networks

The findings from the studies done by Appoloni et al, (1978 cited by Ronning & Nabuzoka, 1993) in New Zealand, United States and United Kingdom showed that the proximity between children with disabilities and those without, did not result in increased social interaction and integration between the two groups. These findings differ from the findings of my study. A similar programme at Bauleni Street Kids Centre called Child-to-Child Education Programme where children without disabilities were helping those with disabilities- resulted in increased interaction between the two groups. This led to acceptance and social inclusion among the children, and it has also helped in overcoming stigma and discrimination among students such that students with disabilities are now part and parcel of the mainstream school system. The results of my study collaborate with the findings of the studies done by Tavares (2011) in Canada whose findings from an evaluation of the Kids are Kids programme revealed that the programme had a positive impact in enhancing social interaction between able bodied children and their peers with disabilities.

Serpell's (1998) study in Africa using the "social-friend" approach too produced the similar findings as my study. His findings were that social networks played an important role in

fostering positive academic and social functioning among children with disabilities. Further, studies in Pakistani done by Hayat (1994), and Noor and Khokhar (2002) on the attitudes of children with disabilities towards mainstreaming them into ordinary school system revealed that the students were interested in learning in the same environment with their peers without disabilities. The students also appreciated the attitudes of their school authorities and fellow students' attitude towards them. A similar study done in the United States in New York at Oswego by Clark (2008:1) showed that sixty seven (67%) percent of the respondents were happy with the reception from their peers (without disabilities).

The social inclusion theoretical model validates the findings of my study; according to Ura et al (2011) the social inclusion asserts that human beings by nature have a strong desire to form and maintain social networks; if excluded from social activities- it ignites psychological pain. Social exclusion can be said to be a form of relational aggression because of the damage caused to the social relationships among people. However, when the opposite happens, integration results in pleasure. In collaborating with the social inclusion theoretical model, the findings of my study revealed that children who felt accepted by their peers performed better at school. One such example was that of one of the parents who stated that his child's academic performance was outstanding, and that he appreciated that his son was accepted by his peers at school. Thus the children who felt accepted experienced pleasure.

Policy and Legal Frameworks

The social inclusion theoretical model states that effective inclusion is fostered or hampered by the presence or absence of structures. The structures can be in form of policies or legal framework. According to this model, inclusion in social activities of the disadvantaged group such as people with disabilities can best be promoted by the presence of good social policies and legislative frameworks (de Haan, 1998). When applied to the inclusion and participation of children with disabilities in the mainstream school system, there is need to have in place legal and policy frameworks focusing on the promotion of such programmes. The findings of this study revealed that Zambia does not have a policy specifically designed to foster the inclusion of children with disabilities in the regular school system. The lack of such policies has also resulted in difficulties in integrating children with disabilities in the mainstream society. This is because schools play an important role in integrating people in the mainstream society. However, Zambia is also making efforts by training and recruiting more teachers and officials to spearhead the inclusion of children with disabilities in ordinary schools.

Sensitization programmes

There are efforts to overcome the many challenges that children with disabilities face. Various measures have been put in place- measures such as the Community Based Rehabilitation Programme (CBR). The results of this study showed that the CBR seems to be working well in sensitizing the community on the need not to be discriminating people with disabilities. This will foster the inclusion of people with disabilities in social activities. As the social workers in the study said, they have been carrying out community sensitization programmes to ensure that children with disabilities are socially included in the community activities. These findings are validated by the social inclusion theoretical model which states that inclusion occurs at two levels; when people, regardless of their abilities are able to use community facilities without being discriminated, and can participate in social organizations (Bigby & Frawley, 2010). Thus one way of ensuring that people with disabilities are integrated into the mainstream school system is to ensure that they have access to facilities regardless of their abilities. There is therefore need to have collective social values that will enhance societal relations.

Future Research

This study looked at the opportunities and challenges for children with disabilities in inclusive school system. However, during data collection, it came out clear that mothers raising children with intellectual disabilities face a lot of challenges. Reviewed literature indicated that there has not been any research done on the perspectives of mothers raising a child with intellectual disabilities in Zambia. This therefore, calls for a need to carry out research on the perceptions of mothers on raising a child with intellectual special needs; owing to the negative perceptions that society has towards people with disabilities- especially those with intellectual disabilities.

9.0. CONCLUSION

There is still very little known about disability situation in Zambia, and this study has tried to fill that gap somewhat, particularly where the challenges of inclusive education are concerned. What is known is that people with disabilities struggle to gain access to appropriate health and educational services, and that they particularly struggle to cope with the negative societal attitudes that still surround disability. Hence, people with disabilities are often on the sidelines of life, even in the education sector. The situation is improving for Zambians with disabilities, but a lot still needs to be done.

To promote educational inclusion in Zambia, it is vital that students with and without disabilities have on-going chances to interact with, and learn from, each other. This is the only way that stereotypes and ill-informed misconceptions about disabilities can be dismantled. Having appropriate information is not enough; it takes seeing the humanity and inherent worth of the individual with disabilities—seeing that he/she has unique ideas and contributions to make—for negative attitudes to change. This is as true for non-disabled students as it is for teachers. The determinants of children's attitudes, not to mention those factors that make for a welcoming and accepting school environment, are crucial if social inclusion is to be a reality in Zambia. This researcher could not agree more.

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11.0 APPENDICES

Appendix 1: Research Time Frame

The time plan activities for the whole research project are presented in the table below. The boxes in grey signify the period when an activity was done.

	Task	Jan	Feb	March	April	May	June
1	Desk study- Review of Literature						
2	Formulation of questionnaires& pre-testing						
3	Data collection (fieldwork in Zambia)						
4	Supervision (By Barbro Blomberg)						
5	Data Analysis						
6	Thesis Writing						
7	Presentation of Findings						



Letter of Introduction

Dear Sir/Madam,

This letter serves to introduce Mr. Masauso Chirwa who is a Masters student in the School of Social Work at Linnaeus University. He is undertaking a study as part of his thesis in Masters Degree on the topic of Inclusive Education and the opportunities and challenges faced by pupils with disabilities.

He would be very grateful if you would volunteer to participate in this study, by granting an interview that covers certain aspects of this topic. All information you provide is considered completely confidential. You may decide to withdraw from this study at any time by advising the interviewer or to decline to answer any of the interview questions if you so wish.

Since he intends to make an audio recording of the interview, he will seek your consent, on the attached form, to record the interview, to use the recording or a transcription in preparing the thesis, on condition that your name or identity is not reveal unless with your permission.

Any questions you may have concerning this study, please contact me by telephone on +46470708324 or mobile +46732708324, or by email (Barbro.blomberg@lnu.se).

Thanking you in advance.

Yours sincerely

A/Prof Barbro Blomberg, PhD

Senior Lecturer

Director of Programmes

School of Social Work



Research Participation Consent Form

My name is Masauso Chirwa, and I am doing my Masters thesis at Linnaeus University (Växjö Sweden). I am doing a study on inclusive education and the opportunities and challenges that exist for children with disabilities.

I would like to interview you to learn about your views on inclusive education and disability. During our interview, I will ask you some questions about your past experiences and your ideas about inclusive education and disability. Participation in this study is voluntary so you may decline to answer any of the interview questions if you so wish. If you would like to stop the interview at any time, please tell me and we will end our interview immediately.

With your permission, the interview will be tape recorded to facilitate collection of information, and later transcribed for analysis. Please note that all recordings will be destroyed upon transcription and prior to (and during) transcription, the recordings will be stored in a secure place. There are no risks to you in this study. Your name, or any other personal identifying information, will not appear in the final paper resulting from this study if you so choose. This thesis will likely be published. If you would like a copy of the study, please provide me with your address and I will send you a copy in the future.

If you have any questions about this study, please contact my supervisor, A/Professor Barbro Blomberg (PhD) (cell: +46 732708324, landline: +46 470 708324 or email her at barbro.blomberg@lnu.se).

Thank you for your consideration. I will give you a copy of this form to take with you. If you agree to participate in this research project, please sign

I agree to be interviewed for this project. [circle one]:

Yes No

I agree to be audio taped during this interview. [circle one]:

Yes No _____

Participant's signature Date Investigator's signature Date

Participant's name printed Investigator's name printed

Supervisor's signature

Date

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Questionnaires

Structured Interview: Government Ministries/Departments

Specific Question:

A. Institutional framework

1. What are the interests of the ministry/department with respect to children with disabilities?
2. What are the functions of the ministry/department with respect to inclusive education in Zambia?
3. Does the ministry receive instructions from any other authority with respect to issues of children with learning disabilities? [Can other departments overrule the ministry's decisions?] Please explain.

B. Legal framework

1. Under the provision of which Law/Act, does the ministry/department get its authority especially with regard to disability and social inclusion?
2. How does the ministry take legal action against a violation of its agreement (i.e., the violation of the rights of a child, especially one with a disability)?
3. Has the government signed and ratified any international treaties regarding the rights to education of a child with disabilities? What are those conventions?
4. What have been the achievements with regards to inclusion of children with disabilities in the mainstream schools?
5. What would you say have been the challenges that the ministry/department faces in ensuring that children with disabilities are mainstreamed into the ordinary schools? What is being done to overcome such challenges?

C. Policy

1. Could you please describe the policies that promote and support the rights of children with disabilities?
2. Are current policies on the promotion of social inclusion of people with disabilities in line with international treaties/conventions? Please explain.

D. Stakeholder participation

1. Could you please explain how you have been collaborating with other stakeholders in the promotion of inclusion in the education sector?

2. How have other stakeholders been participating in the decisions made especially with regard to social inclusion in the education sector?

Interview with schools

General questions:

1. How many pupils with disabilities does your school have?
2. Are there teachers specifically trained to handle pupils with disabilities?
3. What is the teacher-pupil ratio at your school?
4. How accessible are the facilities at your school to pupils with disabilities?

Specific Questions:

1. Are there challenges/barriers that your school faces with regards to social inclusion of children with disabilities especially in social activities? If so, what are they?
2. What measures has your school put in place to overcome those challenges?
3. Why inclusive education is important when compared to the ordinary school system?
4. How would you describe the opportunities for those with disabilities in comparison to others when it comes to participation in social activities?
5. How would you describe the community's response to inclusion and participation of children with disabilities in social events that your school organizes?
6. Could you please describe the community's perception of pupils with disabilities?

Institutional framework

- 1 What according to you are the major constrains within the various departments in the education sector especially with regard to inclusive education?

Legal framework

- 1 Could you please describe the adequacy of provisions within the legal system to safeguard the interests of children with disabilities, and to promote their inclusion in education in Zambia?

Policy and Stakeholder participation

- 1 What is the major education policy that promotes social inclusion for children with disabilities especially in education?
- 2 What are the major challenges/barriers for stakeholder participation in the promotion of social inclusion at the community level?
- 3 What are the achievements that exist at the community level with regards to promoting inclusive education?

Interview: Zambia Agency for People with disabilities (ZAPD)

General Question:

1. What are the functions of ZAPD as an association and how do you operate?
2. What is your interest in education?

A. Institutional framework

How would describe the coordination amongst various institutions in promotion of social inclusion for children with disabilities? Can you identify any problems? Any achievements?

B. Legal framework

1. Under the provision of which Law/ Act, does ZAPD get its authority?
2. What kind of action can ZAPD take up against the violation of the rights to education for children with disabilities?

C. Policy

3. Does ZAPD encounter conflicting interests from other departments/ ministries with respect to the rights of people with disabilities?

D. Inclusive Education

1. Could you please tell me the official position of your organization on the current inclusion and participation in various welfare provisions such as education, for people with disabilities?
2. In what areas to you collaborate with the MoE?

E. Stakeholder participation

1. How does ZAPD coordinate with some other agencies in its functions regarding promotion of inclusive education?

2. How would you describe representation of people with disabilities in promoting and fostering social inclusion?

Other Questions

1. Could you name a few challenges encountered by ZAPD in its functions with respect to representing the interests of people with disabilities?
2. How would you describe the current set up of the education system regards to the international conventions on the rights of people with disabilities?
3. In your opinion what should be done to the current education system? If not why?

Interview: Person with Disabilities

1. Are you studying? If so which school do you go to, and in what grade?
2. How would describe your performance at school relative to others?
3. How has been the reception from your peers?
4. How would describe the reception you receives from the school authorities?
5. What are some of the barriers/challenges that you face at school?
6. What would you describe as some of the advantages that are there being in the mainstream class?
7. How has been the community response towards you and the people with disabilities in general?
8. How would describe your family's response towards you?
9. Could you please explain the kind social activities that you participate in?
10. What do you think should be done to foster the participation of people with disabilities in community activities?

Interview: Parents/Care givers

1. Is your child at school? If so which school does s/he go to, and in what grade?
2. How would describe his performance at school?
3. How has been the reception from the peers?
4. How would describe the support the child receives from your family?
5. What are some of the barriers/challenges that the child faces at school?
6. What would you describe as some of the advantages that are there for having your child in the mainstream class?
7. Could you please explain what it means to raising a child with disabilities?
8. How has been the community response towards the needs of the child, and the people with disabilities in general?