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GRASSROOTS COMMUNITY-BASED INCLUSIVE EDUCATION

Exploring educational prospects for young people with disabilities in the post-conflict Rwandan communities

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Inclusive education has increasingly dominated the international and national policy agendas since the Salamanca statement and its plan of action (UNESCO, 1994). The Rwandan education reform has seen a growing interest in this phenomenon since late 1990s too. This study looks into the conventional perspective of inclusive education and its relationship with the average community lives of Rwandan disabled children. Through three interrelated questions, it explores a wide spectrum of the Rwandan social context in search of practical implications to inclusion. It investigates among other things, the meaning of inclusion to an average Rwandan at the grassroots community level, its applicability within an educational system that has been greatly affected by a history of social and economic adversities.

Through the research experiences, it is made obvious that the study perceives fundamental values of inclusion as crucial inputs required by the Rwandan education, but its pessimism about the practicability within the Rwandan socio-political context, is equally made apparent. Locally-mediated limitations, the global forces at play are discussed, and alternative perspectives are looked into. These issues are explored in four major parts of this study: The first part discusses the background context and the research inspirations; the second part presents the methodological approaches; the third part presents the findings, and the fourth part discusses the study findings, the background experiences, while highlighting plausible challenges and outlets for inclusion.

The first part of the study covers a wide spectrum of the current Rwandan context. It traces the researcher's background in inclusive education practice, and highlights his inspirations against a background of enormous social and professional challenges, typical of the post-conflict Rwandan society. It explores the various socio-economic aspects and their impact to the country's education, partly questioning their limiting influences to the disabled children's access, and partly expounding on the perceived potentials and opportunities for their inclusion.

The second part presents the envisaged research approach, highlighting qualitative research as the appropriate means by which realities in the Rwandan communities would be best approximated, and the *'emic'* meanings of the inclusive perspectives held locally would be best interpreted (Schostak, 2002: 9). Inspired by Cohen et al. (2003: 75), Goetz and LeCompte (1984: 68) among others, the main research question was split into three units of inquiry, as a means of developing both limits and focus of the inquiry, and establishing a data collection or analyses procedures that fit the complex social phenomena. The study takes the view that the analytic units that result from the three-levelled question design would not only guide the research process, but would also be used to reduce the raw data into manageable units, leading to an aggregate interpretation or appropriate responses to the major question.

The third part comprises of the research findings or the responses to the three levelled questions. It portrays the Rwandan social dynamics, in which the grassroots community or family surroundings are pivotal to the research interests. The researcher's conscious analysis of the local community perspective stands out as the dominant feature of this phase, in which the findings reflect the link between the disabled children as members of the complex social context, and the emerging potentials and setbacks of their access to local education.

The fourth part discusses the outcomes of the research, within which the many limitations not only to inclusion are highlighted, but also, the practical educational measures that are beneficial to inclusive schooling in circumstances similar to those in Rwandan communities emerge as illustrative features of the discussion. Through similar educational and socio-economic experiences in different African environments, warnings about the looming challenges are sounded, a way forward is discussed, and recommendations are underlined.

Table of content

Acknowledgement 7
Alphabetical List Of Acronyms And Abbreviations 8
The Theoretical Context And The Study Background 9
Introduction 10
Chapter 1 Background Of The Research 11
1.1 The Research Inspirations And Background 11
1.2 Young People With Disabilities In Rwandan Communities 13
1.3 The Rwandan Grassroots Community And Its Significance 17
1.4 Disability in national priorities 22
Chapter 2 The Concept Of Inclusion And Its Context 28
2.1 Defining Inclusion Concept And Exploring Its Context 28
2.2 The Rwandan Perception Of Inclusion 30
2.3 The Socio-Political Background Of Inclusion Concept In Rwanda 32
Chapter 3 Contentious Issues About Inclusion In Rwanda 34
3.1. Questioning Citizenship And Inclusion In Rwanda 34
3. 2 Inclusion In Rwanda Vis-À-Vis The Global Educational Trends 36
3.3 Inclusion In Situations Of Extreme Adversity 38
3.4 Inclusive Education And Rwandan Development 40
3.5 Considerations About Inclusive Practice And Context 47
Chapter 4 Opportunities And Threats To Inclusion In Rwanda 46
4.1 Perceived Pathways For Inclusive Opportunities 46
4.2 Perceived Threats To Inclusive Opportunities 52
Conclusion 59
Research Methodology 64
Chapter 5 The Research Paradigm 68
5.1 The Research Question 68
5.2 The Research Approach 73
5.3 Data Collection Process 82
Chapter 6 Practical Considerations 90
6.1 Research Practice And Tools 90
6.2 The Targeted Participants In The Study 99
6.3 Sites For The Study 102
6.4 Data Collection Schedule 103
6.5 Data Recording 104
6.6 The Analysis Process 108
6. 7 Ethical Issues 114
Conclusion 116
Data Analysis And Findings 118
Introduction 120
Chapter 7 The Situation Of The Disabled Children In Communities 122
7.1 Descriptions Of The Children With Disabilities 122
7.1 Perceptions About Children With Disabilities 132
7.2 Some Findings Related To The Local Perception On Disabilities 132
7.3 The Situation Of The Disabled Children 142
Chapter 8 Outcomes Of The Grassroots Community Survey 148
8.1 Opportunities And Barriers For The Disabled Children 148
8.2 Barriers To Including Children With Disabilities 155
8.3 The Community Potentials And Limitations 164
8.4 The Channels Of Services For The Disabled Children 172
Chapter 9 The Socio-Economic And Politica Influences 163
9.1 The Complexity Of The Socio-Economic And Political Influences 163
9.2 The Practice In Local Schools In Situations Of Resource Scarcity 170
9.3 Interpreting The Emerging Voices Of Inclusion 174

Discussions And Recommendations **179**
Introduction 180
Chapter 10 Understanding The Social Context 183
10.1 Interpreting The Rwandan History And The Culture Of Difference 183
10.2 Evolution Of Inclusion In Societies 188
10.3 The Emerging Concept Of Inclusion For The Rwandans Society 189
10.4 The Grassroots Community-Based Inclusion: Some Consideration 192
10.4 The Grassroots Community-Based Inclusion: Some Consideration 192
10.5 Challenges And Opportunities In Schools For All Learners 200
Chapter 11 Pedagogical Considerations 204
11.1 Group Teaching Strategies In An Inclusive Class 204
11.2 Peer Teaching 207
11.3 Co-Operative Learning 209
11.4 Reconsidering The Teacher's Roles In Educational Innovations 211
11.5 Education Leadership And Inclusive Education 212
11.6 Rethinking Inclusion And The Emergent Framework 219
11.7 The Emergent Inclusion Model 224
Conclusion **228**
References 250
Appendices **266**
Appendix A Phos-Nieuwsbrief Inclusief (2004-10-15) 268
Appendix B Disparities In Access And Retention In Education 272
Appendix C Rural Rwandan Communities 274
Appendix D Developments In Primary Education In Rwanda 276
Appendix E Rwandan Education Projections 2006-2010 278
Appendix F Indicateurs Du Systeme D'education 282
Appendix G Field Contact Form 284
Appendix H Field Contact Summary Form 268
Appendix I Example of questionnaire for group interviews for pupils 269
Appendix J Example of questionnires administered to education administrators 271

List of tables

Table 1. Summary of participants and their expected contributions 96
Table 2. The proposed schedule for the research project 98
Table 3. The summary of the data recording plan 100
Table 4. Illustration of codes used 106
Table 5. Record of activities 121
Table 6 Descriptions of the disabled children 124
Table 7. Documented disabled childfren in two schools 136
Table 8. Aspects of disabilities in regular schools 136
Table 9. Estimates of children with disabilities out of school 138
Table 10. Educational difficulties in educating disabled children 147
Table 11. Suggestions from the local educators 149
Table 12. Local educators' explanations about children's access 151
Table 13. Distribution of roles and responsibilities 159
Table 14. The spectrum of factors influencing families and communities 168
Table 15. Reasons why some disabled children are in the school 169
Table 16 Some of the school-based challenges and solutions 174
Table 17. The disabled pupils' recorded performances and interactions 175
Table 18. Opportunities open for some of the disabled children 177

List of Figures

Fig. 1	Poverty Index per Province	19
Fig. 2	The Vulnerable groups of Nyamugali District in Ruhengeri Province	21
Fig. 3	Major causes of impairments, according to DfID	36
Fig. 4.	The key links between development and education	41
Fig. 5.	The vicious cycle of poverty and disability	53
Fig. 6.	The research question in three interlinked research inquiries	67
Fig. 7.	The researcher's itinerary towards the grassroots community research sites	79
Fig. 8.	Map of Rwanda indicating the location of the surveyed field of study	82
Fig. 9.	Criteria for selection of the grassroots communities	84
Fig. 10	Level of use of research instruments	87
Fig. 11.	Comparative characteristics in affluent and disadvantaged families	119
Fig. 12.	The different levels of perceptions and reactions to disabilities	127
Fig. 13.	Basic rights-related needs and factors influencing access	131
Fig. 14.	Three critical stages mapping the development of individual initiatives	143
Fig. 15.	Expressed attitudes about service provisions	154
Fig. 16.	Channels of opportunities for services	165
Fig. 17.	Parallel between political commitments and realities in communities	173
Fig. 18.	The dominant voices of inclusion according to the Rwandan context	179
Fig. 19.	The three pillared support for grassroots community-based inclusion	197
Fig. 20.	Fougeyrollas's model	201
Fig. 21.	Adapted Fougeyrollas's model of intervention	203

Acknowledgement

My journey in education of the disabled Rwandan children has often been interrupted by questions that began with '*why*'. They often demanded to understand *'why'* I have to engage with inclusion of the most vulnerable groups when the country has many other needs that can be addressed with more satisfactory accomplishment; or, *'why'* I have to undertake such a less fulfilling pursuit when there are many avenues in Rwandan education to explore with better rewards. The questions were more often nagging and not necessarily encouraging, and indeed, in societies marked with extreme adversities, and people are made to struggle for scarce resources, the temptations to focus on the most pressing needs often takes over and the demands of the most vulnerable and minority groups appear less significant in the process. It seemed a lonely and difficult journey, marred with discouraging encounters, and I take this opportunity to acknowledge my indebtedness to all those who demonstrated their understanding to my quest and have differently played a supportive role.

I am particularly indebted to my own family. Children need their fathers around them, and wives need their husbands', but my own bravely endured the difficulties of managing without me for the last few years. They all kept their encouraging support rallied to me in an assurance that what I am attempting to achieve is also important for both the family and the general Rwandan society. The support was equally shared in the extended family, and I am especially grateful to my elder brother who has always been generous to me and my family. Though at distance, I felt their warm companionship that kept me through the cold winter chills, lonely days and strict timetables.

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I am particularly grateful to the colleagues in the centre for Disability, Special Needs Education and Child Care. Having a background in a foreign culture can be a source of difficulties for some international students in big foreign Universities, and this may particularly involve asking many unfamiliar questions or attempting to translate one's culture in the new social setting. Not knowing who to run to, how and when to ask in time of urgent need for example, may be cause for stressed relationships and frustration. I strongly believe that my case was positively different, for I was privileged to be part of a centre that is already build on a strong sense of teamwork, and the members were always prepared to make every member feel adhered to the centre and succeed in his/her work. The patience and willingness with which I was supported were phenomenal and I am gratefully indebted to each one of them for that.

As our people say, '*the maturity in a visitor is also measured in how much s/he is able to see and learn from a visit'*. I also acknowledge that my stay in Belgium and in KULeuven in particular has been an enriching privilege. In our different cultures, we often take for granted many issues. 'Respects of time, space, environment and individual differences for example, may mean different things to different people. However, in communities where great success has been built on such great values, it becomes yet a remarkable lesson to visitors who have the privilege of savouring the taste of their achievement. I acknowledge that an educator and parent that I happen to be, I take to the younger people that are entrusted to me, yet a valuable package for their lessons on '*inclusion',* for I am grateful to all those who contributed to it.

Evariste Karangwa **August- 2006**

Alphabetical list of Acronyms and Abbreviations

AIDS	Acquired Immuno-Deficiency Syndrome
CBR	Community-Based Rehabilitation
CFJ	Centre de Formation des Jeunes (Youth training centres)
CERAI	Centre d' Enseignement Rural et Artisanal Integré (Rural & craft training centres)
CRC	Convention of the Rights of a Child
CSIE	Centre for Studies in Inclusive Education
DfID	Department for International Development
DPO	Disabled People's Organisation
ECVM	Enquête sur les Conditions de Vie des Menages
EFA	Education For All
FACHER	Fédération des Associations et des Centres des Handicapés aux Rwanda
ESSP	Education Sector Strategic Plan
FAWE	Forum for African Women Educationalists
FRW	Rwandan Franc
IE	Inclusive Education
IL	Independent Living
ILO	International Labour Organisation
IQEA	Improving the Quality of Education for All
HIV	Human Immuno-deficiency Virus
HRD	Human Resources Development
G.S.	Groupe Scolaire
KIE	Kigali Institute of Education
MINALOC	Ministry of Local Government
MINEDUC	Ministry of Education, Science, Technology and Scientific Research
MINISANTE	Ministry of Health
NGO	Non-Governmental Organisation
NURC	National Unity and Reconciliation Commission
OVC	Orphans and Vulnerable Children
PPA	Participatory Poverty Assessment
PRS	Poverty Reduction Strategy
PRSP	Poverty Reduction Strategy Paper
PTA	Parent Teacher Association
PPA	Participatory Poverty Assessment
PTTC	Primary Teacher Training College
PWDs	People With Disabilities
SEN	Special Educational Needs
UNDP	United Nations Development Programme
UNISE	Uganda National Institute of Special Education
UNESCO	United Nations Education, Scientific and Cultural Organisation
UNICEF	United Nations Children's Fund
UPE	Universal Primary Education

The theoretical context and the study background

Introduction

The concerns for integration and inclusion of People With Disabilities (PWDs) have increasingly attracted international attention since the last quarter of the previous century (Warnock, 1981). These concerns are reflected differently within both international and national policies and practices, that express the growing advocacy for the rights of all those who have traditionally been marginalised by mainstream societies (UN, 1993; UNESCO, 1994). In other words, the concept of inclusion is also an emergent voice of all those militating with disabled people's movements for an equal place in societies, alongside other groups in similar situations, notably women and the minority groups (Charlton, 2000). Thus, the demand for inclusive or integrated education of PWDs seems also to be a demand for equal terms of access to education and training. It arises as a reaction against the overdue marginalisation or exclusion of all the stigmatised groups, requiring participation in development as a matter of right and entitlement (Stone, 2001; Stubbs, 2002; Turmusani, 2003).

It is within the same context that this study reflects on the Rwandan young people with disabilities and their requirement for access into education. It projects a picture of their educational needs at the grassroots community levels where the majority of them live and spend most of their lives. It goes without saying however, that both the pre and post-genocide Rwandan experiences have been associated with the dire lack, if not the need for improved situation of disabled people. Their situation has even been worsened by the country's social, political and economic landscape, often characterized by widespread deprivation and high rate of functional illiteracy that are also responsible for a large number of vulnerable groups including those with disabilities. The study on the grassroots community-based inclusion is thus a deliberate attempt to look into the Rwandan communities, where both the Government and NGOs are increasingly focusing their attention in planning and implementing their programs that target the vulnerable groups. Basing on policy documents, the local and the researched experiences, the study paradigm is premised on the argument that inclusion is not only about adjusting the person with impairment in order to fit him/her into the existing setting, but also about flexibility, creativity and sensitivity of the environment s/he interacts with (Fougeyrollas, 2002; Skjörten, 2001 & UNESO, 1994).

This thesis is thus a documented outcome of the study conducted within the Rwandan communities where families of disabled children live, presenting in four major parts, the background theoretical context of the study; the methods used; the analysis of the findings and discussions based on the study results and experiences.

Chapter 1

Background of the research inspirations and the theoretical context of the study

1.1 The research inspirations and background

It is deemed appropriate to point out at this point that this study is also a reflection of the researcher's personal background and experiences in the post-genocide Rwandan education, as an educator involved in various responsibilities of educating both the disabled and the different disadvantaged groups of children in the mainstream education. Part of the experience was published by the EENET Newsletter, issue 7 of June 2003, in its story: "*challenging the exclusion of blind students in Rwanda"*. The article expresses the researcher's five years struggles as a head teacher to initiate and sustain the visually impaired young people in G. S. Gahini, the school that introduced the visually impaired student into mainstream secondary education in the country. It points out among others, the considerable resource constraints, the social as well as the managerial problems that he had to grapple with while venturing into the new and unknown educational undertaking. However, it brings out at the same time through an account of lived experiences (See Appendix C3), the enormous powers the community is endowed with, and he was able to use it against the insurmountable barriers to the inclusive initiative. Commenting that it is an inspiring story and proof of the untapped potentials in deprived African communities (p. 4), the article concludes with the popular African saying, also adopted by the Notingham inclusion project (Saran & Taylor, 1999): "*It takes the whole village to raise a single child"*, then goes on to add:

> *"African people have a deeply entrenched culture of extensive family bonds, community solidarity and a spirit of mutual support — all of which should be exploited for the benefits of inclusion of people with disabilities"* (EENET, 2003: p. 4).

It goes without saying thus, that the EENET article being the portrayal of the influences the inclusion experiences in the school has had on the researcher; this study emerges as a consequent and persistent pursuit of the same horizon. The inclusion initiative in the school was from all evidence, a phenomenal '*casual inclusive education'* (Stone, 2001), if not *'cultural integration'* (Ingstad, 1997). In other words, the visually impaired young people were included in the school because in the absence of any other alternatives or support, the school that opened its door to them was the only outlet to their education. However, the role played by the community in supporting their education in the school as explained by the

EENET article (2003), was undoubtedly the source of the researcher's motivation for father inquiry, also approved by Suubi's (2003) study later on as a worthy initiative. Schostak (2002: 19) describes such a study undertaking as, '*asking questions self-reflectively*'. He argues that by interrogating the world around us, the looks of the researcher meets the looks of the others, the guiding questions continue to arise through out the life of the research project, and the answers to key issues appear to bridge the gaps in knowledge or problems that had not been noticed before (p.12). It is hence made evident that the observed (actually lived) experiences in G.S. Gahini (EENET, 2003; Suubi, 2004), have substantially contributed to the hypothesis that community-supported initiative is potentially able to generate effective contribution to inclusion of young people with disabilities even in situations of extreme adversity and resources scarcity (Stubbs, 2002).

The initial post-conflict Rwandan socio-economic situation had seemed disastrously bleak (according to the researcher's experiences). The families were female and orphan dominated, communities were shattered and decimated of the most active population, reflecting the society's burden in supporting the most vulnerable groups (See Appendix C1). The researcher recalls with incredulity the opening of the school in September 1994 and its situation five years later. The school which had been vandalised, looted and destroyed; had originally registered only about 91 children for the first term, most of whom had been demoralised and thus unwilling to study, or had been subjected to a situation in which they could not effectively plan their own lives, because they were orphans, disabled, traumatised, abused or lost the family support system (See the vulnerable groups in section 1.2.1-2). Five years later, the school had registered more than its capacity (more than 800 that included 23 blind children), and though the school infrastructure had improved considerably, it was increasingly getting overpopulated, and the pressure was rising especially from more than a half the number who pressed for admission in the school.

The periods of the second half of 1990s were periods of reconstruction for Rwandans in general and the school system had to follow suit. Rethinking of what the school system should be at such a critical period was one of the fundamental issues that innovative head teachers had to grapple with. This entailed among others reconsidering the school as an educational organisation in need of reconstruction, with it the student community at the centre of focus. After spending most of the initial periods attempting to shape the school in accordance to the previous experiences in East African education where he had spent most of his teaching experiences, it soon became clear to the researcher that the post-genocide Rwandan educational settings were actually different and required to be addressed within the post-war circumstances that offered different challenges. Most important however, they

demanded imperative response to the emerging educational needs of the vulnerable students. It is undoubtedly by acknowledging this trend of events prevailing at the time, that the issue of according more attention to education of the vulnerable and disabled youths became central in his school policies and practice. Further discussions on experiences and practice in school administration like that of Rwanda will be discussed further in the last chapters of this work.

1.2 Young people with disabilities in Rwandan communities

It is apparent from the experiences explained above that until fairly recently, disability issues have always received limited considerations in the national programs and policies, and PWDs have traditionally been classified as cases for NGOs and charitable organisations like in many other African countries (Ingstad, 1997). This explains why religious organisations still handle over 90% of only about 800 disabled children in schools (Karangwa, 2000; Kristensen, 1999 & 2000; Republic of Rwanda, 2002a). Thus, this leaves enough room for the observation that the majority of the Rwandan disabled people still live in their communities and are cared for by family members, about 94% of whom are part of the rural communities (Ingstad, 1997; Republic of Rwanda, 2002b).

The developments in the last 3 years however, indicate slow but relatively renewed government commitments and active involvement of the Rwandan PWDs. This is particularly evidenced by the ratification of the National Policy on '*Orphans and other vulnerable children'* (Republic of Rwanda, 2002a) of MINALOC, recognising the rights of all '*youth in difficult circumstances'* (including those with disabilities). It is in the same developments that the previously voiceless associations of PWDs have been encouraged to come together since 2002 in a National Federation (FACHER), and have embarked on recruitment campaigns in rural communities. This has also given rise to provisions in the 2003 National Constitution that includes the recognition of their right of representation in the National Assembly as enshrined in its Art. 76 (Republic of Rwanda, 2003b). It is observed however, that the PWDs in Rwanda are among the most marginalised categories of the citizens, and the widespread deprivation and low levels of functional literacy in the communities still feature prominently as explanations to their desolate situation (Republic of Rwanda, 2002a). These are also among the factors responsible for the perpetuation of certain backward attitudes about disability (See the cases in section 1.2.1-2 below), subjecting the disabled people in what has been described as the vicious circle of cause and consequences of disabilities, vulnerability and poverty (Barnes, 1991; DfID, 2000; Turmusani, 2003: 26 & UPIAS, 1976), illustrated in figure 5. The implication of this situation explains the difficult conditions of living for many PWDs in Rwanda and the limited services available to them. The complexity and the wide range of disabilities manifested in well over 400000 youths (Kristensen, 2000) are thus some of the

consequences. Hence, the need for an understanding of their situation, acknowledging the local demands and complexities as highlighted in the next two sections, remain the key reference feature of this study.

1.2.1 Complex range of disabilities and vulnerabilities among the Rwandan youths

The national policy on orphans and other children with vulnerabilities of 2002 comes as a fairly overdue clarification of the Rwandan government commitment to provide for her PWDs (Republic of Rwanda, 2002a: 17). The document defines young people with disabilities simply as: '*People under the age of 18 years who have a physical or intellectual impairment which may present a handicap to social, intellectual, mobility, education, health, well-being and future employment potential*'. Clearly, this definition falls short of important components of the conventional definitions of disability (Mertens, 2003, Mittler, 1993, UNESCO, 1994), and thus, this study finds it grossly influenced by the cultural attitudes and perceptions about disabilities rather than the conventional perspectives. For example, the high number of different disabilities manifests such a complex range of impairments and vulnerabilities (Republic of Rwanda, 2002a), that they are only classified as '*Children in Difficult Circumstances'*. However, this study recognises the rampant vulnerabilities, disabilities and special educational needs among them, and their situation and conditions are explained below in their natural settings:

1. *Orphaned children who* are mainly a result of the 1990s conflicts. Their total number is estimated at 613000 children between the ages of 0 to 14 years, and their number is on the increase due to HIV/AIDS effects (prevalence exceeds 13%). About 3 600 orphans live in 25 centres for unaccompanied children. There are many who live in foster homes, encouraged by the national policy adopted from the dominant culture *"umwana ni uw' umuryango*" or "a *child belongs to the extended family*" (Republic of Rwanda, 2002a: *13*). Most of the children are known to suffer from traumatic conditions due to the experiences they were subjected to during the genocide periods.

2. *Street children* are common in the Rwandan urban centres due to the push factors related to rural poverty. About ¾ of them are in the capital city Kigali. They are estimated at 7 000 in total. The common endangering factors that lead to their physical, sensory and/or behavioural impairments include glue sniffing, alcoholism, unprotected sex (sexually exploitation), malnutrition, accidents and others (Republic of Rwanda, 2002a).

3. *Children affected by armed conflicts* include those who were pushed into conflicts activities in the 1990s, due to poverty, loss of parents, or by anyone of the warring groups. They participated as cooks, porters, informers, or active soldiers. By the year 2002, over 400 children had been reunified with families or with extended families (Republic of Rwanda, 2002a). Their impairments include mainly: physical, sensory and emotional difficulties (See the story of Buna below in section 1.2.2 below).

4. *Sexually exploited or abused children.* Little information is available about sexual abuse, mainly because sex is linked to taboo in the Rwandan culture. However, studies by the Rwandan Ministry of labour (Republic of Rwanda, 2001a) show that sex plays a significant role in survival strategies of orphans and other children in difficult

circumstances, that child prostitution is wide spread and those affected by poverty are particularly at risk of impairing factors that include HIV and other sexually transmitted diseases.

5. *Working children* are found on the streets, in market places, on farms, brick factories, tea plantations, households, and waste disposal sites etc, where they work to subsidize the domestic income. It is estimated that over 170000 children under 15 years are engaged in substantial work outside their households against the Rwandan labour code of 1999 (Republic of Rwanda, 2002a). This situation concerns mainly the youth from the poor families, those with poor and disabled parents, those with disabilities (Deaf and mild intellectual difficulties), as well as unsupported youths.

6. *Children in conflict* with the law include about 4 500 minors (between 14 & 18 years of age) in Rwandan prisons. They are however protected by the law no. 27/2001 (Republic of Rwanda, 2002a) and are usually interned in the rehabilitation centres of Gitagata. They are mainly victims of the 1990s conflicts (UNICEF Rwanda, 2003).

7. *Other categories of children* in difficult circumstances include those who are married before the age of 21 years set by the Rwandan law (especially girls), children who are affected or infected by HIV/AIDS; infants with mothers in prison (about 108 children live with their mothers in prison (Republic of Rwanda, 2002a), refugees and internally displaced children; children of single mothers and others. They are usually affected by different types of difficulties, ranging from body impairments to social and psychological problems.

The conditions and life of the above categories of children are usually little understood by the Rwandan communities, because of the general absences of the related support mechanisms, and the complex socio-economic conditions within which these occur (implied in some of the above categories). Studies on disabilities in poor communities similar to those in Rwanda, point out the complex interrelationship between poverty, vulnerability and disability, each being both the cause and the consequence of the other (Devlieger, 2001; DfID, 2000: 4; Kisanji, 1995; Stone, 1999). Through his own experiences on the other hand, as a disabled youth growing up in a Tanzanian rural village, Kisanji (1995) provides a rather reassuring image of PWDs in Sub-Saharan African communities:

> "*Growing up disabled in a developing country may appear to the Westerners desolate and gloomy. Indeed the critical indicators of human development … present a gruesome picture. … however, in the midst of the struggle for economic survival and well – being, the general practice in developing countries is to raise disabled young people as members of their community"* (p. 199).

The assertion is shared by a few other studies (Devlieger, 2001; Ingstad, 1997; Turmusani, 2003 & Vanneste, 1997), confirming that despite many the inherent limitations, deprivation in rural communities of developing countries does not necessarily deter the inherent cultural way of integrating and caring for disabled members (See the case of Olivi in Appendix C1). This is disapproved by yet equally convincing confirmations, which call to the developed world to focus their support to the South, where the majority of the disabled are, and in very needy conditions (Charlton, 2000; Helander, 1993; Lancaster, 1999; Miles, 1998; Mittler,

1993 & Stone, 2001). The controversy raised in the arguments lead this study into a closer examination of the conditions in some of the specific cases in the Rwandan communities in the next section.

1.2.2 The conditions of some young people with disabilities in Rwanda

The situation and conditions of people with disabilities in Rwanda varies like in many other societies of the Sub-Saharan Africa (Ingstad, 1997; Kisanji, 1995). Their situation depends on the family's socio-economic and education standards, the type of disability and its condition, religion or/and the dominant beliefs, proximity to related services or to relevant information. The wide range of experiences of young PWDs revealed in the cases below, also represent the wide spectrum of their conditions mentioned above:

1. ***Buna*** is a girl with sadness etched on her face. She hardly speaks. 'We do not know her age', the school director says. 'May be between nine and 12'. In a barely audible voice she answers 'I came on a truck from Congo with other refugees without my family'. She now lives in Thomas' family for whom she does domestic work and the later caters for her basic needs. She now attends a UNICEF funded 'Catch-Up school' near her foster home (UNICEF, 2003).

2. **Nyiramut** is one of the four children with mild mental disabilities in the remote rural District of Gabiro in North Eastern Rwanda. Their conditions are reportedly also the cause of their parents' divorce. The Grand mother cares for them and administers traditional medicine for their illness. However, the later was ignorant about services offered by the Rehabilitation centre only 20 Km away, and could not afford the expenses involved too (Karangwa, 2001).

3. ***Josia Kara*** is a deaf and mute five year old girl of Nyamugari District in Northern Rwanda. The prefix **'K'** in Kinyaranda like in most Bantu languages of the sub-region relates to ***objects*** or ***diminutives,*** not to people. Her name denotes a *speechless small thing*. She does not go to school but is often seen participating in the domestic cores alongside her peers who have learnt to communicate with her (Karangwa, 2000).

4. In laughter, the eight year old ***Shem*** of Remera in Kigali alternates with her siblings to explain why her teacher sent her out of class. '*I deranged my classes'* she agreed with her elder sister in school uniform who is also insisting that the teacher was right, then she proudly repeats French citations leant from her siblings. The community and her siblings generally accept her and take her as the girl with strange behaviour (Karangwa 2004: 2).

5. ***Olivi*** is a ten year old boy with physical disabilities and mild learning difficulties. He was injured at birth by a bomb which left his mother crippled because she was abandoned for several days without medical attention. They both now live in the grand mother's home and receive regular visits of the CBM/Inkurunziza church social worker (Karangwa, 2004).

6. ***J. B. Usab*** is one of the blind students who were integrated in G.S. Gahini since 1997. He was one of the eight first Rwandan blind students to be integrated in a government aided school after their primary education in Gatagara, a special school for the blind run by Brothers of Charity. *J. B*. happens to be the only one who was able to complete secondary education and receive employment at his former school, and is still pressing for registration in the national Universities. However, it will not be easy for him because

none of them has experiences with education of those with sensory disabilities (EENET, 2003; Suubi, 2003).

The cases above reveal the complexities within which disabilities in the Rwandan youths manifest themselves and the extent to which the community members react to their different conditions. However, it is worth noting here at the same time that though some families and practitioners show some isolated positive attitudes, their efforts are still greatly restrained by different types of discriminations (DfID, 2000) within the communities. These include among others: 1. *Institutional discrimination* owing to inadequate legal and policy provisions; 2. *Environmental discriminations* due to physical barriers ignorantly imposed by the public and 3. Attitudinal *discriminations* related to some local cultural beliefs and practices in issues that concern disabilities. Consequently, the challenges to break these barriers for effective inclusion of young people with disabilities remain enormous, and the search for meaningful solutions may be guided by the deeper understanding of the Rwandan cultural way of life discussed in the next sections.

1.3 The Rwandan grassroots community and its significance to inclusion

1.3.1 The Rwandan context of grassroots community

Recognizing the importance of Community-Based Rehabilitation (CBR) for people with disabilities in developing countries, Finkenflügel (2004) admits that 'community' is an amorphous term. Being an ambiguous concept thus, many controversies arise when looking more closely at it, because its definitions may only be constructed from any symbols or boundaries of membership and differences. Helander (1993) provides the impression of community as a social grouping, where members with similar attributes or background share in varying degrees, political, economic, social and cultural characteristics. Marquet's (1954: 12) Aide–Memoir on African Ethnology asserts on the other hand that a community is a defined group of people who reside together and know each other.

For the purpose of the Rwandan context in any case, the study draws from all the above analysis to reflect on earlier investigations of the Rwandan culture (Bazivamo 2002; Kagame, 1954; Nothomb, 1965) that claim abundance of qualities of *humanism* and *solidarity* within the grassroots communities, and the potentials of these to respond adequately to the problems of their disadvantaged members. Nothomb's (1965) idea of the Rwandan grassroots community for example, underlines the strength generated through solidarity and interaction within '*Umuryango*' (p. 71) or *wide family unit* and '*inzu*' (p.84) or *clan* of people who share the same family ancestry. Accordingly, this strength is constituted within nuclear families of close and distant relations (including the *Bazimu* or ancestral spirits), as well as their

immediate neighbourhood inhabitants. He stresses the strength generated through solidarity within the grassroots community in the following descriptions:

> "*Man in Rwanda is not an island. He is much more than just an individual. 'To be' or 'kubaho' for him is 'to be with' or 'kubana'… that aspect of his life is only a minor phenomenon with much more fundamental humane values, expressed as "ubumwe"* (Translation from Nothomb, 1965, p.148).

It should be noted here, that the earlier idea of Rwandan community, reflected the importance of both the social relations as well as the physical neighbourhood. The idea is shared by Bramston, Bruggerman & Pretty's (2002) multidimensional description of an inclusive community, which also delimits relational entities of people with common interests, as well as the identifiable geographical residential locations where the boundaries are recognised by community inhabitants. Their reference to the position of a young member in the assertion below reflects '*inter alias'* the significance of community to inclusion of those with disabilities:

> "*A youth's self-perception and categorisation as a community member, (I am like you so I belong here just as you belong here) in which the 'I' becomes part of the 'we' depends on the experiences that accumulate within the ordinary daily life in the residential neighbourhood. … the sense of community is a construct that is essentially 'extra-individual' in nature. … Hence, a community defined in terms of a setting … may be experienced as supportive"* (p. 387).

Here, communities are considered to have physical and psychological environment attributes of a residential place. It is described in this sense as the extent to which a person feels part of a readily available, supportive and dependable social structure (Sarason, 1974). The major dimension stressed here is community involvement, delineating a sense of shared emotional connection, in which one's needs are recognised and fulfilled because one belongs. It is allied to Bramston et al.'s (2002) research confirmation that a sense of belonging to a community is associated with better quality of life for young people with disabilities.

The above views can thus be associated with Nothomb's (1965) earlier view of African humanism with specific reference to the Rwandan grassroots community, which he characterised as '*les harmonies de la solidarité'* or harmony within solidarity (p. 149). Among the pillar of this solidarity, he highlights the culture of '*Kubana*' or '*to live with'* rather than just '*to live' or 'kubaho'*, as an important component of '*Ubumwe*' or solidarity within the community. These reflected the cultural sense of '*Kuvind' imwe'* or fraternity through the cultural practice of '*Kunywana*' or blood pact between very close friends in communities of northern Rwanda; '*ubuhake*' or feudal solidarity; '*ubuphura*' or upright conduct in relating to each other, and '*Gacaca*' or transparent and reconciling justice among the conflicting members of the community. Although these cultural elements are not so easily translatable into western cultural context, they share Mead's (1984) implication of community

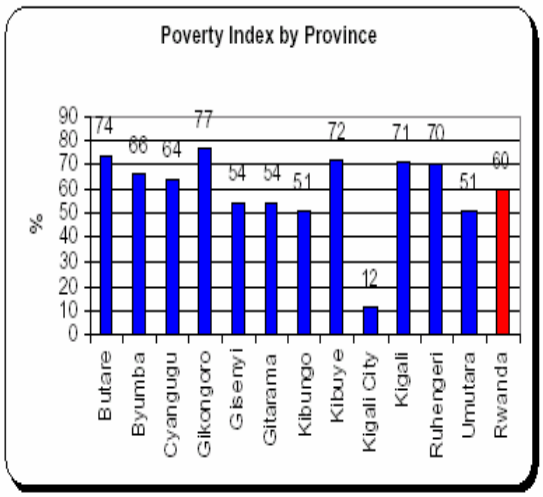
as '*not just a place'*, but for the cultural values and attitudes that the members are identified with and bind them together. The grassroots community administrative structures in Rwanda today, based on ten houses or *Nyumba Kumi* (Republic of Rwanda, 2002b), are actually political recognitions of these social qualities by the government today. The major dimension being stressed here once again by the study, like Sarason (1974) and Bramston et al. (2002) above, is the community involvement or its capacity to integrate the disabled and other vulnerable groups.

1.3.2 The post-conflict Rwandan community

It has already been mentioned that this study is particularly sensitive to the socio–economic situation of Rwanda, especially the country's inability to provide services to the population in general and to the disabled in particular. The picture of the Rwandan community presented in the section above, may admittedly seem short of the realities of a society gravely affected by its recent history of social conflicts with the genocide background, for it has been restricted to the cultural perspectives of the Rwandan community. This section looks at the post-genocide Rwandan society ten years on, assessing its capacity for inclusion strategies.

The national population policy for sustainable development of Rwanda (Republic of Rwanda, 2003c: 37) for example, characterises the country as a victim of *'lack of good governance since independence, which led to the country's generalised structural poverty, illiteracy and series of socio-political tragedies that culminated into genocide of 1994'*. This is also the apparent explanation for the low level of the people's welfare and all other associated social problems. The government document like independent observers described the current socio-economic situation as '*multiplicity of challenges that lead to a multiplicity of demands and priorities*' (Obidegwu, 2003; Republic of Rwanda, 2003a & b). Two eminent features seem to dominate the post-conflict Rwandan socio-economic situation also explaining the current trend as 'Rampant rural poverty (See Fig. 1) and vulnerability of the majority of the people (See Fig. 2) as explained in the next parts of this section.

Fig. 1: Poverty Index by Province (% of population below the poverty line)



1.3.2.1 The post-conflict community poverty

Rwandans still remain characterised as '*a poor rural society with about 90% of the population surviving on (mainly subsistence) agriculture'* (Bazivamo, 2002; Obidegwu, 2003; Republic

of Rwanda, 2002a; Sangano et. Al., 2003; World Bank, 2004c). The World Bank assessment report of June 2004 on '*the impact of conflict on growth and poverty in Rwanda'*, confirm that the human, social and economic costs of Rwanda's Genocide have been staggering although the country has made remarkable progress over the last ten years ... About one fourth of the population can be said to be poor as a result of the Genocide (See also Fig.1[1] above, showing levels of poverty by province). This report followed an earlier assistance evaluation report of January 5th 2004, which assesses the national strategies as a response to the post-genocide rural poverty:

> "*Both the government in its Poverty Reduction Strategy Programme (PRSP), and the Rwandan people in the National Unity and Reconciliation Commission (NURC), have indicated that economic concerns are the most pressing issues for the country. The NURC survey indicated that inadequate access to land and lack of housing are primary concerns"* (World Bank, 2004b, p.7).

It is thus implied that the characteristics of the Rwandan population which is predominantly agricultural and rural, is predisposed to many hazards. Most of the settlements are scattered, families and households are bound to relying on small and often very fragmented plots of land which generate low output and income per family (Bazivamo, 2002: 18). The Rwandan delegates in the Regional workshop on ageing and poverty in Dar Es Salaam of October 29-31 2003, underscored the post-genocide household poverty situation and the resultant social deformations as:

> "*Using households as the unit, 57% live below the poverty line. … 62% of female-headed households lie below the poverty line as opposed to 54% of male-headed households. Poverty rates in Rwanda were increasing in the late 1980s and stood at 47.5%4 in 1990. Because of the 1994 genocide, the poverty rate rose dramatically in that year peaking at 78%. Since then, the rate has been falling steadily every year but remains much higher than it was before the genocide. The incidence of poverty is much higher in the rural areas (66%) than in urban areas (12% in Kigali and 19% in other urban areas"* (Sangano et al., 2003, p.1).

However, the Participatory Poverty Assessment (PPA) in an evaluation exercise of the Rwandan community situation, came to a conclusion that defining '*the poverty'* is complex and contains relative dimensions; hence it is one of those things that can be best defined by those who feel it (Republic of Rwanda, 2002b: 19). It depicts poverty as a combination of '*social, economic, political'* factors and other forms of deprivation that affect individuals, household and communities. The individual Rwandan for example is considered poor if s/he does not have enough land, income or other resources to satisfy his/her basic needs such as food, clothing, medical costs and children's education; is unable to look after himself/herself; and the household has a total annual expenditure of less than 110$ per adult/annum, or the food expenditure falls below about 85$ per adult/annum. Whatever the nature and description

[1] ***The administrative structures have been changed in Rwanda. The provinces had been reduced from 12 to only four by 2006.***

of poverty however, the post-genocide Rwanda was characterised by massive economic losses and the destruction of social, human and physical capital loses that impact heavily on the lives of the citizens even today. Chukwuma Obidegwu (2003: 9) described the period as '*the lost decade'*.

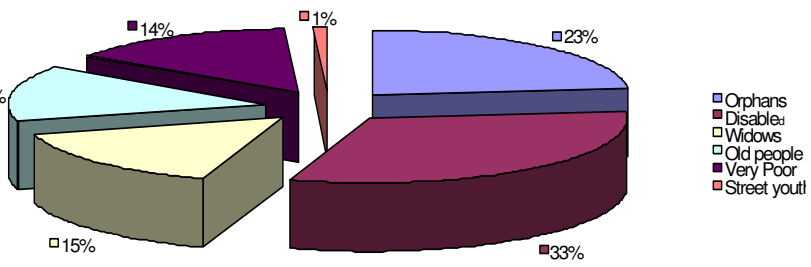
1.3.2.2 Vulnerabilities and disabilities in the post-conflict Rwandan communities

The economic conditions of the country highlighted in the above analysis, also explain the consequently rampant vulnerabilities that entail disability prevalence and occurrences in the country. Considering that the big proportions of the Rwandan population (over 60% below the poverty line) are still subjected to rural poverty where on average, 5.8 children per woman are known to survive on only less than 0.50 hectares of land for their subsistence food production, often lack clean water, appropriate sanitation and health services. The hazards that result out of these are among the major impairing factors responsible for the high rate of mortality, morbidity as well as low average life expectancy of about 48.5 years (Republic of Rwanda, 2003c).

The post genocide Rwandan communities are characterised by many vulnerable groups (See case in section 1.2.1-2 above), these include orphans, widows, child-headed homes and the disabled (Bazivamo, 2002; Republic of Rwanda, 2002a & c; World Bank, 2004a). The Rwandan delegates in the Regional Workshop on Ageing and Poverty (Sangano, et al. 2003) reported the post genocide Rwandan vulnerability as:

> "*… Rwanda has a large number of vulnerable groups and the character of vulnerability takes on many forms. … 34% of all households were headed by widows as a result of the genocide. Households headed by a person of less than 20 years constituted 0.7% of the Rwandan population in 2001 (about 220000 orphans resulted; some of them became and remain heads of households*). *…Other categories of vulnerability in Rwanda are uneducated young people…disabled, orphans, street children and prisoners* (Sangano, et al. 2003, p. 4).

FIG: 2 The Vulnerable groups of Nyamugali District in Ruhengeri Province of 2003



It is thus stressed that the post-conflict Rwandan communities are also characterized by 'poverty and vulnerabilities that are often linked with the genocide effects' (Republic of Rwanda, 2002c: 20). The proportion of households below poverty line (1$/person/day) for example, rose from 40% in 1985 to 53% in 1993 and is now estimated at

above 70% since 1996 (See Fig. 1[2] & 2). Poor households are more likely to be female-headed and/ or child-headed, not only lacking the able-bodied labour required for domestic productivity, but also burdened by the high number of dependant groups (See typical rural family in Appendix C1). Figure 2 above indicates characteristic vulnerable groups registered in one of the districts of northern Rwanda. It is of no surprise therefore that the 3rd census of the population and housing of August 2002, put the proportion of people with disabilities in Rwanda to 4.7% of the population, with illnesses (37.5%) and accidents (including war, 12.4%) remaining the leading causes of impairments in the country (Republic of Rwanda, 2003c).

1.4 Disability in national priorities

Given the socio-economic situation explained above, the vulnerable groups including those with disabilities ought to feature prominently within the national priorities of development goals. In fact, they are mentioned in most of the post-genocide policy documents, notably the National Constitution (Republic of Rwanda, 2003b), National policy on orphans and vulnerable groups (Republic of Rwanda, 2002a), the National Poverty Reduction Strategy (Republic of Rwanda, 2002b) and others. However, among the privileged targets in the development agenda, feature community-based development and poverty reduction, in which good governance, equal access to basic rights irrespective of gender and ethnicity, as well as health programs (especially HIV/AIDS), are more pronounced. It is argued thus that, in privileging '*community development and good governance'* (Republic of Rwanda, 2003c: 37), barriers that have always been responsible for the country's generalized structural poverty and social unrest will be curbed considerably, and in so doing, the people's welfare will be improved including that of the disabled.

Amid the multiplicity of socio-economic challenges the country has to address, the causes and effects of genocide continue to be the prime preoccupation of the country (World Bank, 2004a; World Bank, 2003a). This is outlined in the World Bank report of January 5, 2004a as:

> "*Citizens continue to be concerned about ethnic divisions, despite the efforts which the government has undertaken to reduce the focus on ethnicity, through the National Unity and Reconciliation Committee programs … and ethnic differences continue to colour their interpretation of the genocide… but they also underlined that bad governance remains an issue"* (p.7).

Apparently, the impact of genocide to Rwanda continues to influence the citizens' attitudes towards other development challenges and priorities, even long after the conflict. These attitudes are likely to have submerged other long-term projects. The government is apparently

[2] The statistics were drawn from the 'Child Project' baseline study conducted for CARE International in July - September, 2003.

focused simultaneously on the needs to consolidate peace and preventing any renewed conflicts, building confidence and promoting harmony on one hand; and the urgent need for growth and economic development on the other. It is in this perspective that community-based development strategies appear to be the main priority, apparently as one of the World Bank supported '*Comprehensive Development Framework (CDF) approach in conflict and post-conflict societies'* (World Bank, 2003a: 2). The approach recognises the '*unique circumstances in each affected societies'* (p. 5) and advocates for '*pro-poor'* (p.6) strategies as a way forward to improving the situation. Under this plan, some of the needs of the Rwandan disabled and other vulnerable groups can be assessed as having been submerged within the '*long-term holistic vision of the national development agenda'* that prioritises restoration of social harmony and strengthening of the economy and good governance, still viewed as the key elements on the development agenda (Republic of Rwanda, 2001a: 13).

The study survey conducted in August and September 2004[3] for example, reveal that disability issues do not necessarily appear on the list of the national priorities and remain largely in the hands of NGOs, especially those associated with charitable and religious organizations (See findings in chapter 7-9 of this study). The observations were conducted in different communities and the implications of Rwandans into activities that concern both individuals and groups of people with disabilities were not indicated. It was noted that despite the recognition of the needs of PWDs within the new national constitution (Republic of Rwanda, 2003b), their basic rights are not yet clearly and actively addressed as government priorities (notably rights to education and health); nor are they acknowledged within the civil organs such as workers' unions. Though the last three years have seen renewed reorganisation of PWDs and a rising number of special education and rehabilitation centres for example, these developments were observed as part of the general post-conflicts social reorganisations and developments going on in Rwanda, rather than a politically fostered program that targets the disabled people.

This situation has thus led to the following observable shortcomings in the national policies concerning PWDs: 1. The generally young and unsupported associations of PWDs and the local NGOs still duplicate services and function in an uncoordinated way, because they lack a concrete government policy within which their functions and services are channelled. 2. There is no evidence that basic international standards in a number of government undertakings with regards to disabilities are respected or recognised. These include the failure to reinforce the key ILO standards with regard to equal opportunities on the labour market;

[3] A preliminary survey was conducted in many centers and communities between August & September, 2004.

the failure of equalisation of opportunities in education, health or gender sensitive legislations such as sexual harassment and exploitation of those with disabilities.

Clearly all the programs for people with disabilities in the post genocide Rwanda are still at their very basic stage in matters that concern both policy and implementation, and the prevailing socio-economic situation continue to claim more attention. However, though coordinated efforts of the organisations of the PWDs, of local and foreign NGOs remain important prerequisites for a possible breakthrough, equally important is the need for the government to initiate the mobilisation of the readily available support within their families and the general community for far reaching and sustainable results (Vanneste, 1997).

Chapter 2
The concept of inclusion and its context

2.1 Defining inclusion concept and exploring its context

Inclusion concept is admittedly a fairly recent introduction into the Rwandan education. It became apparent in the Rwandan ministry of education for the first time in the Kristensen Report of 1999, and has subsequently been followed by two similar reports (Kristensen, 2000 & 2005). Such politically-motivated documents appear to be, at least for Rwanda, only theoretical responses to the growing general call to all nations to commit their policies to the requirements of the UN resolutions, but often inadequately reflected in practice. Some of the international declarations that have influenced such educational developments include: The Universal Primary Education For All of Jomtien in 1990; the standard rule and equal opportunities *for disabled* persons of 1993; the *Salamanca statement of inclusion* of June 1994 and the Dakar Declaration of Education For All 2000 (Baez, 1999; Baine, 1993; Dyson, 1999; Farrel, 2000; Little, Hoppers & Gardener, 1994; UNESCO, 1994). The present study thus, also questions the implications and relevance of the inclusion concepts to both the international and the Rwandan contexts. It takes it as a challenging subject at all the decision making levels, therefore a preoccupying subject to many researchers and practitioners (Alton, 1998; Slee, 1999; Weightman, 1998).

In light of the researchers' background experience in education of the marginalised Rwandan children as highlighted previously, and the relationship of these to the present study, it becomes appropriate at this juncture to examine more closely the concept and context of inclusion. It is with the same preoccupation therefore that this study attempts to consider inclusion concept within the practical challenges and possibilities inherent within the Rwandan communities. Accordingly, the study does not necessarily consider inclusion as a conventionally defined concept, but also frames it within the Rwandan situation, in which the grassroots communities are perceived through the researcher‘s previous experiences as possessing latent capacities to support inclusive initiatives. In other words, the study' definition of inclusion is also an attempt to understand its context within the Rwandan society and its links to the situation of the young people with disabilities.

The study is thus based on the premise that educational reforms and innovations that include inclusive education demand appropriate interpretation or definition of the concept. This may entail associating the context of inclusion with the poor quality and limited resources,

inadequate policies and implementation mechanisms (Bishop, 1986; Harber, 1997; Harber & Davies, 1997), as well as the traditional and cultural beliefs or perceptions that are generally associated with educating the disadvantaged learners including those with special educational needs and disabilities in African societies (Best & McCall, 1993; Kisanji, 1993). Accordingly, in its interest in the appropriate definition of inclusion, the present study associates itself to Dr. Miriam Skjörten' advice to African special educationalists shortly after the UNESCO Salamanca world conference on inclusion. Her opening speech of 25th Sept. 1994 in Zimbabwe stressed relevance and focus to the local context, while searching for the local solutions to educational needs of the disabled children:

> *"Special education is continuously contributing to basic changes to education through research. Special education deals with questions and problems concerning minorities of minorities. Traditional and well-established research methods often do not give a sufficient insight. Researchers in special education must therefore be brave and imaginative; they have to find different ways of looking into phenomena, process and specific situations. ... Although there are many differences between African countries, it will be important to develop a closer collaboration between these countries so that knowledge is gained from regional research ..."* (UNISE Bulletin, 1995: p. 20).

The ideas above therefore bring out the ambiguity with which the universal definition of inclusion is reflected into the local context. Though the general agreement appears to be in support of *antidiscriminationist* and *desegregationist* movements spreading world wide that keep growing with the new century; each society, policy and situations, may offer different meanings to inclusion. Feiler and Gibson (1999) from an educational perspective point out that though potentially benefiting a wide spectrum of young people, the concept is complex and too widely encompassing, then, conclude that the inclusion movement is under threat:

> *"Despite the recent focus on inclusion in debates about special educational needs, this vitally important movement is under threat. ... a more precise definition need to be underpinned by research evidence if practitioners are to be convinced of its benefits to all children*" (p. 151).

It is equally contended however by those who consider inclusive education from a wholistic perspective, that the '*inclusion concept needs not be defined, but rather to be considered in the context of democratic education'* (Wade, 1999: 81) and within the ambit of the '*broader social policies of the current post industrial societies'* (Kerzner et al., 1999: 13). They affirm that:

> -It is about more than access, but a much broader social and educational concept,
> -It is increasingly located in special needs education,
> -It is international and therefore there are similarities and differences between nations,

It is thus argued by this study that the definition of inclusion for the Rwandan context requires to be reconsidered. Though the present work proceeds within the widely encompassing definition of the concept's concerns to all the young people with disabilities, it also considers

it as a growing concept that needs to be framed within both the local and global educational developments. Its definition will subsequently be discussed in the last chapter vis-à-vis the study findings, as a deliberate way of interpreting both the concept and its context.

2.2 The Rwandan perception of inclusion

The study notes that the major ambiguity about the concept of inclusion is raised by the fact that its English definition finds limited direct equivalence in Kinyarwanda language, considered as an important cultural conveyor of the social context. Whereas the term '*Guheza*' for example is negatively used in Kinyarwanda to denote '*exclusion'*, the context within which its opposite is used '*Kudaheza*' simply means '*not to exclude'*. Both of the terms are common in social contexts to allude respectively '*acceptance and rejection of another'* while referring to people in the same social setting. In this sense, inclusive education to an average Rwandan teacher may simply mean *'an education that does not reject learners'*. The major components of inclusion that are of primary relevance to the Rwandan context may thus include: *'increasing the process of participation; reducing exclusion from the local community and culture*, also apparent in CSIE (2002) definition. In this respect, the present study does not necessarily focus on the international meaning of inclusion per se, but draws from the multiple dimensions and the implications the Rwandan context reflects into it.

The attempt to define 'inclusion' that fits the Rwandan context therefore brings into view the emerging dilemma by relating the local and the global definition of inclusion. For this reason, the present study will restrict its definition to the basic principles guiding the inclusive practices and policies, associated with the current the global trends that fits the inclusion concept within the growing shift from both moral and medical perspectives, to a more social and culturally oriented model. According to Gill (1999), the moral model suggests that disability results as a punishment for sin, or as a means of inspiring or redeeming others; while the medical model sees disability as a problem or a measurable defect in the individual that needs a cure or alleviation that can be provided for by medical experts. The new paradigm shifts the location of the problem from within the individual to the environmental capacity to respond to disability. It frames disability within the perspective of the social minority group, defining it as a dimension of human difference and not a defect (CSIE, 2002). Accordingly, the goal of inclusion of people with disabilities should not be to eradicate their impairments, but to celebrate their distinctness, pursue their equal place in society and acknowledge that their being different is not defective but rather valuable (Mertens, 2003).

It has to be underlined however, that this study is more concerned with the definition of inclusion that fits a society that is unable to provide adequate services to the population in

general and to disabled young people in particular. Rwanda has more than 63% of its people living below the poverty line, and ranks 164th out of 174 countries of the world (Republic of Rwanda, 2003a), and this socio-economic background is reportedly responsible for perpetuating disability within a '*vicious circle'* (See Fig. 5) of deprivation and vulnerability in the society (DfID, 2000; Turmusani, 2003). Consequently, the search for appropriate definition of inclusion for Rwanda may not necessarily be associated with the desolate economic conditions of the country, but rather with alternative avenues readily availed within families and neighbourhood of the PWDs. It is thus with the same perspective that the Rwandan grassroots communities (explained in the previous section) are the major focus of the study.

The Education For All (EFA) plan of action (Republic of Rwanda, 2003a: 13-5) for example, reflects the community-based inclusive perspective, in its emphasis on '*addressing the human resource development needs of the population at the grassroots community levels* (p. 13) *that could serve to address the basic problems and needs of vulnerable children'* (p 15). Sangano, Nsanzabaganwa & Mpyisi's (2003) report explores the same strategy, as a way forward in catering for the Rwandan vulnerable groups:

> *"The development of policy to protect vulnerable groups (widows, child-headed households, disabled, the ageing, etc.) is the responsibility of the Ministry of Local Government and Social Affairs (MINALOC). Traditionally mutual help in terms of* [4]***umusanzu*** *and* ***umuganda****, all different forms of reciprocal support ought to be used as strategies of social protection. These strategies have been introduced in the new local administrative structures. …Current efforts are also underway to decentralise the administration …The* ***ubudehe*** *programme has played a key role in improving access to economic opportunities for the poorest households"* (p. 5).

Studies of experiences in similar sub-Saharan African societies and other under-resourced societies, have shared the same view (Ingstad, 1997; Kisanji, 1993, Stubbs, 2002 & Vanneste, 1997). They all contend in various ways that the support for inclusion in such societies can be built on the cultural support provided within families and close community members, who maintain the culture of supporting their disabled kinsmen, even under the situation of resource constraints and limited know-how. It is noted that the emphasis on the community potentials in defining effective inclusion of vulnerable groups is also in line with the international agenda (UNESCO, 1994: IX & World Bank, 2004d). In its article 3, the Salamanca statement and its plan of action for example, suggests the encouragement and facilitation of parents' participation, communities and organizations of people with disabilities. It is similarly reiterated by the recent Rwandan constitution of 4th June 2003, (Republic of Rwanda, 2003b) that emphasises the empowerment of all those that had previously been excluded from the

[4] ***Umusanzu, Umuganda & Ubudehe*** are all Kinyarwnda terms that interchangeably imply, mutual support, reciprocal support or working communally.

decision making platforms (Art. 11 and Art. 76 No. 4) in matters that concern their lives.

2.3 The socio-political background of inclusion concept in Rwanda

Inclusion finds its background in segregated education carried out in special centres for young people with disabilities in many countries worldwide, and in Rwanda like in other African nations; such centres still mark the legacy of the colonial system of formal education (See threats . The colonial education had left this branch of education to the missionaries, and these have persisted even long after the colonial periods (Ingstad, 1997: 8). About 90% of only about 800 Rwandan disabled children, who go to such schools today, are catered for by missionary organisations, while the rest are in centres privately run by individual parents or NGOs. The Rwandan Education reforms that would entail inclusion thus, would also be proposing a shift from these segregated systems, or reforms of special education programs and policies that concern special schools. These requirements have not only seen the changes in many African countries (Kisanji, 1993; Best et al., 1993; UNISE, 1995), but also the development of Community-Based Rehabilitation (CBR) programme (Ingstad, 1997), geared towards increasing awareness and adaptations, or the removal of barriers that impede the educational opportunities of the disabled learners. This involved the increased development and adaptation of government policies and parliamentary bills in the last decade, most of which are often overshadowed by many other pressing constraints and priorities (Baine, 1993; Kisanji, 1993; Christie, 1999).

It was stated as the first objective of the first Rwandan educational sector policy (1998: 18) for example that it would '*ensure that education is for all Rwandans'*, confirming within its specific objective No. 2 as '*development of special education*' through the commitment to actions such as: '*Integration of disabled children at all levels'* (p.19). However, these great commitments are not yet seen on the ground 8 years on. In neighbouring Uganda, the government constitution of 1995 states in article 35 that: '*Persons with disabilities have a right of respect and human dignity, the state and society shall take appropriate measures to ensure that they realise their full mental and physical potential',* and the same support for special needs education is echoed by the government '*white paper section 470'* (Byagaba, 1999). The commitment expressed by the Uganda government was also expressed by other governments in the sub-region in the same period (Best et al. 1993; Kisanji, 1993), and Rwanda seems to be naturally towing the line, with lesser political commitments.

The commitments to integrated or to inclusive education are apparently highlighted in the policy documents of the sub-region, but it is noted too that the two concepts are still expressed interchangeably to mean the same thing in many countries (Kisanji, 1993). This

ambiguity also reflects the shared difficulties in translating either concept to the local context, and also questions the adaptability of the concepts in practice. On the whole however, Rwanda like other African countries is faced with the challenges arising from resource constraints, the general lack of strong background of reliable manpower and experiences to count on (Kisanji, 1993; Baine, 1993), a situation that has often prompted a call for foreign support rather than a search for appropriate mechanisms within its own resources.

Rwandan special needs education sector does not only emerge out of a poorly resourced education, but has always also been comparatively small and insignificant. By 1999, there had been only four schools where children with learning disabilities were educated, which handled only about 100 visually impaired children, 185 hearing impaired children and an unknown small number of physically and mentally impaired children. Of those, only 23 had had access to secondary education (as explained in the researcher's account in chapter one) (Kirstensen, 1999). The first ever special education report on the Rwandan situation of April 1999, states:

> "*The government of Rwanda does not have an official policy on Special Needs Education (S N E) provision including related services ... It recognises the needs to remove the barriers to learning and development by subscribing to international conventions for the right of the child. ... The government has moved towards inclusion of learners with special educational needs including those with disabilities, estimated to be about 400 000, into ordinary schools"* (Kirstensen, 1999. p.v).

Clearly, the report provides a picture of the kind of background in which the Rwandan special needs education is faring today, allowing a good view on the direction of the government policies and research on i*nclusive education* ought to take. The study's main task is to investigate this situation as a Rwandan perspective, but inclusion being also a global issue, it will also proceed by discussing the impact of some of the contentious global influences to inclusion.

Chapter 3
Contentious issues about inclusion in Rwanda

3.1. Questioning citizenship and inclusion of disabled children in Rwanda

The issues highlighted in the previous chapters, present a picture of the Rwandan society in which the PWDs are generally marginalized, questioning particularly the prospects for their citizenship and inclusion as equal members. According to Osler et al. (2005), issues on citizenship and inclusion also revolve around the growing concerns about the big gap separating the situations of young citizens in different societies around the world. On one hand, the conflicts and deprivation in many parts of the world have lead to exploitation of young children as soldiers or sex slaves, and thousands are deprived of access to basic necessities of life, or even lose lives from diseases and lack of basic support. On the other hand, some societies are not only able to provide all the necessary support to their young generations, but are also able to develop in them mindset concerns for fellow human beings globally. It goes without saying therefore, that the children growing up in the former situation, who might be only preoccupied with survival, are differently prepared to live as inclusive citizens from the ones growing up in the later situation. To this contentious concern thus, the study adds that the last four decades of enter-ethnic conflicts in Rwanda, fuelled by poverty and political opportunism, also raise the question of citizenship rights of thousands of unsupported disabled children, just like those in situations of dire deprivation, lacking access to basic services such as education and health care. In short, the study questions whether inclusion is a worthwhile concern in situations where, the 1989 UN Convention of the Rights of a Child (CRC) is unknown or non-existent to many, just like other UN basic human rights.

Though Tony (2005: 1) argues that, to some, 'Citizenship' is just another 'spray-on words' such as the 1970s' *'enfranchisement'*, the 1980s' *'participation'*, and the 1990s' *'empowerment',* he quickly adds that it is mistaken to dismiss the rising global interest in 'citizenship' as a fad. Besides, by highlighting the earlier coined expressions, he brings to the study's notice the important issues about citizenship today, which include the emergence of citizenship as a global agenda and an outcome of the progressive struggle for the last many years, in which citizens have always differently and actively expressed their claims on their rights. For Osler et al. (2005: 9) however, *'citizenship'* is most often understood as a claim to two fundamental rights in any society: as a '*legal status'* often defined in relation to nationalistic claims on privileges and rights against the foreigners with no equivalent status, and also in terms of '*activities and participation'* or practice citizens with a set of duties and

entitlement. To the two essential dimensions of citizenship however, they add the dimension of '*feeling a citizen'*. They argue that this feeling is generated with '*the sense of belonging to a community of citizens, which is also the prerequisite to participative citizenship, and when it is missing, so is citizenship'* (p. 12). It is thus stressed that under discrimination of certain groups for example, the sense, *or the feeling* of belonging is undermined, because those who feel left out, discriminated against or oppressed by fellow citizens may not necessarily fill like equal citizens. Similarly, Beiner (1995) labels three major traditions or strands of citizenship as '*liberal, communitarian* and *civic republican'*. He draws on elements of all these narratives to propose the standards for citizenship vision where *national, ethnic* and *cultural boundaries* are blurred or porous, and where hybridism is increasingly the norm and potentially available as a human right, all of which constitute the fundamental qualities of inclusive standards.

It is in light of the above argument thus, that this study questions the citizenship of some Rwandans including those with disabilities, who hardly have access to the basics of their survival. The study shares Banks' (1997: 5) and Osley et al.'s (2005: 13) pessimistic observation that *'*becoming a nation-state does not necessarily mean that an individual will attain structural inclusion into the mainstream society and its institutions, or will s/he be perceived as a citizen by most members of the dominant group'. Their analysis has implications to the Rwandan society where those with powers, whether within the dominant ethnic or religious groups, or those with political or resource-based powers, have often determined whether the minorities with the *same legal status* are to feel included as participative citizens. Actually, Osley et al. (2005: 8) acknowledge citizenship as a '*site of political struggle*' between these groups, where those who feel excluded are expected to achieve their right by demanding for it insistently. Like Lloyd (1999), they perceive this struggle within future education as:

> *"Education for citizenship must necessarily be about enabling learners to make connections between their immediate contexts and the global context ... to feel a sense of solidarity with others, especially those we perceive as different* (p. 23). … *In most democratic societies, schooling is recognized as a key means by which young people are educated for citizenship. Yet schools remain authoritarian in structure and organization. … if John Dewey were to visit many of our schools today, he would be disappointed at how so little has changed, despite the fact that education for citizen ship has become recognized as a pressing concern across a range of countries internationally"* (Osley et al., 2005, p. 137).

It is thus being argued like Marshal (1950) and Klug (2000), that citizenship in all societies is also an evolutionary process, associated with successive political struggles. Therefore, as one of the implicitly apparent antidotes to exclusion and other threats to citizenship and '*inclusive education'* emerge as the fitting response. It means that governments, schools and individuals ought to engage in formal and non-formal education practices that promote respect for the

rights and freedoms of all citizens. They contend that 'citizenship and human rights are indivisible and mutually reinforcing of a system designed to promote peace through justice and fundamental freedoms' (Osley et al., 2005: 35).

Under the UN convention on the right of the child, not only are the rights to education confirmed, but also outline particular entitlements within education, which should be available to all the children without discrimination. The right to education entails government obligations to make schooling *accessible, acceptable and adaptable* to all learners (Osley et al., 2005: 59). In this way, the approach to inclusion will acknowledge actual or potential discrimination against children with Special Educational Needs (SEN), and their claim to the same education as other children. In the SEN policy, it would reasonably be expected that schools make adequate provisions for students with epilepsy for example, so as to ensure that they will not suffer discriminatory treatments simply because their school lacks adequate first aid support. There ought to be obligations to review provisions to ensure that all appropriate steps have been taken, entailing the general as well as specific school policies and provisions.

It is only when schooling is made accessible, acceptable and adaptable to all learners' needs as key implements of inclusive practice, that all the citizens' right to education is assured. In his work, '*The pedagogy of the oppressed'*, Freire insists that 'Education is a dialogical (or conversational), involving people (educators and educatees) working with each other rather than a curricular-restricted phenomena where one person acts on another … It is about teaching by appropriately transforming transfers of information' (Tailor, 1993: 43). In short, citizens are not born; they become citizens through formal and informal education settings that offer opportunities for participation and a mindset that welcomes cultural diversity. Full citizenship depends on accessing not only the right to education but a number of rights in education and through it.

3. 2 Inclusion in Rwanda vis-à-vis the global educational trends

Inclusive views and policies are also traced within studies on future education, which predicts a trend towards a global citizenship and inclusive perspectives as a way of responding to the world of numerous differences (Daniels & Garner, 1999; Davies, 1999; Gundara, 1997; Hammad, 1997; Henderson, 1998; Lloyd, 1999; UNESCO, 1994). It is stated within the UNESCO (1994) *Salamanca Statement* of *inclusion* that inclusive practice is the most effective means of combating discriminatory attitudes, creating welcoming communities, achieving education for all, and building an inclusive global society. It is with the same view that Daniels & Garner (1999) recognise that inclusion is not for the privileged societies only,

but for all in their differences, because the different local communities play a pivotal role in cerebrating the global diversity. They assert that:

> *"The concept of inclusion may be viewed as applicable in a global dimension, irrespective of the stage of development reached by a country; ...indeed there is adequate evidence, at local, regional, national and international levels, that the premise of such endeavours result in little more than the re-definition, followed rapidly by the re-marginalization, of the target groups. ...Thus within the local states, the practitioners may articulate a reality gap between their own grassroots aspirations, and those of the policy-makers. ... Increasingly, globalisation is ensuring that such localised initiatives are required to be placed within an international framework. They are required at the same time, to ensure that the individualistic requirements remain intact"* (p.1-2).

Gundara (1997) places inclusive attitudes within a worldwide historical watershed, in which the previous century's discriminatory attitudes and policies are giving way to the current global changes and international social policies of the new millennium. The author asserts that:

> *"The present century has left a legacy of intolerance and hatred but the dominant voice of the new millennium has to be in relation with the systems of reconciliation, equity and strengthening of the civic domain. ... (p. 200).*

Lloyd (1999) considers inclusion within a vision of the 21st Century. He looks at the future challenges as one of the reasons that call for change and redefinition of schooling and education as a whole, with regards to children with special educational needs. He argues that in the new century of rapid technological changes, there is no reason why learners should continue to be locked into models of schools that were designed for a different purpose at a different period of history. Citing Gerber (1996: 170), he highlights the affirmation that 'the commitment to education for all, and school effectiveness in a world of scarce resources and defected policies, organisations and planners must involve the difficulties of redistribution'. Citing Elliot (1996), he suggests that schooling of the future should be more flexible organisations with highly permeable boundaries. In other words, future education should be able to open doors to all learners.

Arguably, similar interests have continued to shape the global socio-political trends, and have contributed enormously to international human rights declarations (cited above) since the Second World War. In other words inclusive education stems from the growing global commitment to social justice and equity, to which Rwanda is expected to submit her contribution. Equally founded however, are the contentions that most of these commitments remain mere words on paper in a number of countries (Hammad, 1997). However, the definition of inclusive education provided by Kerzner et al. (1999), appears to explain the

global views, but leaves enough room to question its suitability to situations like those of Rwanda:

> *"… providing to all students, including those with significant disabilities, equitable opportunities to receive effective educational services, with needed aids and services, in age-appropriate classes in the neighbourhood school, in order to prepare them for productive lives as full members of the society*" (Kerzner et al. (1999, p.13).

This definition thus renews the study's key concerns of the difficult socio-economic and political conditions of Rwanda. It points to an educational perspective that demands drawing from the country's scarce resources in order to develop the required flexibility, infrastructure and skills for the existing systems. The study is concerned that the failure of some of these may lead to more serious problems which may include tolerating the imposition of ready made educational models and standards from the supporting countries (Davies, 1997; Harber, 1997; Kisanji, 1993), the kind of model in educational reforms referred to by Bishop (1986) and Markee, (1997) as *'centre periphery*'. The approach is also known to propagate inherent dependence on foreign ideas rather than the indigenously conceived plans, and often accused of disastrous results. In her work, '*where there are few resources'*, Sue Stubbs (2002) laments the unfortunate background of African education, and predicts a consequently misdirected future trend:

> *"Policy and practice on special education has either been imported and imposed by donors, or introduced by educated elites from those countries choosing to imitate North-based practice…African countries, despite their stated educational policies, have in the main left special education to 'follow the wind' of their external pioneers"* (p.17).

The present study thus considers that the global context in which inclusive education policies and practices are being framed, imperatively involves consideration of the constraints at the local levels, for appropriate inclusive education that would suit Rwandans.

3.3 Inclusion in situations of extreme adversity

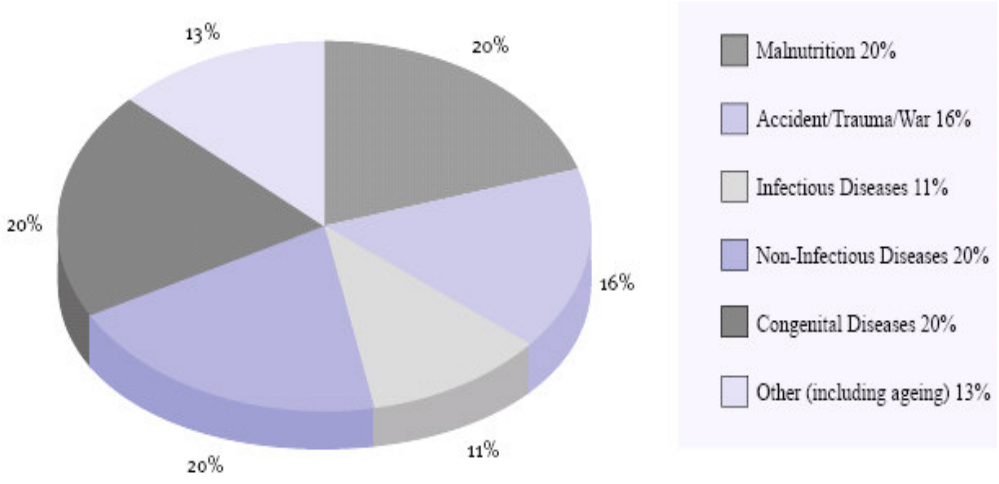
As already mentioned previously, the study is also dominated by three key concerns that question the prospects of inclusion of young people with disabilities in the Rwandan social, political and economic context: 1. The concern that the 1990s socio-political conflicts (including the 1994 genocide) were also expressions of exclusionary tendencies of the Rwandan society, questioning the opportunities open to inclusion in such a society. 2. The concern that for a number of young Rwandans with disabilities, the basic services are not necessarily entitlements nor rights, since charitable organizations are still dominantly involved in their education and rehabilitation services, and not necessarily the state. This situation raises a question as to whether there are any indigenously shared concerns on the

prospects of the children. 3. The concern that a good number of PWDs remain in their local communities, where they are cared for by family and community members despite widespread rural deprivation, illiteracy, local attitudes and absence of relevant services (Obidegwu, 2003; Republic of Rwanda, 2001a; Republic of Rwanda, 2002b; Republic of Rwanda, 2003a; World Bank, 2004c). It is thus with such concerns that this study reflects the dominant views of both the activists and analysts of the disability issues internationally, advocating for caution while translating the inclusive education perspectives on the local scale (Charlton, 2000; Christie, 1999; Helander, 1997; Mertens, 2003).

These concerns reflect particularly on the Rwandan situation as one of the Sub-Saharan African countries, where disability is still associated with inherent cultural and traditional beliefs that may influence the opportunities of including the learners into mainstream education and subsequent training for jobs. Various cultural attitudes and misconceptions linked with disabilities continue to influence family and community decisions on the fate of the disabled young people, ranging from euthanasia (killing them), neglecting them, avoiding them by pregnant mothers, caring for them (without developing their independence skills) to some rudimental vocational training (Kisanji, 1993). According to some studies in a number of African communities (DfID, 2000; Stuubs, 2002), community workers still find difficulties with families who cannot establish:

-the causes of disabilities,
-the fate of the disabled child,
-the educability and trainability of the disabled,
-the range of learning options open to the disabled children,
-the occupation and opportunities for participation in community life.

Fig. 3 Major causes of impairments, according to DfID (2000, p. 3)



Source: UN Figures in *Overcoming Obstacles to the Integration of Disabled People*, UNESCO, DAA, March 1995

Added to these difficulties are the numerous factors that cause disabilities. It is noted moreover, that the ignorance and poverty-related causes such as diseases, conflicts and malnutrition rank higher than the natural causes of impairments (See Fig. 3). This explains thus the high numbers and ranges of people with special educational needs and disabilities, especially in the most disadvantaged areas of Rwanda that remain unaccounted for (Republic of Rwanda, 2002a & 2002c; DFID, 2000: 3; Kristensen, 1999 & 2000).

Davies's (1997) work related to educational management carried out in Africa and other developing counties, puts the blame to the colonial legacy, continued western domination and the resulting economic and political situation of the sub-region:

> "*Much of the western management was of dubious relevance in situations of extreme shortage....When there are minimal resources, when the teachers have not been paid, when children are taking turns with chairs and classrooms, and when complex patterns of family obligations and political deference constrain certain administrative behaviour, then the model of total quality management appear inapplicable. Daily financial and cultural survival may demand very different management models"* (p. 133).

Given the background of the Rwandan situation in general and the conditions of people with disabilities in particular, the emerging critical challenges to educational planners and policy makers are obvious. However, this study is particularly spurred by encouraging experiences in similar conditions. Through a number of case studies reflecting phenomenal success stories in Africa and Asia for example, Sue Stubbs (2002) responds to the question as to whether inclusive education is really practical, particularly in countries with few resources and many challenges. The answer is surprisingly positive:

> *"…Yes, some of the best examples of IE are based in poorer countries of the South. IE is far more practical than segregated education. It is far more practical than just excluding groups of children and then having to deal with the consequences of high rates of illiteracy and passive, dependent citizens…"* (p. 45).

Accordingly, though this study dwells heavily on the extreme difficulties entailed in educating disabled children in the same educational setting as other children, it is also strongly inspired by testimonies of successful experiences observed in schools with similar challenges.

3.4 Inclusive education and Rwandan development

> *"… I believe that all education proceeds by the participation of the individual …. He becomes an inheritor of the funded capital of civilization. … I believe that the only true education comes through the stimulation of the child's powers by the demands of the social situations in which he finds himself. … I believe that this educational process has two sides-one psychological and one sociological; and that neither can be subordinated to the other nor neglected without evil results following. ... I believe that knowledge of social conditions, of the present state of civilization, is necessary in*

> *order to interpret the child's powers … In sum, I believe that the individual who is to be educated is a social individual and that society is an organic union of individuals. If we eliminate the social factor from the child we are left only with an abstraction; if we eliminate the individual factor from society, we are left only with an inert and lifeless mass …"* (John Dewey' s pedagogic creed, Art. I, 1897, p. 77).

The emerging interpretation from Dewey's (1897) pedagogical creed above is that both the individual and society are inseparable and complementary entities, and by focusing on these as one, education will also lead to the developments of both. In other words, this study is also in support of the proponents of education as key to development, recognizing the fact that by educating every citizen is also a means of enabling positive changes of both the individual and his/her society (Dewey, 1929; Kassam, 1995; Munyatwari, 1988; Nyerere, 1978; Republic of Rwanda, 2003a; Rutter & Rutter, 1992). The argument is based on the view that through education an individual acquires skills and values that would upgrade him/her to the level of an actively contributing member of his community and the wider society. In this sense, it is understandable that a disabled person like any other disadvantaged member of the community would be enabled through appropriate education and training to participate actively and independently in activities that concern personal and community life, rather than as a dependant on others. It is in fact suggested that through inclusive education approaches both the young disabled individual and the wider society s/he lives in, are adequately prepared for participation on equal basis. It is consequently argued that when young people are prepared in separate educational settings (or special education settings) while growing up, social and psychological barriers between them are unconsciously raised, and are thus not adequately prepared to work together on equal terms, and for equal benefits of a society they commonly belong to.

In his earlier work on *'the interdependence of education and development in Rwanda'*, Munyatwari (1988: 7) had argued that there was evidence that education contributed directly and indirectly to development, but the *'egg and hen'* relationship between the two was also evident, because the two are urgently required by the country. In the same respect, this study argues that education, inclusion and development are all equally urgently or relevantly required by Rwandans, but the question remains as to whether the country should invest more in its people through their education and training, or in the infrastructure and tools they use for development. Like Munyatwari (1988), the study maintains that it is more important to determine which development is required, which type of education is most desirable, and therefore, which interests should be preserved for either process. In all the cases thus, the people stand out as the central focus of both developments and education, because education targets to develop people and good development implies benefits to people. Therefore, the more people are enabled by education to participate in development, the more relevant it is,

and this perspective encompasses the disabled people too, as potential contributors to the development of their societies.

In its interests in inclusive education for the disabled children, this study is drawn into the philosophy of revolutionary educationalists that have associated education in the developing countries with liberation of the society and the individuals. It is particularly associated with Freire's (1972) views on exploration of dialogue and possibilities for liberatory practice in which he suggests a rationale for pedagogy of the oppressed, or as a cultural action that treats people as objects that are productive rather than subjects that are submissive. Julius Nyerere's post independence educational philosophy expressed in his '*Dar Es Salaam Declaration'* (Kassam, 1995: 250; Nyerere, 1978: 29-30). He made a ringing call for education to be directed at helping people to help themselves *(Kugitegemeya)*, and to approach it as part of life people live, and inseparable from it. His interest in education for 'self-reliance' shared a great deal with Gandhi's views (Kassam, 1995; Samoff, 1990), in a notion of a 'banking education' for it was concerned with counteracting the colonialist approaches, which they jointly saw as dominant, too formal, enslaving, oriented to 'western' interests and norms, and therefore perpetuating underdevelopment and dependence (Kassam, 1995; Nyerere, 1998). For him education had two key functions, to:

1. Inspire both a desire for positive change, and an understanding that change is possible,
2. Help people to make their own decisions and to implement those decisions for themselves.

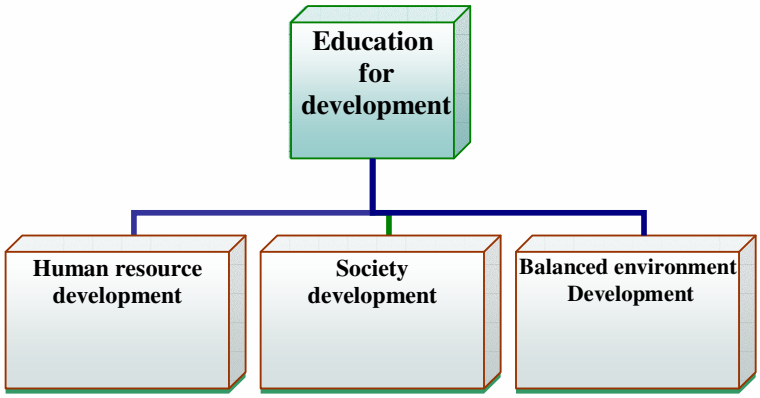
Though, the two educational thinkers' draw their motivations from different social experiences (Freire in Brazil and Nyerere in Tanzania), the study notes that their advocacy for an education that is relevant (through 'Popular education' by Freire and 'life long education' by Nyerere) certainly left considerable impact on their societies. Freire's insistence on 'situating educational activity in the lived experiences of participants' has opened up series of possibilities for the way educators can approach practice for example (Freire, 1995; Taylor, 1993), just as the policy of 'education for self reliance' in Tanzania (Nyerere, 1998) has changed the Tanzanian society in comparison to the rest of the neighbouring sub-region.

Hence, this study takes interests in their ideas in consideration of the big number of disabled young Rwandans who are debased to the level of perpetual dependence on their family members, simply because they lack simple skills and tools, and therefore not enabled to participate equally in their society. Clearly, such dependency is a heavy reliability to both the individual and his/her family, or the wider community to which s/he owes survival. In fact, the DfID (2000: 4-5) issues paper on 'Disability and development' revealed that households in Tanzania with a disabled member also have a higher average consumption rate (60%) than

that of production, concluding that '*disability is another hidden face of African poverty'*. This includes the direct cost of disability to the impaired person, lacking necessary assistive devices and training; the burden of care that usually falls on mothers or other female relatives, by increasing their workload further or taking their valuable time away from the daily struggle to make a living. The burden of care may also fall on other children, usually girls, who may have to miss school to remain at home to care for a sibling or other relative with a disability. On the other hand, the economic benefits of reduced disability and morbidity are numerous, and include increased productivity, greater opportunities to obtain better-paying jobs, and longer working life expectancy.

The idea being stressed here is that inclusive education should be perceived as a means of preparing both the individual and his entire society for development. It should be able to liberate the disabled persons from all barriers including stigma levelled against them by the society, by empowering them with necessary capacities, and thereby reducing their dependence on others. It is thus being argued that an educated disabled person is also an empowered individual, capable of participating in development activities at equal basis with other members of the society. Similarly, a developed society is one that permits and enables everyone to submit his/her best contribution towards its development. It is noted however, in Rutter & Rutter's (1992: 1) discussion about individual development, that 'Development' is one of those familiar concepts that seeps almost unnoticed into the conversations of educators concerned with the development of people. In other words, it is about self reliance of both the individual and the society he is part of. The argument is supported by Munyantwari's (1988: 41) argument about education for the development of the Rwandan society, who underpins three key interrelated components: 1. *the development of man into a resourceful human being*, in which the objective is to render him/her actively efficient and independent; 2. *the development of the society* (from local to the global), in which the objective is to construct a self sufficient society where all the members are actively participating; 3. *develop a balanced natural environment*, in which the objective is to establish harmony between human activities (such as scientific developments) and the ecosystem of which man is part by nature. These are illustrated in figure 4 below:

Fig. 4. The key links between development and education adopted from Munyatwari



Despite the clear distinction between the three development components according to Munyatwari (1988: 41), this study perceives a close interconnection between them. In other words, meaningful national development cannot be achieved without consideration of all the three components in its goals, just as meaningful education cannot be achieved without considering individuals, their society and their environment in its key objectives. The emerging implication is that if education is defected, development can also go wrong, and where development goes wrong, the corrections should also be able to respond with corrective (or remedial) educational strategies. Either way, this analysis stresses people as the prime factors in both education and development. Like Dewey (1897), the former educator, African thinker and Tanzanian president, Mwalimu Nyerere (1978) was also a strong proponent of 'man' as the central focus of education for development. In his Dar es Salaam declaration, he affirmed that:

> *"… Man can only liberate himself or develop himself. He cannot be liberated or developed by another. For Man makes himself. It is his ability to act deliberately, for a self-determined purpose, which distinguishes him from the other animals. The expansion of his own consciousness, and therefore of his power over himself, his environment, and his society, must therefore ultimately be what we mean by development ... So development is for Man, by Man, and of Man. The same is true of education. Its purpose is the liberation of Man from the restraints and limitations of ignorance and dependency …* (p. 27).

Nyerere's general political vision was apparently more concerned with counteracting the ills of the colonial educational legacy, and his philosophy emphasised, education for self reliance (Nyerere, 1968), education that *works for a* common good, foster co-operation and promotes equality (Nyerere, 1978). In other words, he perceived education as an empowering agent of both the people and the entire society they live in as the key to effective independence. He

stressed that education has to address the realities of life' in the society or the 'needs' of both the individual and the general society.

This study notes that when judged today, Nyerere's policies were never fully implemented because they had to operate against a background of severe resource shortage, and a world orientation towards more individualistic and capitalist tendencies that was increasingly expressed through relating education with production (Kassam, 1995). However, among the notable achievements include: primary education became virtually universal, the curriculum materials gained distinctively Tanzanian flavour, and schooling used the local language (Samoff, 1990). This study's assessment is that, although his policy could not register any immediate results, the long term achievements clearly surpassed by far the educational results registered in other societies of the sub-region, including Rwanda. These included the high literacy rate that had reached the African record level by 1980s; the unity and harmony among the many Tanzanian tribes and races was evident, and remains distinctly strong today in a region still locked in violent civil wars based on regional, racial and ethnic differences. These and possibly others explain the current democratic evolution and a slow but relatively stable economic development of the country. In reflection of the analysis thus, this study notes two important phenomena about his education for development policies with regards to disabled children:

> 1. Despite the notable achievements of Nyerere's (1968) education policy, the access to education for those with disabilities or other difficulties, received little if any mention. They were arguably considered implicitly, under the national agenda of universal primary education for self reliance.
>
> 2. There are little evidences that inclusive education was part of the education policy, making it apparent that disabled young people were supported through charity-aided special schools and centers, or left in their villages like in other Sub-Saharan African countries (Kisanji, 1995).

In light of the controversial outcomes of the Tanzanian education policy for development, this study also notes that within its ambitious Poverty Reduction Strategic Plan (PRSP), Rwanda's Vision 2020 has sets goals that are not distantly different (Rwanda Republic, 2002a; World Bank, 2004a). They include among others reducing the population working in agriculture from *90%* to 50% in two decades, transforming the subsistence economy into a market-based economy and raising out of poverty half of the population living below the poverty line. Actually, it is made explicitly apparent that education is the major tool being envisaged for these objectives (Rwanda Republic, 2002a; Rwanda Republic, 2003a; World Bank, 2004a) (See the Projections in Appendices D, E & F). In its section 3.2.1, the World Bank joint staff

assessment paper on Rwanda Poverty Reduction Strategy (World Bank, 2004a), suggests to the education policy plans, issues such as:

> *"… The main long-term priority in the Education sector is quality basic Education for All. Targets are Universal Primary Education to be achieved by the year 2010 and Educational for All (EFA) by 2015. Issues of equity and functional literacy are given special attention. Access and equity at all education levels should be coupled with ensuring quality and relevance so that education can fully play its vital catalyst role in economic growth and poverty reduction. Current strategies put emphasis on skills development, giving special attention to science and technology, especially ICT. …Institutional capacity building at a decentralized level, and community participation are key cross-cutting issues…"* (p. 22).

Like it had been pointed out earlier in this study, the high sounding policy statements ought to be treated with caution, because experience shows that much of it remains on paper (Christie, 1999; Hammad, 1999, Karangwa et al., 2005). It is noted for example that the above assertions are almost a carbon copy of the UN Millennium goals, little of which can be observed on the ground, at least in Rwandan education today as manifested by the results in chapter 7-9 in this study. The controversies between the conventional policies and the local achievements had also been noted by Koichiro Matsuura (in Osler et al., 2005: 36), the former director of the UNESCO specialist agency that promotes education and a culture of human rights, in his affirmation that:

> "*... We have to note that unfortunately, education has not always and in all circumstances served to liberate people from the barriers of ignorance. It hasn't always helped them to affirm their dignity nor to map their own destiny freely. It has also served, and continues to do so, to bolster ruling elites, to exclude and even to ferment conflicts. This is precisely because education is not just a means of acquiring knowledge, but also a vehicle for moral and ideological training available to any social organization. We question whether education in the spirit of the UN, is compatible with equally powerful claims to the freedoms for communities to determine their own culture"* (p. 36).

Given the Background above therefore, it is noted that though education was often considered as key to development in the earlier periods of independence in Africa, it might have registered disappointing results in the later periods. Zachariah (1985: 5) affirms for example that, the Washington Conference on Economic Growth and Investment in Education, held in October 1961, had explicitly recognized that education was an '*infrastructural prerequisite for nation building*' and a means of human resource development, seen as a key necessary for economic growth. However, evaluating education later from a developmentalist's position in economically dependent countries, he observed that schooling was a liberating process, in which the child is transformed from a traditional individual to a modern one, but according to the theory of dependency, the transformation that takes place in school cannot be liberating, since a person is simply changed from one role in a dependent system to a different role,

because the economic structure able to absorb all the educated is not possible under conditions of national dependency (See also the threats to inclusion in chapter 4).

The argument being raised is that disabled people in Rwanda form a large dependant population that continues to weigh heavily on their families and the country (Republic of Rwanda, 2002a & b). Therefore, as a prerequisite for effective national development, they also require to be enabled alongside other citizens through education. As already emphasized however, inclusive education emerges as an upgrade of regular education that promotes, not only empowerment through skills development, but also prepares all citizens for equal and harmonious partnership in their development activities.

3.5 Some considerations about inclusive context

It has been argued that the present study looks at inclusion as a highly placed priority on the international education agenda, and more so in the last decade (UNESCO, 1994), therefore, amid many social and economic priorities, is still slowly finding its place in the Rwandan educational programmes. The first ever special education mission report for the *Ministry of Education* of April 1999, conducted by Kristensen (1999), identified the context in which special education in Rwanda is developing and suggests ways in which inclusion could also be appropriately initiated and sustained in the following statement:

> "… *Inclusion of learners with S.E.N. has been going on unofficially. Data from Shyorongi commune indicate that at least 85 learners with disabilities are included in ordinary primary schools. It is assured that inclusion of learners with disabilities and other special educational needs also take place in other communes and demand to be supported*" (p. 6).

It is accordingly established through this mission statement that, though unsupported, inclusive education has always been practised in Rwanda, yet remains an unfamiliar concept to many Rwandan educational practitioners (See also the practice in schools in the findings in chapters 7-8).

It is however argued that the need to include young Rwandans in regular education remains fundamental, and a necessary requirement of a country whose people have been marked with a legacy of divisionism. The study thus maintains that, since there is proof that even in under-resourced societies, support to disabled people have been known to be effective (Ingstad, 1997; Helander, 1993; Stone, 2000; Vanneste, 1997), any reasons for the study to divert away from the inclusive perspective would be unfounded and unfortunate. According to Whittaker & Kenworthy (1995), inclusion works for all irrespective of the circumstances, confirming that:

> "*… There are those that argue that to allow all children to belong in the ordinary system is too expensive. We have found this not to be true. Further, we would suggest that the argument of financial resources is one based upon fear rather than any serious study of the issue. The cost of including a disabled learner is quite easily measurable but the cost to the community of excluding the same learner from their peers is incalculable …*" (Whittaker & Kenworthy, 1995, p. 10).

In respect of the situation in Rwanda therefore, it is being suggested that the envisaged scope of the present study will have to take into consideration the many challenges that the development of inclusive education faces, and the opportunities available for a wide diversity of disabilities and educational needs within the society. In other words, the study also fits itself within the paradigm that shifts away from the past narrow and categorising outlook on disability, to a more current perspective that calls for a wider approach in which the key roles that the local community is able to play are valued.

The study argues that the search for a fitting model of inclusion for Rwanda, hinges not only on the appropriate understanding of the basic rights principles underlying the current global trends (CSIE, 2002; Hegarty, 1993), but also on translating them into good practice and transmitting them correctly to the local grassroots communities. It deliberately examines the situation of disabled young people in their neighbourhoods and the capacity of this environment to provide solutions to their difficulties. The cultural sense of extended family, mutual support and peer interrelation are particularly viewed as potential sources of supports for inclusion. The experiences of the relatively recent grassroots–based innovation in justice '*Gacaca*' or traditional judicial system (Anghion, 2002; Ciabattari, 2000; Drumbl, 2000), as well as casual inclusive education experienced in Rwandan education (EENET, 2003; Suubi, 2003) are highlighted as testimonies of this opportunity (Also discussed in chapter 11 of this study).

This Study points to the fertile ground for inclusion prospects available within the recent Rwanda National Development Framework. It perceives opportunities for the empowerment of the grassroots communities in what is termed as: '*Ubudehe mu kurwanya ubukene',* or community-based solidarity against poverty (Republic of Rwanda, 2002b: 52). It is closely related with, among other policy statements, the affirmation expressed in the recently promulgated national policy of the Ministry of Local Government and Social Welfare, which underline the importance of the community-based initiatives as a base for future inclusive initiatives: "*… this offers opportunities to develop child focused, community-based programs, which encourage the inclusion of children with disabilities in the society, community activities and especially education system"* (Republic of Rwanda, 2002a: 17). Through literature support, and proven African experiences (EENET, 2003; Kisanji, 1995; Vanneste, 1997), a

warning is sounded that the Rwandan conditions of extreme resource constraints and weak managerial capacity could render the reform that concerns inclusion, a complex and unpredictably difficult process, mediated by the local as well as the powerful global influences.

Chapter 4
Opportunities and threats to inclusion in Rwandan education

With the background discussions of the previous chapter, the study perceives both the opportunities and enormous barriers to inclusion in Rwanda. Thus, the next sections will proceed by discussing these in details.

4.1 Perceived pathways for inclusive opportunities

4.1.1 Opportunities of the youths with disabilities in extended family units

The adoption of the Kinyarwanda slogan '*umnana n' uw' umuryango*' meaning *a child belongs to the extended family unit* adapted by the national policy on 'Orphans and Vulnerable Children in Rwanda' (Republic of Rwanda, 2002a: 13), was obviously influenced by dominant cultural perceptions. It is the same cultural perspective that has guided the insertion of over 400 demobilised minors into their '*core and extended families'* (p.18), as well as the unknown number of orphans that are naturally absorbed into extended families, friendly neighbours and foster homes, that form the wide extended family system in every Rwandan grassroots community (See the cases in section 1.2.2 & Appendix C1). This is perceived in this study as one of the cultural pathways through which the inclusive initiatives of the disabled children could also be supported.

In his earlier studies on family and cultural organisations of ancient Rwanda, Father Alexis Kagame (1954: 250) had asserted that the obligation of bringing up a young child in the Rwandan culture was the responsibility of the *mother* within the extended family unit at the first level, and the close supervision and support of the immediate social neighbourhood at the second level. The system directly implicated clan elders, family friends and the child's peers in the community. It is not uncommon within the Rwandan popular expression to relate the failure or the successful achievements of a young person to any of the two interrelated levels of child rearing practices (Kagame, 1954).

Consequently, the slogan mentioned above is only one of the testimonies that reveal the persistence of the same culture within the post-conflicts Rwandan society, and the potential it retains of accepting or integrating a child within the wide family. In the same way, expressions such as: *Ibyaye ikiboze irakiligata*, meaning that 'the cow that gives birth to a rotten calf will still leak it'; and *nyirumuphu niwe ujya ahanuka* meaning 'the nearest relative of the dead, should be closest to the body', all bring out the cultural emphasis on the family's

close attachment to members in difficult circumstances, rather than avoiding them (Nothomb, 1965). Kagame (1954) maintains that these values were emphasised within the Rwandan families and communities, and were key inputs to the cultural curriculum administered to the young generations. He went on to assert that:

> "*… every community in every social class, educated their children in accordance to their ideologies and means…this education was applicable to all community members, and was considered by the mothers like the fathers, as the major determinant traditional input than the social status …"* (Our translation, p. 263).

The rural communities are particularly known to cling strongly to traditional and cultural values and are often more identified with these than the urban ones. Through personal experiences, Kisanji (1995: 192) shares the confirmation that '*family structures in rural sub Saharan Africa are the sources of support*'. He maintains that in Africa and Asia, the aunts, uncles and grand-parents have specific roles to play, especially at puberty, in initiation and marriage ceremonies, placing the responsibility for care, education, welfare and employment of children and young people on competent members of the large matrix of relations. Citing Salia-Bao (1989), Kisanji (1995: 193) affirms that the '*members of the lineage help one another to build houses, farm their land, and maintain peace and unity within the co-operating groups that naturally include their disabled members'*.

Like Kisanji (1995) and Vanneste (1997), Ingstad (1997: 7–8) asserts through her experiences in community-based Rehabilitation in Southern Africa that the '*theory of the hidden disabled children in African rural areas is a mere myth'*, she affirms that the children are actually protected through what he perceives as a system of '*natural integration'*. She perceives the way forward for inclusion in the following confirmation:

> *« ...When the colonial powers withdrew, they often left behind one or two large institutions which catered to the mentally ill and mentally retarded, special classes for the blind, the deaf and with learning difficulties. These were usually run by missions or European charitable organisations located in the capital and mainly catering for children of the elite and some few other privileged. ...until today, the rural disabled people of developing countries have lived in a situation where they have been totally dependent on their close family members for care and support. But at the same time, they have had the chance to be part of a household and a local community. They live in a state of '**natural integration'** so to speak, but which may also imply elements of segregation when a disabled person for various reasons is unable to participate in activities of non- disabled persons…the developing countries have, at least in theory, a chance to move almost directly from a state of '**natural integration'** and into a more active integration policy supportive of family solidarity and the local potentials for rehabilitation … »* (Ingstad, 1997: 7-9).

The interpretation emerging out of Ingstad's (1997 argument is also shared by Kisanji (1995) and Vanneste (1997), who jointly provide the assurance that despite the gross underdevelopment, disabled youths in Africa still have the benefits of shared responsibilities

within their families, involving caring for them within the extended family structures. It is of no surprise therefore that children like Olivi (See Appendix C1), Buna and Kara (cited above in section 1.2.2 above), have found relatively safe protection in their extended families despite inadequate provisions. It is in the same way that some of the children in the few special schools, often testified that they are there because some of the relatives found it part of their responsibilities to intervene when the natural parents proved unsupportive. It goes without saying however, that much as these explanations appear convincing about opportunities open within extended families; they are still short of the explanations on the position of the disabled children, when challenges arising from the difficulties in sharing the limited family or community resources among the many members, such as school dues have to be made. A separate discussion on this perspective is envisaged by this study in the 'the perceived threats to inclusion' section 4.2 below.

4.1.2 The prospects of inclusion within the Rwandan communal spirit

The government policy document on orphans and other vulnerable children (Republic of Rwanda, 2002a) admits that little is known about the number of PWDs in Rwanda and the type of disabilities they have, but the fact that it stresses the importance of the grassroots community and focuses on inclusion of the vulnerable children, leave enough room to foresee positive orientations. The initiative of the researcher as the head teacher of the first Rwandan school to integrate the youths with visual disabilities and the subsequent support by the community (EENET, 2003), appears to have been a firm proof that the Rwandan communities are endowed with inherent inclusive potentials that await to be supported. Notomb (1965) asserts that the Rwandan culture of mutual support was often encouraged not only by action but also in numerous verbal expressions that are shared on daily basis by all community members. These include among other many popular sayings: '*Uwawe akuvuna utamuhetse'* meaning 'your relative is always your heavy burden even though you are not carrying him'*;'ntamugabo umwe'* or 'man cannot survive alone', which underline each individual member's indebtedness to relatives and neighbours. These were highlighted by Nothomb (1965: 161) in reference to the Rwandan society as, '*ubumwe and kuvind' imwe'* or bondage of family members, stressing that they formed the pillars of Rwandan community life.

It is in the same way that the inspirations to retrace the inclusive powers of the grassroots communities in Rwanda within the culture of mutual reliance, is drawn from the successful experiences of similar African societies like Botswana. Ingstad (1997: 83–107) affirms that remarkable *Community–Based Rehabilitation* (CBR) and inclusive developments were successfully realised through the leverage of the Tswana communal way of life. Accordingly, despite the enormous setbacks in the Tswana cultural perceptions of disabilities like in any

others in the sub-region, strategic planning of rehabilitation services from family compounds, (or Lolwapa), and traditional village meeting places, (or Kgotla) were able to reach even those with disabilities in the remotest communities (p. 59). Rwanda learns with interest that it is from the successes of this grassroots community–based innovation that the WHO was inspired to plan a cross-cultural model, currently applicable worldwide. Vanneste's (1997: 37) long experiences in Rwanda and Tanzanian communities also confirm abundantly available potential support in '*mothers, sisters and unties'*, which still waits to be enhanced for effective community services that involve PWDs.

In light of the above testimonies, it is important to note here that community-based inclusion in Rwanda, expects to benefit from the support of the recent national constitution of 4th June 2003 (Republic of Rwanda, 2003b) as well as other post genocide policies. The affirmation is underlined by the national community development policy strategy for example that:

> " *...community development policy for Rwanda is designed in order to bring together stakeholders in development, who operate at various levels and within the grassroots structures…in order to enable members within the structures to live in harmony, and have access to better standards of living …"* (Republic of Rwanda, 2001b, p 3).

It should be noted here that the way young people like Olivi, Kara and Buna (Seen in section 1.2.2 above) are accepted in their extended families and communities, provides adequate basis for subsequent plans for inclusion programs. This paper argues that despite considerable loopholes based mainly on functional illiteracy and poverty in the Rwandan communities, the culture of mutual respect and interdependence (Bazivamo, 2002; Kagame, 1954 & Nothomb, 1965) that can still be traced at every rural grassroots neighbourhood, offers yet an avenue to explore inclusion prospects.

4.1.3 Benefits of disabled young people within co-operative peer groups

The researcher's experiences in East African communities and G.S Gahini of Rwanda as explained in the first section (EENET, 2003), remain the major sources of motivation for consideration of peer and cooperative learning as potentially supportive to inclusive education. Detailed discussions on these strategies are apparent in the fourth part of this study. His experience were shared by Suubi (2003: 89) as a partially sighted student in Kenyan schools, as well as his study conducted in the above mentioned school, confirming that '*once sighted students got used to their colleagues with visual impairment, they worked together in a positive way'*.

The researcher's personal interest in peer collaboration approach was father attracted by the KU Leuven services for students with disabilities. The office concerned which is purportedly inspired by Fougeyrollas' (2002) model of intervention (See Fig. 20 & 21), uses the natural

and cultural links that inherently exist within the student communities, to support over 124 disabled students, including those with severe impairments. Accordingly, volunteer services are organised among peer student groups, and are able to realise support services that range from note taking, domestic care, mobility and access to lecture rooms and other services. Emphasising the inclusive perspective, the official concerned went on to explain: '*disabled students are expected to be here because they feel part of the University community, and the facilities are here as part of the university provisions for the whole student community*'. The researcher recalls similar realisations by both sighted and non-sighted learners of G.S. Gahini, which included writing a Braille dictionary together, because the blind colleagues did not have access to any dictionary.

This study's interest in peer teaching and collaborative learning is thus based on both personal experiences as well as the accomplished studies (Allen, 1976; Goodlad & Hirst, 1989; McCarthey & Mahon, 1992; Mills & Cottel, 1998; Wagner, 1982) confirming that these are potentially existent in Rwanda and are capable of supporting inclusive education. Large classes, diversity in schools and situations of limited educational resources have been known to be successfully handled through this strategy. Accordingly, learners teach each other or share pedagogically planned activities (Allen, 1976), and learners with disabilities or other special educational needs benefit from the friendly, individualized peer collaboration and interactions, in which the materials to be learnt, whether social or cognitive are matched with the learner's ability and interest, and the immediate feedback is assured. Through the natural interaction between heterogeneous peer groups, educational goals are known to be easily achieved, and long-term personal and social benefits are enhanced, by raising social motivation, a sense of responsibility and positive attitude towards schooling.

Thus, through such experiences, whether observed practice or studies, the study recognises a potential within the strategies, with which the development of inclusive education in the Rwandan schools can find support, and these are deliberately discussed in details in the fourth part of this study, under group teaching, peer teaching and co-operative learning (See chapter 11).

4.1.4 Experiences of community justice

Inclusion is also about justice and democracy for it refers to equalization of opportunities and providing level play ground for all. This study is of the view that community-supported justice is also able to offer a strong foundation for the development of inclusion. Such potential has been demonstrated by '*Gacaca*' or the recently institutionalised traditional community-based judicial system (See Appendix C2) in Rwanda (Anghion, 2002; Daly,

2002; Notomb, 1965). It had long been forgotten since the influence of foreign systems. Faced with the challenges of over 130000 genocide suspects however, and the disappointing performance of the conventional judicial systems, especially the international tribunal for Rwandans in Arusha, the powers of justice were given back to the community through '*Gacaca*' tribunals. Anghion (2002) reported that Rwanda is rebuilding its physical and administrative infrastructure in response to its most difficult task of fostering reconciliation between the Hutu and Tutsi, and 'Gacaca' Tribunals represent a remarkable democratisation of justice for a people accustomed to dictatorial authority, offering a voice and perhaps a therapeutic catharsis to survivors. Erin Daly (2002) underscores the powers and weaknesses of '*Gacaca'* in the following observation:

> *"If the genocide was widespread, so is Rwanda's innovative response…The* 'gacaca' *project has much to recommend it. It could very well help the obscene backlog of cases piling up in the conventional courts. Furthermore, as a grass-roots effort, it could help to rebuild the communities that have been so profoundly damaged by the genocide. However, the* 'gacaca' *process as currently envisioned does not solve all the problems of the conventional approach, and in fact creates some very serious new ones. … Rwanda could meet many of these concerns, while simultaneously reinforcing* 'gacaca's *potential contribution to the rebuilding of the Rwandan society, by shifting the authority of the 'gacaca' tribunals from the power to convict and punish, to the power to grant amnesty and assist in reconstruction"* (p. 356-7).

In other words, this study finds the *'gacaca'* tribunal also an expression of the Rwandan community's potential ability to provide services for its people. The traditional system is commonly referred to as restorative justice or grassroots justice (Anghion, 2002; Ciabattari, 2000; Drumbl, 2000) because it does not necessarily lead to penalties, but may mean justice through reconciling or reintegrating victims and criminals of the same community. This might involve community service, tilling the fields of victims, collecting firewood and drawing water, donating produce or money, assigning one's sons or daughters to help another family (Ciabattari, 2000). Though some analysts such as Daly (2002) and Professor Mark Drumbl (2000) argue that '*Gacaca'* may in fact aggravate ethnic identity politics within the highly interdependent yet dualist nature of the Rwandan society, this paper takes more interest in the inherent potentials within the Rwandan grassroots communities, demonstrating that members can work together for justice and harmony. It is on the same ground that opportunities for planning community-based inclusion for young members with disabilities are perceived, because cultural support within the community is also part of it.

4.2 Perceived threats to inclusive opportunities

4.2.1 The situation of the disabled people and their exclusion

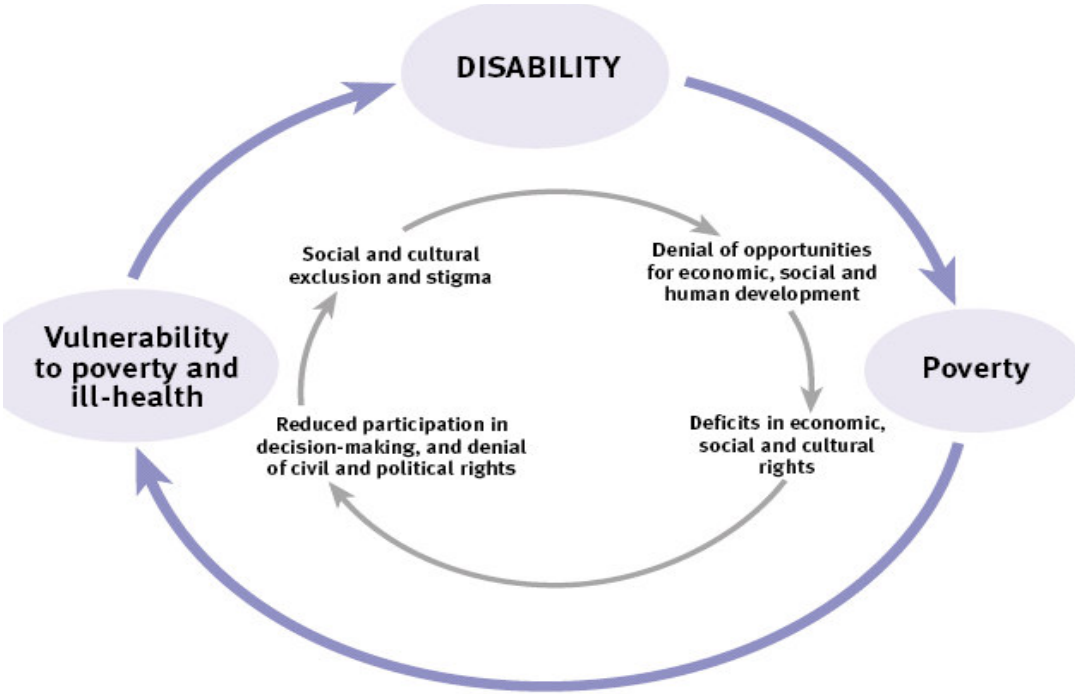
As explained above, the economy of Rwanda ranks among the last ten in the world, foreign aid accounted for 42.6% of GDP in 1998 and about 63% of the families still live under the

poverty line (Republic of Rwanda, 2002b). The implication of this economic situation points to the obvious dire deprivation and needs in the grassroots communities, where the poor state of health services and rural poverty still remain the major causes of impairment (See also Fig. 1 & 3). The disabled people in such environments are pushed at the lowest levels of deprivation, or are kept mired in '*the vicious circle of poverty, vulnerability and disabilities'* (DfID, 2000; Turmusani, 2003; UPIAS, 1976). As illustrated in Fig. 5 below, the DfID (2000) issues paper explains this situation in the following words:

> "*Poverty and disability reinforce one and other, contributing to increased vulnerability and exclusion … people with disabilities' situation affects their chance to go to school, working for a living, enjoying family life, and participating as equals in social life*" (p. 4).

As a matter of facts, the core material needs important for life, such as food, water, health, education, clothing and shelter (according to ESCR, 1976 and ILO, 1995 standards) are hardly met by a number of disabled people in some communities of Rwanda. When these are not adequately provided by their families, they often survive by begging for them.

Fig. 5. The vicious cycle of poverty and disability according to DfID



This study notes that these are suggested as the most important needs at the base of Maslow's (1970) five-levelled hierarchy of human needs. Accordingly, when the physiological or survival needs are not catered for, there will be frustration and even other needs on the scale become less relevant. This argument explains adequately the desolation and despair the PWDs in deprived communities are subjected to, as a result of the vicious cycle of poverty;

vulnerability and disability (See Fig. 5 above for the vicious cycle according to DfID, 2000). In the same argument, it is made evident that disability is very costly to the family of the disabled person and the whole community. In other words, the cost of excluding people with disabilities from taking an active part in community life is high and has to be borne by the society, particularly those who take on the burden of care. According to DfID (2000: 4) 'Issues paper' on disability and development, this exclusion often leads to losses in productivity and human potential which includes mainly: the direct cost of treatment, including the costs of travel and access; the indirect costs to those who are directly implicated (such as carers); and the opportunity costs of income foregone from incapacity. In fact, the disabled people in developing countries are referred to by Hurst (in Stone, 2001) as '*people in the majority world'* because of their high numbers and numerous disabling factors, describing their situation as a state of 'poverty and powerlessness'. She reiterates that:

> "*If we are talking about disability in the majority world, then we need to talk both of survival and of social change. It does not seem true to call for better policies, provision and attitudes without also pointing to … millions of people locked in poverty and powerlessness* " (p. 61).

The analyses being stressed by this assertion is the unpleasant fact that appropriate plans for inclusion of PWDs in Rwanda, like in many other under-resourced communities, are some of those priorities likely to be threatened by the relentless struggle for food, shelter, health and other survival needs, to which the majority of the Rwandans are struggling to gain access to, let alone the disabled.

4.2.2 Foreign support for inclusion in Rwanda

The situation of needs explained above, obviously questions the prospects for inclusion in deprived communities of Rwanda, bringing into view the desperate need for support. It is noted moreover that the National Policy on the '*youth in difficult circumstances'* brings the latter group under the Ministry of Local Government and Social Welfare, like in many other African French speaking countries (Kisanji, 1993; Republic of Rwanda, 2002a). This alone positions all the PWDs directly for social welfare or as vulnerable groups needing support, and not necessarily for equal access to entitled rights such as health, education and training, and subsequently for equal opportunities at the job market. The traditional response to such circumstances by developing countries has always been to turn to the generous and willing Western donors and their Non-Governmental Organisations (Ingstad, 1997; Lancaster, 1999; Mittler, 1993; Stone, 1999). In fact, in his concern for the needs of children with disabilities in developing countries, Mittler (1993) attracts the attention of the richer nations towards this direction:

> *"… if we look beyond our own immediate neighbourhood, we may be appalled by the sheer size of the task that face professionals and families in trying to meet the needs*

> *of children with disabilities. As we near the end of the Century, we should be working and thinking more internationally to achieve a vision of the kind of future which we would like to see for all disabled children, ... which they are entitled as matter of right"* (p.14).

Conversely, it is also argued that foreign aids and international NGOs are responsible for perpetuating inefficiency and misguiding services for disabled people in deprived communities (Mittler, 1993; Jones et al., 2002). They are accused of lack of experiences and knowledge of the local society, of inaccurate transplantation of unsustainable models of programs from other cultures. Jones et al. (2002: 128) argue that '*NGOs are in reality grassroots reactionaries, in the service of imperialism, operating in the interstices of the 'global economy' and complementing the work of the IMF and World Bank exploitative gaols'*.

The allegation pointed out by Jones et al. (2002) that NGOs image themselves as innovative grassroots leaders and the vanguards of the civil society in order to attract funds from donors, is apparent in the UNICEF report (real lives) on the cases of Bunani (in section 1.2.2 above). The self-projecting picture portrays enormous vulnerabilities among the Rwandan youths, the saving role the organisation is playing (UNICEF, 2003), but the effort in its partnership with the readily available community support for the children is remotely emphasised. In fact, the report claims that '*in 2001, UNICEF introduced a mentoring system in which neighbours were called on to volunteer their services as caring adults'* (p.1). To Rwandans, this claim is an open bluff, because mentoring has existed among them for ages (Kagame, 1954; Nothomb, 1965), and is by no means a new invention by a UN organisation. Clearly through such claims, the attention is diverted from the appreciable cultural involvement of the extended, foster parents and neighbours (Like Thomas in the case of Buna in section, 1.2.2) who had willingly sheltered the children and shared the very limited basic resources to its own image. Such a situation also questions the accuracy with which the humane missions projected by the organisations are executed in needy communities. One of the emerging suggestions thus, is that appropriate practice for some of the NGOS, may as well involve direct partnership with the key grassroots community members, who otherwise present themselves as the willing channels through whom the targeted beneficiaries would be easily accessed.

4.2.3 The global influences

Inclusive education planning in Rwanda may arguably find its support from the growing international trends in education today which Henderson (1998: 14) like Lloyd (1999), calls the '*growing power of the civic society and the emergency of global citizenship, influencing a renewed search for common humane values'*. However, the study is unable to ignore the

strong critics levelled against the powerful global forces, which allegedly function at the detriment of the disabled and other disadvantaged groups in underdeveloped societies (Arnove et al., 1999; Jones et al., 2002; Mittler, 1993; Stiglitz, 2002; Thomas & Allen, 2000; Van de Walle, 2001). Having had a long experience with the most important funding agencies to Africa, and as a former economic adviser to the U.S Government, Joseph Stiglitz, (2002) concludes that globalisation is not working for neither the world's poor, nor for stability of the global economy as the claim goes. He puts the blame squarely on the IMF, WB and WTO, contending that they only help to set the rules to manage global trends for their own benefits.

With due consideration that the Rwandan education reforms programs are the traditional beneficiaries of the above mentioned organisations' support (Republic of Rwanda, 2002a Republic of Rwanda, 2003a), it is important to note Van de Walle's (2001: 67) warning that 'of the 305 IMF programs surveyed in less developed countries between 1979 & 1993, 53% had not been completed in the loan period, and 75 % of them had failed to implement 20% of the conditions'. He points to the growing clientelism and the low capacity and elitist beliefs within the government officials in developing countries, arguing that these have interacted with the international aid systems and have resulted in dragging out the process of reform. As a matter of facts, the Special Needs Education Project of the Rwandan Ministry of Education, proposed for support through UNICEF and UNDP since March 1998, has never taken off. Its planning had clearly ignored not only the potentials within the local communities, but also the already existing and struggling inclusive initiatives in schools (Republic of Rwanda 1998: 41). The researcher's own experiences express his lamentation that, all his five years' efforts in the struggle to include the blind students in a government-aided school were neither recognised, nor supported by the government and its agencies. The recommendations of the UNESCO funded Inclusive Education consultancies for the Ministry of Education in March 1999 and in March 2000 (Kristensen, 1999 & 2000) still remain on paper for example, and ironically, the same consultant was scheduled to repeat the same work, for the third time, for the same ministry with UNICEF funding in September 2005.

In light of such inefficiencies, this study perceives this as an outright failure in the collaboration between the international agencies and the Rwandan government to work for PWDs. It thus shares Emma Stone's (2001: 164) observation that globalization is a mockery for most disabled people who cannot even 'rapidly flow' in their own homes and communities let alone globally. The services and information flowing through globalisation are either not relevant or not accessible to disabled people (Charlton, 2000; Mittler, 1993; Swain Gillman & French, 1998). Such failures reinforce the allegation that, for disabled

people in under-resourced communities, the impact of globalization has been to increase their oppression, isolation, disempowerment and segregation from the mainstream activities, because they are often excluded from any decision making forums on issues that concern their lives (Charlton, 2000).

In any case, much as the assertions above may appear threateningly unrealistic, a few facts remain disturbingly eminent. The Rwandan inclusion initiatives will need to be supported, like many other current and past educational reform projects (Rwanda Republic, 2003a). This need automatically calls for the wealthy Western-based donors, as well as the international measures in terms of the UNESCO, IMF or UNICEF models and conditions implied in the above paragraphs, then the chances for the local grassroots community to benefit through participation and making their own decisions in matters that regard the rights of their disabled members remain at stake.

4.2.4 The post-conflicts cultural challenges

The violent conflicts of 1990s bring into question the legitimacy of Kagame's (1954) and Notomb's (1965) claims of abundant humanism and solidarity within the Rwandan communities. Although there are well founded claims that these qualities still survive within the Rwandan society, as evidenced in the post-genocide reconciliation and social reorganisation (Anghion, 2002; Bazivamo, 2002; Daly, 2002), the earlier studies reflecting the Rwandans as a strongly bonded people (Nothomb, 1965), still fall grossly short of adequate explanations of the divisionism that they were identified with later and the resulting violence since the post-colonial periods. It would for example be unrealistic to parallel the Rwandan social situation to Kisanji's (1995) experiences in the post-independent Tanzania, where the culture of mutual harmony or '*ujamaa programs',* which are known to have emphasised the grassroots community-base fraternity as part of the national policies. Neither would it be accurately compared to Ingstad's (1997) experiences in Botswana, where the post-independence policies had always recognised and reinforced the strength of the traditional values and the grassroots community-based decisions. Such policies were responsible for both harmony in the society and the culturally valued equality of all community members. Similar traditional culture-focused and community-based strategies had been undermined for a long time in Rwanda, and were, or are still, being lost to the more influential non-indigenous cultures that include Christian-linked values. This is evidenced by the influences the churches have in Rwandan social services notably education (all the special schools and CBR programs are church-based) and health services. The people's attitudes towards such services vis-à-vis the local cultural perceptions will be explained in the findings.

In any case, the ability for some African societies to offer support to their disabled people, also raises a question as to why there is persistent failure being registered in Rwanda, despite the closely-linked culture of the people. Are the exclusionary tendencies in the Rwandan culture against the disabled or other people who are different (also expressed through violent ethnic hatred) inherent, or is it a legacy of the colonial and post-colonial cultures? Nieto (2004: 146) defines culture as '*the values, traditions, social and political relationships, and worldview created, shared, and transformed by a group of people bound together by a common history, geographic location, language, social class, religion, or other shared identity.* Lindsey, Robins & Terrell, (2003: 41) define culture as:

> *"…everything you believe and everything you do that enables you to identify with people like you and that distinguishes you from people who differ from you. Culture is about groupness. A culture is a group of people identified by their shared history, values, and patterns of behaviour"* (p. 41).

From both perspectives of the definitions however, this study is made to understand that though the common culture, language and other commonly shared values still bind the Rwandans, the different groupings that have been developed among the people over the years, could have also emphasised the politics of cleavages rather than search for binding factors. The differences among the Rwandan people through their history, has had its toll on the way they relate to one another since the pre and post-independence periods. These differences were thus mainly expressed through the politically motivated ethnic differences, but they also indirectly reinforced the differences among the people, whether because of their religion, race or disability. The same hypothesis may thus explain why the disabled people did not receive any significant attention in the Rwandan policies and programs especially education, or why Rwandans in less dominant religious denominations are still characterised by low levels of education.

This study argues thus that social harmony stands out as a key prerequisite for inclusion developments, yet, as it was discussed in the previous sections, harmony still demand to be strengthened among the Rwandans. In other words, if inclusion has to effectively take root in the Rwandan society, some of the traditional systems and cultures of collaboration will possibly need and still demand to be reconstructed and reinforced within its policies. Because these have proved to be strong channels in other African societies, when they are understood and supported by the people.

Conclusion

Rwanda ought to take seriously the lesson from its recent past exclusionary history, for the sake of successful future inclusive education planning. A good lesson from South African post-apartheid experiences appears to be of valuable relevance. This lesson is delivered through Christie's (1999: 277) warning that '*educational reforms go well beyond the rationale of producing legal and policy frameworks'*. It is a complex, contradictory and often unpredictable process mediated by social, economic and political influences as well as the powerful global factors, especially within the conditions of resource constraints and limited managerial capacity.

This study has argued that the search for an appropriate model of inclusion that would suit the Rwandan situation hinges on appropriate translation into good practice, the basic rights principles (Hegarty, 1993) underlying the modern educational trends. It strongly stresses that the ground for this opportunity is also adequately available within the local grassroots communities. For they particularly offer the benefits of exploring the readily available local resources in terms of culture of mutual support among the members, peer interrelation and co-operative sharing of inadequate resources, still widely accepted and practised in Rwandan families and communities. The argument is supported by the Chinese experiences through Stratford et al.'s (2000: 13) study. Accordingly, 'joining with professionals; parents can be a powerful force with which slender resources can be appropriately directed towards the development of services of the children with disabilities'. This view is summed up by Vanneste's (1997) long experiences in East African communities:

> *"Africans are still limited to what people can do for themselves, or what can be provided by specialists and few unplanned school integration … By far the most positive resources are those already existing in the hearts and minds of African mothers, sisters, grandparents, neighbours, disabled persons themselves….if Community Based Rehabilitation (CBR) is to have an impact… programs must study, value, enlist and enhance these vital existing community resources…a small amount of input can bring into play a much larger amount of latent energy"* (p. 37).

It is in the same perspective that Ingstad's (1997: 9) theory that developing countries have a chance to move directly from a state of '*natural integration'* into a more active inclusion policy, supportive of family solidarity and the local potentials will find support in this study. The initiative to integrate the disabled children in G.S.Gahini (EENET, 2003) is a practical proof of this possibility, and a reinforcement of Stone's (1999) and Stubbs' (2002) observation that poverty is seldom the key barrier to integration and inclusion of people with disabilities. They claim that inclusion projects with a disability perspective can also run successfully in areas where living standards are very poor.

This study predicts fertile ground for inclusion prospects within the recent National Development Framework of Rwanda, because it empowers and supports the grassroots communities' culture of collaboration and mutual support in what is termed as: '*Ubudehe mu kurwanya ubukene'* or *'community-based solidarity against poverty'* (Republic of Rwanda, 2002b: 52). In any case, this study is of the view that the search for the way forward to inclusion in Rwanda may seem endless, and suggests a revisit to Sophocles' old advice of 400 B.C. (cited in Rogers, 1983: 163), for it appears valuable at this stage: '*One must learn by doing the thing, for though you think you know it, you have no certainty, until you try*'. The conclusion being that in the final analysis, the effective inclusion projects for young people with disabilities in Rwanda will depend on the clear-sightedness of the planners, the implementation mechanism thoughtfully put in place to counteract the ills of *'flaw policies and ineffective management'* (Lancaster, 1999: 221), while promoting healthy partnership that responds correctly to the local needs and demands.

Research Methodology

Introduction

The discussions in the previous chapter, through personal and shared experiences of the Sub-Saharan African communities underlined that by searching for a deeper understanding of the local community way of life, inclusive education for young people with disabilities could be planned even in underprivileged societies (EENET, 2003; Kisanji, 1995; Stubbs, 2002; Vanneste, 1997), and its limitations better understood. The present research thus complements other recent action researches conducted in different Rwandan communities, in an effort to address the needs of the vulnerable children through community support. They include among others: Dr. Angela Veale's (2001) '*Struggling to survive: Orphan and community dependent children in Rwanda'*; Anna Obura's (2005) '*Planning a systemic education response to the needs of orphans and other vulnerable children (OVC) in Rwanda';* and Philippa Thomas' (2005) '*Mainstreaming disability in development; Rwanda Country Report'*. Their studies provided a detailed overview of the situation of vulnerable Rwandan youths and were basically concerned with provision of information on the situation and how the improvement is envisaged through the already available resources and mechanisms within the local communities.

This study associates its methodological orientation to the dominant research preoccupations that focuses on the disabled children, who are usually bracketed within the group of disadvantaged Rwandan youths. The emerging general methodological orientation of the study thus lies within the assessment of the community's role in providing direct and indirect support to inclusive education of the disabled youths. It explores this social environment, searching and defining theoretically bound '*settings, actors, events* or *processes'* (Erickson, 1986; Miles & Huberman, 1994: 27). A qualitative methodology was thus found appropriate to explore the social networks and community structures that involve the experiences of disabled youths. The research strategy works through a combination of methods, taking into consideration the views of the key community members, seeking both in-depth focus and a wide cross section of what make up the social fabric around the disabled youth. It concurs with Erickson's (1977) affirmation that social facts are embedded in social action, just as social meanings are constituted by what people do in everyday life. It suggests under this principle that, the research is reflective of everyday life of individuals and social organization around them as well as the perceptions of the local actors. It takes Miles & Huberman's (1994) and Wolcott's (1982) view of the 'naturalist' nature of the qualitative research. The specific methods were purposively selected to elicit views, opinions and the general information as interpretive coordinates of the social complex. They privileged unstructured and open-ended approaches, able to explore the community activities and interactions.

The next chapters present detailed accounts of the methods and procedures employed in the study process; it dwells on the exploration of the social world around the disabled youths, as a means of addressing the theoretical question. The approach seeks to parallel what is referred to by Silverman (2000: 71) as '*situated phenomenology of the moral encounter'* in which data become illustrative of the social world, confirming that (p. 62), qualitative research as an unstructured exposure of a social phenomena, privileges the strategy of immersing oneself in a naturally occurring situation in order to gain first hand knowledge of the situation (also Singleton, Straits, Straits, and McAllister, 1988). Accordingly, the study did not entail formulation of hypothesises which could be proved or disproved, or could prove or disprove someone else's, it started with an interest in a problem and in the kind of thinking the researcher had been introduced to through his experiences in the field (See 1st section in chapter 1). The guiding principles here are associated with Miles and Huberman's (1984: 42) assertion that, 'Knowing what you want to find out leads inexonorably to the question of how you will get that information, and the choice of methods leads to the choice of an appropriate strategy for the search of a "full picture" that reflects a response to the overall research question'. It is with these principles that the research question was designed and the methods of responding to it subsequently developed.

Chapter 5
The research paradigm

5.1 The research question

As an attempt to address empirically the theoretical issues analysed the previous chapters, the present research projects attempts like a few others (Bramston et al., 2002; Kerig, 2001), to look into the community's contribution to effective development of inclusive education and wellbeing of young people with disabilities. The challenges to inclusion presented by the prevailing socio-economic conditions in Rwanda may seem insurmountable, but the wave of unrelenting search for effective inclusion across many societies world-wide today, are apparently inspired by lessons such as those provided by Whittaker & Kenworthy (1995) below:

> *"…The struggle for inclusive education…A struggle against educational apartheid…An educational system that segregates disabled people is increasingly offensive to all learners. It damages relationships between disabled and non-disabled people. It is grossly ineffective and a waste of our most valuable resource–human beings! ... We have to be more creative in the way we value and actively encourage difference. More direct action is required to end this educational apartheid"* (p. 1).

It is thus admitted that this study is strongly influenced by the global trends towards equal rights and a search for a level playground for all in human rights-related services such as education (Charlton, 2000; Christie, 1999; Mertens, 2003; UNESCO, 1994). It associates itself with the principles of 'index for inclusion' in their commitment to 'breaking down the barriers for "inclusive education" through supportive communities and fostering equal opportunities for all staff and students' (CSIE, 2001: 1). As a consequence of this influence, it directs its investigation towards the most immediate social environment (the families and the grassroots communities that include the local school) around young people with disabilities. It keeps its gaze at the key dimensions of inclusion notably, '*the local community's ability or potential in valuing and equalizing opportunities for all young members' development through education* (CSIE, 2002; UNESCO, 1994). The basic principles guiding the research question include:

1. The relationship between all the community inputs (attitudinal, cultural, material, social, etc.), and the development of young members including those with disabilities
2. The community as a social entity where cultural values, as well as socio-economic influences have an interactive role to play in the progressive change towards inclusive education.

Hence, basing on the fundamental principle of inclusive education that all children should learn together, wherever possible, regardless of any difficulties or differences they may have (UNESCO Salamanca Framework for Action, 1994, Art. 7), the study central question is

focused on, '*the opportunities and limitations available for inclusive learning of the youths with disabilities in the post-genocide Rwandan grassroots communities'*. It seeks to understand a 'school for all young Rwandans' in their localities.

The question ventures into an inquiry which is little explored by research interest, and is consequently associated with Sue Stubbs' (1994) earlier observations of the situation in the Sub-Saharan Africa. In her '*Critical Review of the Literature Relating to the Education of Disabled Children in Developing Countries',* it is pointed out that research relating to the education of disabled children in African countries is on the whole sparse and dubious in terms of its hard data, and it is uncritical of key concepts and is culturally blind. Through the experiences of Miles (1985), Kisanji (1981) and Tungaraza (1993), she deplores the unexplored African communities' potentials to respond to the needs of their children with disabilities. She asserts that it is already occurring as *'casual integration'* and under the support of Community-Based Rehabilitation (CBR) programmes (O' Toole 1993) that address most of the 'grass-roots' issues by involving the key community members, children with a range of impairments attend the mainstream education.

The analysis is thus critical to the orientation of inclusive education in the region, and calls for increased research within the local potentials (including traditional beliefs and practices). However, the key research question appears to be premised within three key principles blending the local environment affecting education of the disabled young people, and the thinking on disability and education in relation to human rights dimensions which has been developing globally (CSIE, 2002; Helander, 1993 & UNESCO, 1994). These premises are summarised as follows:

1 Equal opportunities, rights and social justice

Disabled children are children first like their siblings or peers. Equal rights, entitlements, opportunities and dignity are all they require from their communities or local schools. It is thus in line with social justice principles that the disabled children require these and no more than their peers and siblings.

2 Community inputs

The disabled children belong to their families and communities by nature, and the latter have inherent responsibilities in their roles as the prime supporters of the children of designing, promoting and fostering rights-related services of all their children (i.e. including them in the local education settings).

3 Local school and community influence on inclusive education

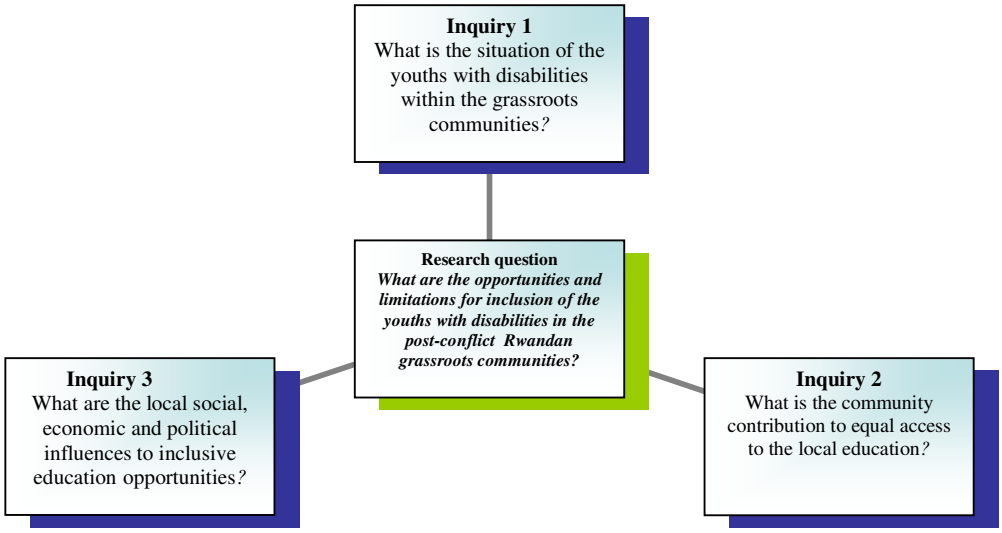
Impairment is a feature of the individual, but disability is caused by barriers (physical, attitudinal, environmental, etc.) built by the society, with which those with impairments are excluded. Hence, building an inclusive school will require the removal of most of the barriers. This implies that all forms of educational discriminations be challenged by making it a responsibility of the whole community where these are based.

The study question is thus in reflection of the three guiding premises and is an investigation through three interrelated levels of inquiries as illustrated below:

1. The first level investigates the situation of the youths with disabilities within the grassroots communities,
2. The second investigates the grassroots community's contribution to the local educational settings where the youths with disabilities are expected to benefit interactively in the local education settings,
3. The third level investigates the local social, economic and political influences to inclusive education opportunities.

The research orientation or planning strategy thus takes the design contended by Cohen, Manion & Morrison (2003: 73) as 'balancing acts which requires harmonising of planed possibilities with workable, coherent practice'. They take this stage as a very critical process for operationalisation of effective research project, arguing that the process has to move from general research to particular, from abstract to the concrete. Thus the researcher breaks down each general research purpose or general aim into more specific research purposes and constituent elements, continuing the process until specific, concrete questions have been reached to which specific answers can be provided (See Fig. 6). The approach merges the research purposes, foci and emergent characteristics, approximating Miles & Huberman's (1994: 21) suggested 'steps in building conceptual frameworks, in which the researcher begins by mapping his territory of investigation'.

Fig. 6 The research question in three interlinked research inquiries



Level 1: investigates the situation of the youths with disabilities within the grassroots communities.

The first level of inquiry restricts its investigation on the situation of the youths with disabilities within their communities. Their relationships and interactions within the family and community neighbourhood, the challenges and opportunities this situation may present to their development through education. The specific questions on which investigations were based included:

- Who are the children with disabilities (identity related inquiry)?
- What are their disabilities and related SEN according to the local perceptions?
- How are they treated at both family and community levels?
- What are the basic rights related services they have/do not have access to?
- Support: What kind of support? Who supports? How is support organised and dispensed at both family, community and school levels?
- What is the level of access to local schools, performance, barriers, limitations and motivations?

Level 2: investigates the grassroots community's contribution to opportunities of equal access the local educational settings.

The second level of inquiry focuses on the social interactions and social activities (direct or indirect) within grassroots communities. It investigates among others, Kagame's (1954) and Notomb's (1965) claims that the Rwandan communities are rich with qualities of mutual support and solidarity referred to as *'ubumwe'*. It attempts to testify whether these qualities and values indicate support to inclusive education. The inquiry targets the family members at the first level, and other key community members around the disabled members at the second level. The specific issues on which investigations were based included:

- Who are the key members influencing rights-based services (notably, their lives, health and education) for the youths with disabilities?
- Who takes what roles in community in determining the development of the children with disabilities?
- What are the major community-based barriers, limitations and motivations?
- What are the key community inputs to the local basic-rights services?
- What is the link between community and the local school activities?

Level 3: Investigates the local social, economic and political influences to inclusive education opportunities.

The third level of inquiry investigates the extent to which the strength and weaknesses, associated with the social, economic and political situation of the grassroots community have a contribution to the failure or development of inclusive education. It inquires whether the post-genocide socio-economic situation has a direct or indirect influence to the lives and development of the disabled youth, providing a perspective to their inclusion. The specific issues on which investigations on which observations, questionnaires and interviews were based included:

- What are the dominant factors (beneficial or limiting), associated with the socio-economic and political situation of their community, influencing education of young people with disabilities in the local school?
- What impact do theses have on accessibility to, the activities and performance of the local school?
- What impact do these have on the local educators and other key actors of the community?
- Are there mechanisms in place to enable access to the local school?

5.1.4 The rationale for the research question design

As already mentioned previously, the Government of Rwanda is increasingly empowering the grassroots communities and more especially the groups that had originally been marginalised, including those with disabilities (Republic of Rwanda, 2001a; Republic of Rwanda, 2003b). The community members (including those with disabilities) are now being asked to participate in both the development of their community and in matters that concern their lives. Thus, the three-levelled investigation in the illustration above (Fig. 6), attempts to explore the complex Rwandan grassroots communities in search for plausible responses to the questions posed, or rather, the qualities and capacities within the grassroots communities that appropriately address inclusive education.

The key factor to be noted about the question design therefore, is the establishment of units of inquiries, which are in fact units of foci intended to ease data collection and analyses processes of the complex social phenomena. Like Cohen et al. (2003: 75) cited above, Goetz & LeCompte (1984: 68) also take the view that the analytic units that result from the question design guide the data collection and are means of reducing raw data to a manageable level. To

establish the manageable units, the three-levelled and interrelated inquiries are expected to lead to an aggregate interpretation or response to the major question as illustrated in figure 6 above.

The research orientation is also associated to Bramston et al. (2002); Kerig's (2001) and Lindahl's (2001) research views, which assert that social scientists have increasingly come to appreciate the importance of family and community context in child development. They affirm that observing these social contexts help to uncover the mechanisms that link them with child development, and allows investigating the reciprocal and transactional dynamics in which these take place. The community and family surroundings have become pivotal for research interventions of all types, whether cognitive, behavioural, interpersonal, psychodynamic and others. Their views also affirm Martens' (2003: 140) observation that 'the researcher, who works within this paradigm consciously analyses the asymmetric social relationships, seeks ways to link the results of social inquiry to the wider research questions'.

It is within these arguments that the research strategy is shaped by the positivist stance within the post-modernism traditions in social sciences (Schostak, 2002). Accordingly, both the positivists and post-positivists contend that there is a reality out there to be captured and understood or to be approximated. It is moulded within LeCompte & Preissle's (1993: 39-44) idea of naturalistic and ethnographic approach, which is concerned more with description rather than prediction, induction rather than deduction, generation rather than verification of theory, construction rather than enumeration, and subjectivitive rather than objective knowledge. Consequently, the approach also fits approximately within Lincoln & Guba's (1985), LeCompte & Preissle's (1993) and Miles & Huberman's (1994) qualitative naturalistic research paradigm, who share a belief in lineage of *'transcendent realism'*. It implies that human relationships and societies have peculiarities that make a realist approach to understand them, derived from constructs that underlie individual and social lives. The view suggests privileging '*emic'* approaches, in which the concern is to catch the subjective meanings placed on phenomena by participants, rather than the *'etic'* approaches where the intention is to identify and understand the subjective or the researcher's meaning and interpretation of the phenomena under inquiry.

5.2 The research approach

5.2.1 Research paradigm

The study is directed towards the grassroots community, focusing on and collecting data through the sampled members' points of view and observed situations on the ground. It is thus made clear that the thick description the research question emphasizes, demands qualitative and ethnographic approaches (Geertz, 1973); LeCompte & Preissle, 1993), as

opposed to the quantitative research which is less concerned with socially linked details (Schostak, 2002). It is in this regards that the present study seeks to satisfy its inquiry by prioritising the view points of the key grassroots community members through case–based procedures. It is associated with the three interrelated research positions described by Guba & Lincoln (1994) and Mertens (2003) as, *ontological* position which investigates the nature of reality and truth in the field; *epistemological* position that questions the nature of knowledge to be captured, and the *methodological* position which asks how the knower goes about obtaining the desired knowledge and the understanding.

It is in light of this position that the present study paradigm counting on the researcher's 'trustworthiness and ability as a translator of social and cultural experiences' (Denzin et al., 2000:15) in the Rwandan society, draws from Gaad's strategic cuts (in Schostak, 2002: 67) as an 'insight for this research orientation'. In the latter's study regarding community-based development of young people, she started by drawing a circular diagram for each case containing the child's name in the middle, then drew a bigger circle which symbolized the child within the network of concepts relevant to the child's life (p. 68). The circles included the majority of contexts the child could be involved with, such as cultural, moral, traditional etc. It was soon clear to her that each strategic cut strips away the unwanted, and decided that as well as the global picture, she needed a little diagram' focusing on what she believed were three key levels:

1. the child as part of her family and the community;
2. the educational environment level;
3. The national policy level for education, which starts with local education authorities.

Similarly, the procedural strategy of this study, considered the selected *grassroots community* (within a selected '*Nyumba Kumi'* or *'akagali'*) [5] as a potential unit of inquiry and it is within this entity that two sets of different variables were developed: families or communities where young persons with disabilities live and participate interactively; local educational settings (or schools) in which inclusive or welcoming educational environment is expected for the young persons with disabilities. It is within these parameters thus that systematic strategies were set to access or approximate, reliable, representative and complete data (Silverman, 2000) through two major points of entry:

1. Sampled research zones or communities identified through reliable informants and theoretically predetermined criteria
2. Educational settings (school cluster), sampled through initial field survey and informants. These included neighbourhood regular primary schools, local educators and a Teacher Training College (TTC).

[5] The Rwandan administrative structure is subdivided in descending order: National government, *Provinces, Districts, Sectors, Cells or Akagali to Ten houses or Nyumba Kumi.*

The initially envisaged strategy prior to the first field survey (June & July 2004), taking households of persons with disabilities as the point of entry into the field, was found only useful for its many points of contacts with different members of the grassroots community, but lacked strong links with the local educational settings. Thus, whereas the family unit was maintained among the prominent sets of variables with which to elicit community or respondents' views, it was later (May, June & July 2005) deemed equally useful to complement it with sampled educational settings, in order to capture theoretically focused realities in the field.

It is thus made clear that the data collection procedures adopted had to allow continuous flexibility in choice of approach and methods for the sake of objectivity or theoretical focus (Siverman, 2000; Kirk & Miller, 1986). The stance taken by the present study is arguably in line with Hammersley's (1992) views that:

> *"… the level of precision in relation to any particular claim, should depend on the nature of what we are trying to describe; on the likely accuracy or our descriptions; on our purposes and on the resources available to us …"* (p. 163).

The suggestion is equally emphasised by Cohen et al. (2003: 138) and Hitchcock et al. (1989: 52-3) in their suggestion of qualitative ethnographic strategies that involve:

- The production of descriptive cultural knowledge of a group;
- The description of activities in relation to a particular cultural context from the point of view of the members of that group themselves;
- The production of a list of features constitutive of membership in a group of culture;
- The provision as far as possible of 'insider account';
- The development of a theory.

5.2.2 Qualitative research

It is thus stressed in the arguments highlighted above that this study adopts a position in which the views of the subjects under inquiry, or the 'other' as opposed to the 'I' or the researcher will be the priority, as a means of dealing with the complexity in the field (Schostak, 2002: 91). Accordingly, the rationale for privileging the other's view point is emphasized in the following assertion:

> *"Getting close to others means grappling with the complexity of their lives as individuals, as members of groups, as participants in the cultures and social and material structures that frame lives (p.91) … the others' viewpoints …are connected to the concrete experience of the existentially unique individual and the ways available to him or her of accounting for experience as 'real' or 'not real' through language. Being a subject positions the individual in relation to others with whom viewpoints are shared, contested, denied, represented…*"(Schostak, 2002: 219).

It is indeed with the same argument that this study considers qualitative approach appropriately placed to explore the social complexity of the grassroots communities, allowing the researcher the legitimate position as a 'subjective interpreter' (Cohen et al., 2003: 140) of

the 'situated social phenomena' (Spindler & Spindler, 1992: 72-4). It is also in line with Schostak's (2002: 18-9) affirmation that if social life is a complex of program of action, where self is oriented to others, qualitative research project successfully explores the way through.

It is thus emphasized that this research project is grounded in the qualitative, naturalistic and ethnographic paradigm, which presents a subjective view of the complex social phenomena. The phenomena include disability and inclusion and how these are experienced, perceived, interpreted and understood within the local Rwandan society. It is in exploring the phenomena that both the quantitative and the qualitative approaches appear to be individually compelling and mutually complementing, with both merits and demerits (Egelund, 1997: 8; Siverman, 2000: 7-8). However, the arguments forwarded by some researchers unanimously recommend the 'qualitative approaches' for this study (Denzin et al., 2000: 6; Flicks, 1998: 229; Schostak, 2002: 19; Silverman, 2000: 8), through whose work three key criteria that guide the choice of qualitative research design are highlighted as:

- The type of research question posed,
- The extent of control an investigator has over actual behavioural events,
- The degree of focus on contemporary as opposed to historical events.

However, according to Siverman (2000: 62), the idea of qualitative research as 'an unstructured exposure' to the world is also supported by quantitative researchers. He argues that the field research is essentially a matter of immersing oneself in a naturally occurring situation in order to gain its firsthand knowledge. It is also complemented by Miles & Huberman, (1984: 27) who emphasises that 'the omnipresence of the theory in the research design and process is the key guiding principles' for any research approach. Supporting qualitative approach, Yin (1994) maintains that it characteristically investigates complex social phenomena and is able to bring out as much perspective as possible of a given social setting; while Denzin et al. (2000: 6) look at it as a means of highlighting qualities of '*entities, processes and meanings*' that are not experimentally examined or measured. They all assert in all cases that qualitative research stresses on the socially constructed nature of reality. Schostak (2002: 19) sums up all the arguments with the view that a research project is like a conversation framed by the questions the researcher directs to the self, the other and the materiality of existence. If social life is a complex of programs of action, then the research project proceeds by unpacking this complex by seeking to uncover and describe them:

- The motives and purpose of the researcher,
- The truth,
- The motives and purposes of subjects as members of the world out there.

These qualities characterise a qualitative researcher according to Denzin et al. (2000: 5-6), as an interpretive '*bricoleur*' of complex social phenomena, whose performance reflects the art of '*collage'* or *'montage'*. Cohen et al.'s (2003: 146) suggest 'data collection in situ', and they argue that qualitative research is able to use a variety of techniques and there is no single prescription to use, rather the issue is '*fitness for purpose*' because it is methodologically 'omnivore'. It is a means according to Schostak (2002: 21), of conceiving a project within an organising framework that covers given cases. Accordingly, this study is particularly interested in the community within which the daily lives and social interactions of disabled people naturally take place, and it is through natural encounter with the field and qualitative approaches in interpreting them that these phenomena are expected to be bounded and investigated. It is arguably associated with Miles & Huberman's (1994: 5-6) views, also emphasised by Wolcott's (1982) earlier affirmation that most of the 'qualitative researches are naturalist in nature'. It is against this background thus that the naturalistic qualitative approaches emerge into focus, in which the issue of sampling and case study, or the insider's picture of reality claims a legitimate privilege in this study.

5.2.3 Case-based sampling study

A case study design is one of the approaches in qualitative research portrayed by Merrian (1998: 18-20) as suitable for studying in depth a specific phenomenon within a social unit. A phenomenon here refers to a central idea or event to which a set of actions or interactions take place (Straus & Corbin, 1990: 96). It is thus in reference to in-depth study of instances for a given phenomenon in its natural context and from the perspectives of the participants involved (Gall, Borg & Gall, 1996: 545). This simply underlines the fact that in order to gain insight, and to understand phenomena within the grassroots communities, the research has to select samples from which maximum learning of the phenomena is expected or those which are instrumental to the inquiry. Accordingly, this research project prioritises the option of using '*theoretical* or *purposive sampling'* (Silverman, 2000: 102) or criterion-based sampling (Goetz & LeCompte, 1984; Guba, 1981). In other words, contrary to Stake's (1994: 236) interest in the particularity and ordinariness of the *'intrinsic case study design'*, this study is more associated with Silverman's (2000: 103) idea of 'representativeness'. The latter goes on to assert that:

> *"… sampling demands that we think critically about the parameters of the population we are interested in and we chose our sample cases carefully on this basis … seeking out groups, settings and individuals where the process being studied is most likely to occur… sampling is selecting groups or categories to study on the basis of their relevance to the research questions, or theoretical position… and most importantly the account or the explanation you are developing ..."* (p. 104-5).

It is consequently stressed that this study is also associated with Schostak's (2002: 22) interest in a case as a useful 'framing device' in qualitative research. He argues that its boundaries involve drawing an imaginary circumference around sampled elements, individuals or any other focus of research whether a person, place or object. Ragin (1992) cited in Schostak, (2002: 22) advocates that this is *'casing'* or *'operational closure'*, which has the effect of tidying up a complex field of interactions, in such a way that the complex becomes manipulable between ideas and evidence between theory and data. Bhaskar (1993) in Schostak (2002: 23) employs the term '*whole'* or '*totality'*, because case studies are instrumental to generalization and transferability. He stresses the implication that when the social world becomes the focus of the study, case studies make no sense at all unless the process of generalization becomes possible.

It is on these arguments that this research heeds Cohen's (2003: 143) strategic argument that 'the question of sampling will arise directly out of the issue of defining the population on which the research will focus'. In other words, in deciding the sampling or from which people it will be possible to select representatives of the wider group, the researcher has to decide the groups for which the research questions are appropriate, or for which the research contexts are important. The sampling strategies are thus hinged on three fundamental criteria: representativeness of the samples to the whole group, probability of occurrence in samples and purposiveness of samples to the specific needs known as typical or critical cases.

The approach is in that case associated with the perspective that Stakes (1994) calls '*instrumental case studies*'. He contends in this sense that the sample is of secondary interest because it plays a supportive role, facilitating the understanding of something else. In this case, external validity and transferability of the results are very crucial. It is already mentioned above for example, that this study's sampled cases were not necessarily the disabled individuals, but groups or key community actors who were instrumental to the theoretical objectives of the study, as explained in the next section in more concrete details.

5.2.3.1 The sampling methods

The idea of '*framing, casing or instrumentation'* emphasised by Schostak (2002: 23) and Stakes (1994) were fundamental to the sampling methods of the cases for investigation. Once introduced into the selected zone of study or community, the researcher proceeded by: 1. taking field notes of observations made using field contact forms (See Appendix, G & H), and were purposively expanded shortly later by sampling phenomena that were theoretically relevant, 2. administering interviews or questionnaires depending on the envisaged purposes, on insider's recommendations or the researcher's prior knowledge and experiences of the

field. The following field notes tagged 'OS1B'[6] offer an insight of the field and case study methods employed:

> *"…It is mid morning in school 'B' of cluster 'S1'. All classes are in session and the familiar chanting voices are echoing loudly after the teacher --- 'rote learning indeed' --- 'the local teacher is certainly the master here and the pupil is the unquestioning subordinate subject to the many do's and don'ts' --- memories of my school days that I had known many years back were alive once again. --- Taking a quick glance at the questionnaires that the teachers have just completed for me, I decide to invite myself next to this old man --- his house is in the school compound next to the semi-permanent church building --- judging from his dressing, he must be an influential member of the local church and the school administration at that --- he looks tired and sickly, but seems to maintain his authority over the neighbourhood, ... a young woman seems to respond at his frequent orders --- From his house veranda seat, he had observed my activities in the school and was absent minded when he noted that I was next to him presenting my greetings. --- he had been quietly following an excited discussion of the group of pupils who had just completed an interview with me --- It was about how strange or smarter each one looked in the unusual camera…none had seen a digital one before --- Karagi was actively participating in the discussion too --- he made a sign around his neck and flashed out his fingers in the face of the biggest boy --- a younger boy tapped him on the shoulder and made signs too --- they all talked, argued and signed at the same time --- all the pupils rush to class when one of them tipped the rest about the approaching teacher… Karagi looked around when he was left alone --- he instead went to lead the stray cow back into the hard … The old reverend had already started his explanation about Karagi his grand son…actually a son of his niece: '… he is too speechless to be educated with others --- but he is an intelligent boy in matters that concern domestic work --- he has taught himself how to write his name --- God willing some benefactors could help ---his mother is a poor widow'. The old man pressed on in his talk, more in the interest of trying to know more about what I am up to and what I could offer… my experiences in the local culture had taught me how to read between the lines in such conversations … I delay my response and do more listening…"* (Extract of field notes, OS1B of 27th June 2005).

The extract of the field notes 'OS1B' above as an attempts to provide a picture of the samples for investigation reveals some of the following: the school '1B' was only a point of access into the local community from which what was observable emerged as sample cases, and phenomena that were deemed valuable sources of data were sampled or potentially perceived as subject of the study. The case study in this project thus may be viewed as all observable activities and interactions within the sampled sites of study; or as individual or grouped respondents sampled to provide the views through responses to interviews and/or questionnaires. As stressed in section 3 above, the sampling strategy in the present study heeds Erickson's (1986) idea of sampling as a funnelling sequence, also echoed by Miles & Huberman's (1994: 27) views of data collection as '*phenomena bounding'*, purposive and theory driven approach. Accordingly, the sampling parameters of the present study considered the following parameters:

[6]To ease the field recording, observation notes begin with the code 'O', interviews with 'I' and questionnaires with 'Q' (See table 2). However, these should not be confused with the analysis codes illustrated in table 3.

Sampling parameters	**Samples for investigation**
Settings,	school settings and community around,
Actors,	educators (PTTC tutors, teachers, heads...) opinion leaders, social workers, etc…
Events & processes	observed invents, interactions, activities,

Maintaining the same views, Silverman (2000: 107) stresses the relevance of this approach to the study focus in what he calls '*making theoretically guided choices'*. He argues that by opting to focus on particular individuals, events or processes, the researcher is electing particular theoretical frameworks or non-random but theoretical samples designed to provide a close-up. The idea was also reinforced by Mason's (1996: 100) concern on detailed or meticulous view on particular units constituting cases which are relevant to or appear within the wider universe. She even advises like Silverman (2000: 107) that '*deviant cases'* can also be made useful, if negative instances defined by the theory are sought out and used as tools to manipulate sampling and analysis activities during the research process. The ideas on case study sampling are summarised in Silverman's (2000) view on maintenance of a research focus:

> *"…Sampling is concerned with constructing a sample which is meaningful theoretically…, because it builds in certain characteristics or criteria which help to develop and test your theory and explanation.…So in qualitative research the relevant or 'sampleable' units are often seen as theoretically defined… not attributes such as tribes, gender or even age … "* (p. 105-106).

It is in light of these arguments that interviews were set for pupils who were sampled as having disabilities in selected regular schools, along with at least fifteen peers hailing from at least three of the cells (akagali) represented in the school. The selection was done in consultation with their educators. Teachers and the local educational authorities were administered with questionnaires. All of which were complemented by the field notes taken out of the observations made on their site. The perspective thought was in general terms, in the interest of the locally situated views on the disabled children and their place in the school and the community around. It is thus emphasised that the cases for the study were not necessarily focusing at singular samples like 'Kara' or the old man mentioned in extract 'OS1B' above for example, but at the social matrix that they happen to be part of, and for the broad and in-depth social perspectives these were able to generate. These were realised through theoretically sampled parameters and cases for a relatively focused investigation.

5.2.3.2 Rationale for the case-based sampling method

Besides the explanations given above, this study has identified five key and closely related reasons for the choice of the case-based sampling method:

1. Contacts in natural settings

The method allows sustained contact with participants in their local environment, capturing different social and cultural aspects at various sites, varying conditions and situations. In this way, the method brings out realistic story of sampled cases in a given social setting. It is in that sense an interpretative study seeking '*emic* meanings (Cohen et al. 2003: 138; Coles, 1989; LeCompte & Preissle, 1993: 39), or an approach that emphasizes drawing from the participants' own culture, by which the meaning held by the phenomenon under inquiry is interpreted and understood.

2. Triangular and circular cuts

Flicks (1998: 229) looks at qualitative research as inherently '*multi-method in focus'*, calling upon the use of case study and triangulation as strategies to secure in-depth understanding of the phenomena under inquiry. Drawing from the understanding, the present study heeds Cohen et al's (2003) and Schostak's (2002: 85) concerns for studies on '*multiple social dimensions*'. It involves developing triangular or circular network strategies of analysis, in which parts and whole of the data is systematically looked into and logically interpreted. Triangulation is thus one of the means through which the researcher's approaches were able to achieve broader and reliable results (also Denzin, 1989 and Morgan, 1988) as will be illustrated in the next chapter. Miles & Huberman (1994: 9) calls it an '*analytic move'* in which a sequence of sorting and sifting through materials to identify similarities between relationships of variables is arranged. It thus emerges as reliable means of addressing validity and reliability in qualitative naturalistic data (Cohen et al., 2003; Loncoln & Guba, 1985), in which the issue of trustworthiness replaces the conventional views on reliability develop into notions of credibility, confirmability, transferability and dependability.

3. Generalisation and comparison

The present qualitative research approach is in relation with the grassroots communities' social complex, and therefore a comparative investigation of the social phenomena in their relationships and generalisabilities are fundamental factors. According to Schostak (2002: 83), generalization is constructed through multiplicity of viewpoints from which comparisons and contrasts can be made. He argues that what is the 'same for me' and what is 'different for me' are identified, boundaries and groups between categories which are subjected to comparisons are generated. It is thus a reflection of qualities of flexibility and comparativeness, which are instrumental to *valid* and *reliable* outcomes or credible research results.

4. Transferability and external validity

In contrast to Silverman's (2000: 111) views, this study being concerned with social phenomena is rather complementary to Alastuurtari's (1995: 157) suggestions that 'generalisation' is possibly the word for 'extrapolation' because it captures better the typical procedure in case-based qualitative research. In which case, transferability may appear even more appropriate, because it characteristically relies more on grouped samples as cases, referred to as '*theoretical or purposive sampling'* in the previous sections depending on the study objectives (Denzin & Lincoln, 1994: 202; Guba, 1981; Mason, 1996: 93-4 and Silverman, 2000: 106). The implication here is that, the cases are sampled in order to ease the understanding of the phenomena under inquiry and the findings in a given context of study can be transferred to similar contexts with the same features. The external validity of the data results in such a situation is an important attribute, because a picture of similar results is able to be accurately duplicated in another situation.

5. Flexibility

The case study method adopted in this project is capable of taking any shape in order to accommodate the different perspectives of the social aspects of the community or study sites. It is not bounded to only a single case but to a social system to which it is supposed to adapt and purposively respond to in varying conditions during the study process. Spiro, Schmitz, Samarapungavan and Boerger (1987: 178) call this flexibility '*criss-crossing the research landscape by exploring it in many directions'*. The flexibility in this sense points to the characteristic feature of the present study that entails the researcher's ability to adapt his inquiry methods to different sites, phenomena under investigation, and to the theoretical objectives.

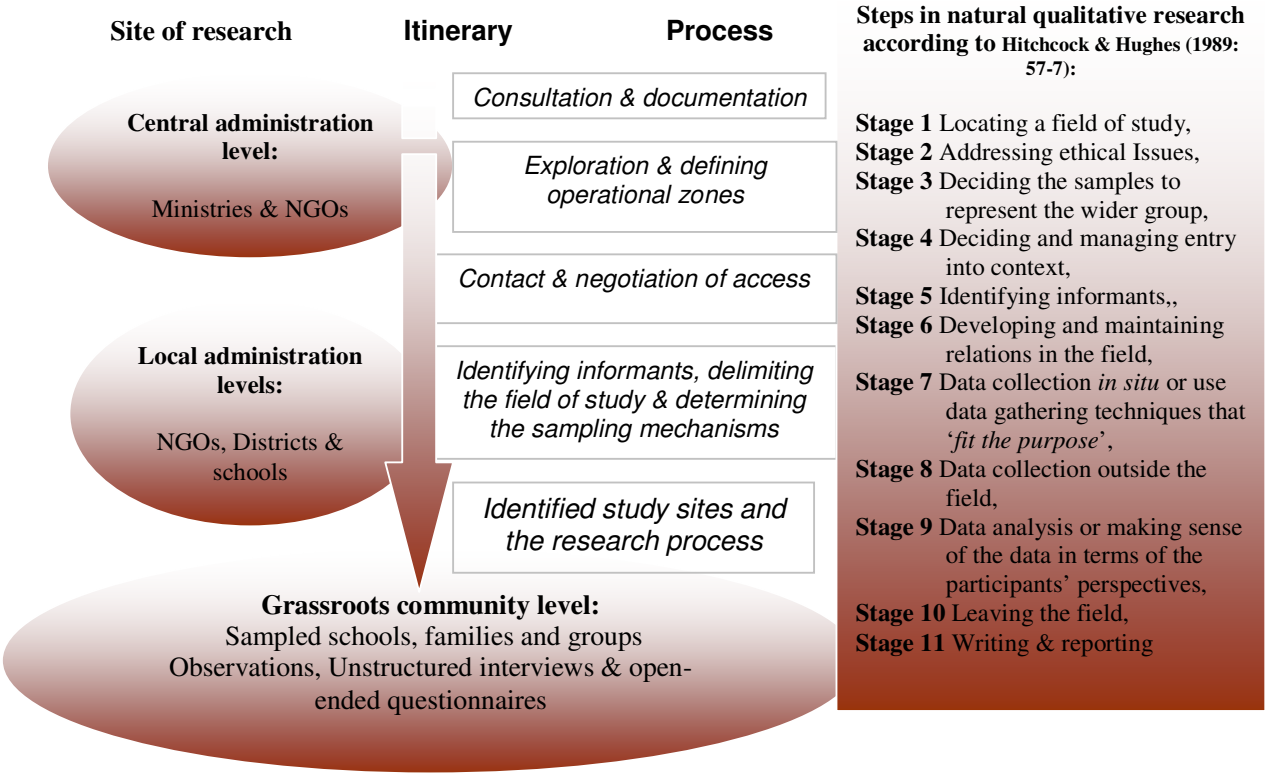
5.3 Data collection process

As already pointed out in the above sections, the study has privileged flexible, open ended or unstructured data collection approaches. The strategy has a lot to share with Stakes' (1994: 242) idea that qualitative '*case-based studies'* are characterized by the researcher getting close to activities and operations of the cases in the field, reflecting, revising meanings of what is going on. This study however takes the view that the most suitable research position for a data collection in qualitative researcher is a reflective and an interpretative one, able to emphasize the production of the locally situated meanings, from the views of actors in the local settings, or the need for accuracy in understanding the field in which the study takes place. This position is equally confirmed by Lincoln & Guba (1985: 155), but more so by Cohen et al's (2003) interests in naturalistic qualitative perspective:

> *"With mutual shaping and interaction between the researcher and participants taking place, the researcher becomes the 'human instrument' in the research, building on the tacit knowledge in addition to the propositional knowledge, using methods that sit comfortably with human inquiry, e.g. observations, interviews, documentary analysis and unobtrusive methods. The advantage of 'human instruments' is the adaptability, responsiveness, knowledge, ability to handle sensitive matters, ability to clarify and summarise, to explore, to analyse, to examine atypical or idiosyncratic response"* (p. 193-4).

Thus, as illustrated below, it is in light of the above argument that the researcher's interest to achieve the envisaged accuracy that, LeCompte & Preissle's (1993) and especially Hitchcock & Hughes's (1989) eleven stage model of research plan (on the right of Fig.7) influenced his itinerary towards the field (on the left of Fig. 7). It was accordingly planned that the data collection at the grassroots level be preceded by supportive consultations and documentations at various levels, aimed at accurate understanding of the field and laying an appropriate foundation for the ultimate core research process:

Fig. 7 The researcher's itinerary towards the grassroots community research sites



The illustration in the above procedural scheme demonstrates the study process, gained from LeCompte & Preissle (1993) and Hitchcock & Hughes' (1989: 57-7) theoretical perception of naturalistic qualitative study planning (on the right of Fig. 7 above). The process constitutes two fundamental factors, an attempt to develop a deeper understanding of the research field, and getting a clearer understanding of the phenomena under investigation. In other words, the prior consultation and documentation was a necessary phase to understand the field of study

and the subsequent study process (on the left of Fig.7 above) in the selected zones. In fact, the sampled phenomena were an outcome of the plan. Hence, the next section presents an account of the developments from the first confrontation with the field of study, through data collection process to the data compilation phase. The process is subdivided into two major parts according to the scheduled visits to the field: 1. the initial field survey and introduction to data collection phase and; 2. the follow up and final data collection and processing phase.

5.3.1 The initial field survey process

Though much of the Rwandan society and disability issues were not new to the researcher, the first confrontation with the field presented its own challenges which included, 'where' to start from and 'how' to get there. Cohen et al (2003: 144) stress that 'deciding the role and managing entry into the research context involves many issues'. LeCompte & Preissle, (1993: 100-1) suggest that 'it involves the issue of access and permission, establishing a reason for being there, developing a role and persona, identifying the 'gatekeepers' who facilitate entry and access to the group being investigated'. Lofland (1971) suggests that the initial field researcher should attempt to adopt the role of the *'acceptable incompetent'*, balancing intrusion with knowledge and when to remain apart.

It was in light of such considerations that the study started with consultation and documentation at the central government (ministerial) levels, establishing contacts and access to relevant provincial and local authorities as well as NGOs. It is through these that the potential operational zones for the study were ultimately defined and the preliminary investigation processes were planned and conducted. Consequently, the initial stage of data collection conducted in the Rwandan communities between the periods of 1st August and 15th September 2004 comprised of the first phase of the research schedule, providing an initiation to the research process. The phase is referred to in this study as the *'initial field survey'* because it involved the initial general exploration of the field of study.

The fundamental aim of the survey was thus to carry out a general survey of the social context of young people with disabilities, whose outcome would generate the criteria to determine the next phase of the study process at the grassroots levels. It was however, more in relation with the establishment of the appropriate mechanisms, with which to address the research question rather than to confront the field of study. Hence, the initial survey was set to explore a wide range of communities in different parts of the country (See fig. 8 below), investigating the following:

- The terrain and the general socio-political landscapes on which the young people with disabilities spend most of their lives, and therefore on which they study,

- The influential factors that affect the lives of the people with disabilities and their communities,
- The delimitations of the zones of the study, determine the points of entry into the field, how to get there and who participates at which point.

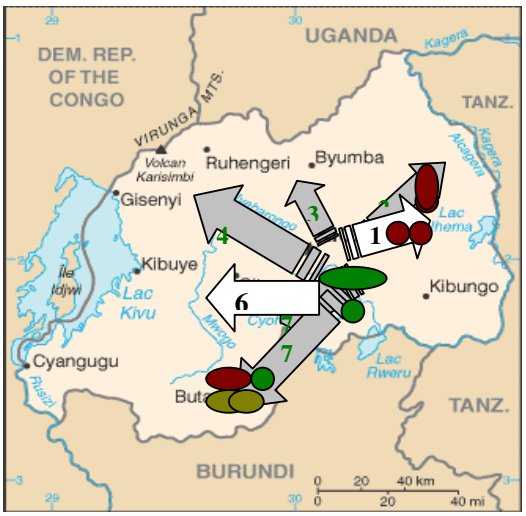
This lead to a preliminary field survey and data collection phase through observations, which greatly influenced the decisions in determining the study procedures, the research tools used and the consolidation of the theoretical framework or approaches made in response to the central question under investigation.

5.3.1.1 Preliminary field exploration

From the explanations above, it is also made evident that a general exploration conducted in much of the country was the major part of the initial field survey. This involved visiting the families and centres for the disabled children and finding out how these are part of the complex structure of the grassroots community; visiting associations and organisations of disabled people; having audiences with local leaders and officials at varying levels, and these were the key sources of vital information with which access to the grassroots levels was made possible. The major objective was to have a general view of the Rwandan communities and the realities of its social environment, and more so, the conditions in which young people with disabilities interact with their environment and other community members. The homesteads and settlement patterns, the socio-economic and physical environment in both urban and rural settings were particularly targeted.

Therefore, through the recommendations of officials in MINALOC (Ministry of Local Government), MINEDUC (Ministry of Education) and FACHER (Féderation des Associations et Centres des Handicapés au Rwanda), a plan to visit communities in five provinces was accomplished. These included: Nyamugali in Ruhengeri, Nyabihu in Gisenyi province (153 km from Kigali); Rwamagana & Gahini in Kibungo and Umutara provinces respectively (85 Km from Kigali); Butamwa between Kigali Rural and Ruhengeri (15 Km from Kigali) and four zones in Kigali city (See Fig. 3 below). It is in the same program that four major centres and their programs were visited: Inkurunziza centre for CBR (Community-Based Rehabilitation) based in Kigali city; Humura centre in Ndera (in Kigali rural); the inclusive school and the Rehabilitation centre in Gahini (95 Km from Kigali). The forum for centres was also organised by the Ministry of Education and Handicap International on 15th August 2004, through which acquaintance was made with services in other rehabilitation centres of the country, notably those in Butare and Gitarama.

Fig. 8. Map of Rwanda indicating the location of the surveyed field of study



Key

The communities and centres visited

1 Rwamagana special educational centre
2 Gahini rehabilitation & re-education centres
3 Nyamugali in Ruhengeri
4 Nyabihu in Gisenyi
5 Gitarama & Gatagara rehabilitation & ed. Centres
6 Gisusnzu in Kibuye province
7 Butare centres

Rehabilitation centres

Special education centres

Rehabilitation & special education centres

It has to be explained here however, that the centres visited were not specifically singled out as objects of the research since the theoretical focus did not necessarily envisage these, but the primary objectives were mainly exploratory in order to obtain adequate information. Out of the preliminary explorations however, adequate information was collected, with which a strong foundation for ultimate study was laid, including: understanding and establishing the sites for the study, mobilising resources, establishing and testing the appropriate methods and procedures as explained below.

5.3.1.1.1 The major outcome of the initial field exploration

The consultation and survey which took about four weeks lead to the following major outcomes of the study:

- Through the centres[7] visited and FACHER, 11 volunteers (especially social workers) were identified and were willingly ready to act as informants in the local communities they knew quite well,
- Out of the 5 provinces visited, criteria for selecting and delimiting specific communities for the study were established as outlined below,
- Through the observations made of the settlement patterns, terrain and the general society, a general picture of the context within which disabled people lives was constructed,
- The earlier view that the study would be confined to the selected Nyumba Kumi was found less feasible, because it became clear that it would limit the study to a geographical confinement, declaring some cases irrelevant because they are outside the limits, and would consequently render the study inadequate, or theoretically dilute. It was found more appropriate thus to sample key families, individuals in a key group (peers, siblings, teachers, etc.) and regular schools in the communities, from which an outreach network would be established and a study limit would naturally develop, through theoretical saturation.

[7] Inkunziza is also a protestant church involved in Community-Based Rehabilitation (CBR) services. It is especially supported by a German organization, Christoffel Blinden Mission (CBM).

These were hence the bases on which criteria were established giving rise to three potential zones for the study: **'C1'** in Kigali urban and rural province, which combined both typically urban and semi-urban environments; **'C2'** in Umutara (in the North East) and **'C3'** in Kibuye (in the East) which are both typically rural Rwandan communities (See also table 1). In these zones of study, both communities and school clusters were identified for the study, constituting of 35 families with disabled children and 9 regular schools or three clusters of three schools in each zone of study (S1A, S1B, S1C; S2A, S2B, S2C and S3A, S3B, S3C). This strategy seems to correspond with Cohen et al.'s (2003: 144) idea of 'the first stages in qualitative research', as well as Bogdan and Biklen's (1992: 2) suggestion of 'locating the field of study' first. They jointly confirm that research questions in naturalistic qualitative research are not framed by simply operationalizing variables as in the positivist paradigm; rather, the research questions are formulated in situ and in response to situations observed and investigated in all their complexities and in naturalistic contexts.

5.3.2 Field survey and selection of the zones of study

As mentioned previously, the selection of the grassroots community for the study or 'research zones' was a direct outcome of the prior general field survey (See fig. 7 & 8). The principles guiding the selection were *theoretical objectivity or focus* and *representativeness* of the phenomena being studied (Silverman, 2000: 11; Kirk & Miller, 1986: 10-11). In conformity with LeCompte & Preissle's (1993) and Lofland's (1971) ideas, it is the researcher's way of seeking access and permission, establishing a reason for being there and adopting the role of the 'acceptable incompetent', as previously explained.

Accordingly, the zones of study were considered as the first level on which the sampling strategies were also based, evoking Silverman's (2000: 102) idea of 'making a lit out of a little', in which, a case in such representativeness is expected to lead to broader inferences. It is in the same perspective that the survey and sampling process takes note of Schostack's (2002: 65) observation that at each step of the research process, a map of the problems and opportunities emerge and create optimum conditions for the next steps. Similarly, through the survey and close investigation of the representative community zones, three unpredicted issues emerged on which the criteria for the selection of the zones of study were made:

1. It was no longer theoretically feasible to delimit the zones of study in terms of Nyumba Kumi for two reasons:

    - The study objective privileged respondents' views rather than the geographically limited source of data,
    - The settlement pattern appeared so unevenly distributed that a boundary-bound survey would lead to unbalanced results. The zones of study were thus selected on the

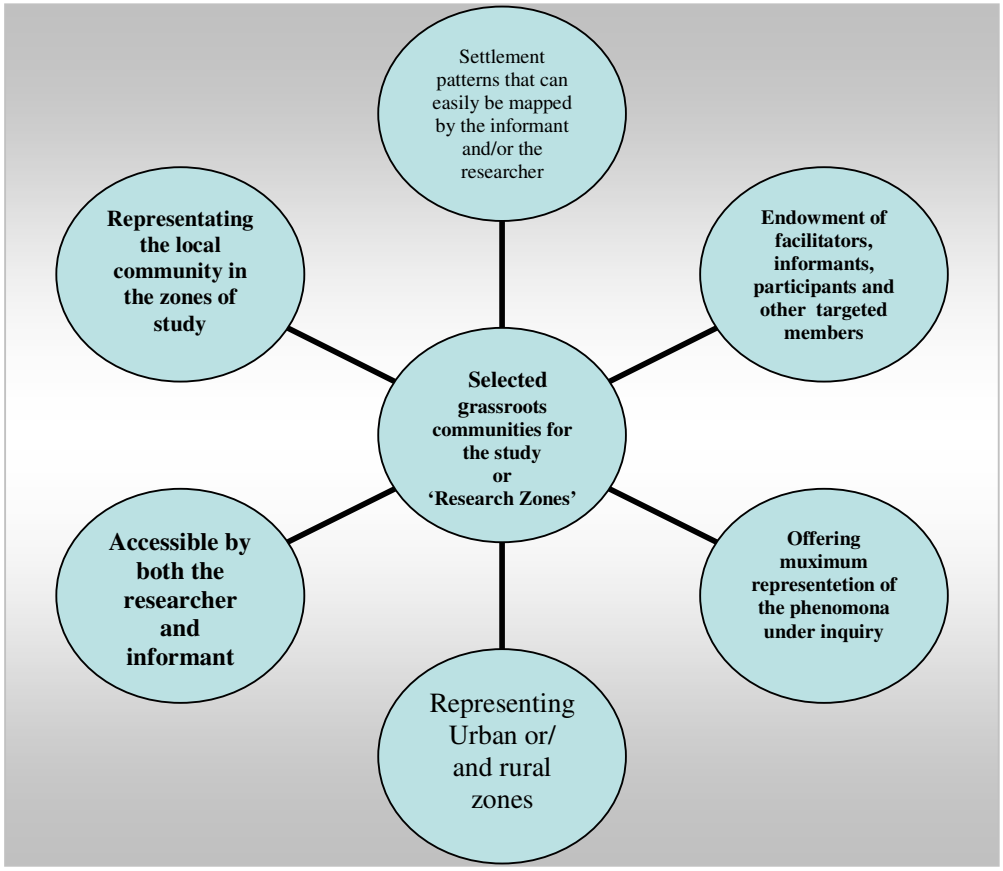
basis of their capacity to represent the local community or/and avail enough ground on which to elicit the local perspective.

2. The previously envisaged idea of conducting a pilot study in a specific community was also found unnecessary, because the preliminary exploratory phase had provided necessary information for the next,

3. Though schools had not earlier been envisaged as the focus of data collection, they also emerged as potential sites for the next research phase.

It is from the reflections on these and more issues that the criteria for determining the 'research zones' (apparent in fig. 9 below) were constructed.

Fig. 9. Criteria for selection of the grassroots communities for the study



Chapter 6
Practical considerations

6.1 Research practice and tools

The selection of research zones in accordance to the criteria above marked an important step in the researcher's entry into the field and the beginning of his in-depth inquiry. This also meant that critical preparatory arrangements had been set: the informants had to be selected, the research instruments had to be developed and a program for the research had to be scheduled as discussed in the next sections.

6.1.1 Selection of informants

It is deemed important to point out at this stage that whereas the collection of adequate data and the realisation of reliable findings were the principle objectives of the study, equally preoccupying was access to the source of data in the field. Consequently, reliable informants were perceived as holders of the key to the entrance into the process. Cohen et al. (2003: 145) also agree that finding reliable informants is a key stage in qualitative research process, and it involves identifying people who have the knowledge about the society or group of people being studied. They are complemented by Hammersley & Atkinson's (1983: 73) and LeCompte & Preissle's (1993: 95) views of the qualities of reliable informants:

- Reliable,
- Representative (of the range of group, of issues, of situations, of views, of status, of roles being studied),
- Be able to understand different settings,
- Knowledgeable and have expert understanding of the situations,
- Central to the organisation or situation,
- Be critical gatekeepers to avenues of inquiry,
- Must have good relationship with 'other' in the group or situation being studied.

It was thus in consideration of these that out of many who voluntarily accepted to offer their services, at least eleven of them were very well acquainted with the selected communities, were known in the community and were able to guide the researcher in the different families and to other key grassroots community members and activities. Their selection was critical to both the entry into the field and to the data collection process as reiterated by Schostak, (2002) in the assertion:

> *"…To get my bearings in unfamiliar surroundings with strangers can be facilitated if there is a guide, someone who will introduce me to this scene…to prepare for entry, I need to identify the 'dramatis personae that compose this world….so, to engage with street corner society an informant, a gate keeper has to be found who can pave a way for meeting others without arousing suspicion and hostility…" (*p. 25).

Through Inkurunziza C.B.R centre for example, the local schools and FACHER; five permanent informants were finally selected for the sampled communities or study zones, while the rest admitted to help when required. Experiences in working with the disabled and the knowledge of the communities were considered very important, but personal qualities and experiences were very crucial criteria too. Mama Aru for example, is a young Muslim mother of three including ARU, a five year old boy with Cerebral Palsy. She openly confessed to the researcher that she is one of those mothers who had been ashamed of her disabled child, (ARUA) until she met a neighbour with a child of similar disabilities. She is now an experienced social worker, determined to help Inkurunziza CBR project in sensitising parents of children with disabilities of her community. She was willing to conduct the researcher through rural Butamwa (in C1) and part of the Muslim community of Nyamirambo (in C2). Innoc has a relatively mild physical disability and is a born again Christian. He is a member of FACHER and Inkurunziza church and has been for the last five years sensitising the parents of the disabled children about good practice in different parts of Kigali city and neighbourhood rural zones. The head teacher of Kiramuruzi primary school (S1A) was not only able to play a key role in mobilising his teachers for the questionnaires, his pupils and other key community members, but also in providing necessary data about the community around his school (See also table 1 for participants).

In all cases, the research affirms that informants played a key role and were central players all through the data collection process. It was through them that the valuable participants, homesteads and schools were sampled and subsequent inquiries conducted, and then an outreach network was planned around in the community.

6.1.2 Research instruments

It is already mentioned that the present research was based on sampled cases, which were subjected to observations, open-ended interviews and unstructured questionnaires. As the questions were split in three levels of inquiry (See Fig. 6), the items in all three instruments were also planned accordingly, looking out for the responses to the key questions:

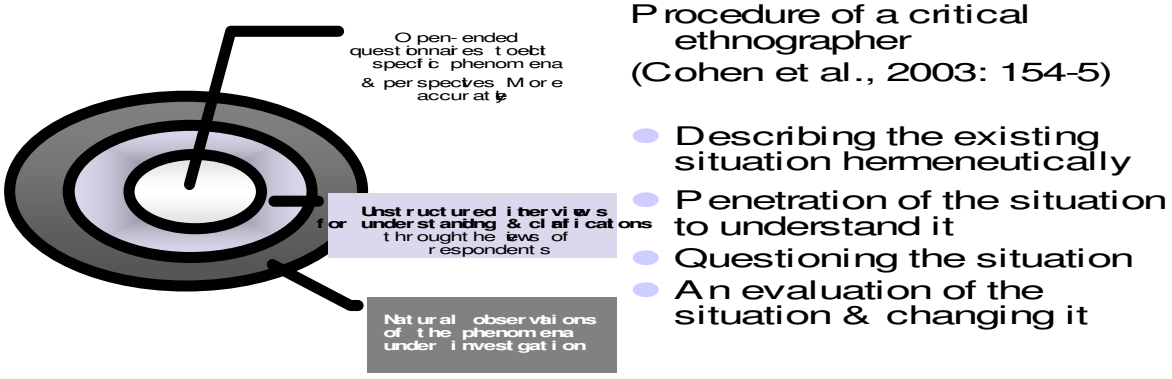
- the situation of the youths with disabilities within the grassroots communities,
- the grassroots community's contribution to the local educational settings,
- the local socio-economic and political influences to education of young people with disabilities.

It has been emphasised that the instruments are designed on the basis of eliciting the local perspective, and the questions set in all the research instruments were sensitive to this phenomena too. To this end, one of the deliberate adaptations was to translate all the

questionnaires into the local language (Kinyarwanda), not only to ease the respondents' understanding, but also as a means of leading them into a common and culturally familiar discussion in which their own perception or interpretations dominate. How data might be translated into different settings and cultures is viewed by Cohen et al. (2003: 109) within external validity perspectives. They argue through Lincoln and Guba (1985); Eisenhart & Howe (1992: 647) that 'in qualitative, naturalistic research, a clear, detailed and in-depth description should be provided to address the twin issues of comparability and translatability'. In this respect, generalisibility in naturalistic research is interpreted as comparability or transferability.

Drawing from Cohen et al.'s (2003: 154) procedure of a critical ethnographer, the study makes use of the research instruments in three interlinked levels of study, as a means of getting more and more clearer details of the features under investigation (as illustrated in Fig. 10 below). The central objective being, to derive appropriate use of the research tools, or rather, use the instruments appropriately to capture the maximum understanding of the phenomena under study. It is in a sense related to Schostack's (2002: 65) idea of the "'*long range' or 'macro' views or closer up or 'micro' views, or a combination that studies the complex relationship between the 'micro' and 'macro' or 'global' and 'local'*". Accordingly, whereas the observations were only able to provide the general picture of the phenomena under inquiry, on which a clearer orientation was built, interviews and questionnaires were respectively constructed more in the interest of getting as closer as possible to the required details or by eliciting as much as possible the phenomena under investigation.

Fig. 10 Levels of use of the research instruments



It is thus argued like Cohen et al. (2003: 109), that instruments must show that they 'fairly and comprehensively cover the domain or items they purport to cover'. In that case, the guiding principle being the fair and natural representation of the wider phenomena under

investigation, in addressing depth and breadth through the elements chosen as research samples, as a way of using appropriately the instruments chosen.

6.1.2.1 Unstructured interviews

It is already pointed out that the interviews like other instruments administered in the study, were expected to bring out different perspectives of the respondents' views, and these would be subject to clarification through triangulation and comparative analyses. According to Spradley (1979: 60), the method uses differentiated questions for their three dimensional qualities that encourage open interactions between the researcher and the respondents:

- Probing questions intended to unearth information about community life aspects. They would help the interviewee to gain access to the setting of the case in focus (Also Fontana, 1977). They probe into cultural, familial, social or economic dimensions. e.g., through discussions of activities in the community or at home;
- Descriptive questions intended to encourage the participant to explain a particular scene, events or activities. e.g., the description of activities that involve a young person with disabilities in the community;
- Contrast questions that may help to clarify terms and perspectives. E.g. through discussions of differences, relevancies, friendly and abusive terms, and other phenomena.

Spradley (1979: 83) warns however, that the questions in the interviews may sometimes be culture sensitive and are for that reason susceptible to 'biased interpretations'. Much as the argument may hold some truth on one hand, this study looks at it as strength on the other. Consequently, by both translating the questions in the local language and using mainly unstructured interviews, the investigation allows enough room for the respondents' personal views and experiences, which are accepted and subsequently elicited as aspects of his/her cultural perspective. An example is that the term, 'inclusive education' on which hinges the research project, was replaced in different circumstances by terms like, '*uburezi budaheza; kwakirira abana bose hamwe; kubitaho kimwe; etc.'* literally meaning '*non-exclusionary education, accepting all children in the same school, or treating them in the same way, etc'*, which were also culturally more meaningful to the respondents, depending on the circumstances and intervention instances.

The interviews were thus administered to different sets of respondents, taking interest in those who interacted more actively with, or had a decision making role that affected the young people with disabilities. They included their family members such as parent, siblings, peers groups, neighbours and local social workers or opinion leaders (See table 1). Silverman (2000: 122) suggests that in interviews, the respondents' answers ought to lead to a description of some external reality (facts or events) or internal experiences (feelings, meanings) whose accuracy can be counterchecked with other observations. The point being

emphasised here is that interviews in this particular qualitative research were being used to elicit the respondents' perspectives, without attaching a single meaning to their experiences (Silverman, 2000: 35), but to a wide spectrum of perspectives of the phenomena under inquiry. Living in a community as a disabled youth or an experience of a local teacher for example, was represented by what was communicated to the researcher or to each other, or to the informant, or what was observable in the field and more often, a combination of all those aspects.

The interview questions were thus set in a form of a hint or clue to an idea that needed to be clarified or explained by the respondent. Using Cohen et al.'s (2003: 278) words, 'unstructured interviews consider 'prompts' and 'probes', enable the interviewer to ask respondents to clarify topics or questions, or to extend, elaborate, add to, provide details for, clarify or qualify their responses, thereby addressing richness, depth of responses, comprehensiveness and honesty that are some of hallmark of successful interviewing'. The interview instigated the respondent into telling a story, explaining a situation or event. Their framing was admittedly influenced by a combination of Oppenheim's (1992: 65) and Patton's (1980: 206) theories of '*exploratory'* and *'guided interviews'*. They both advocate for unstructured approaches that are heuristic in nature and seek to develop hypotheses rather than facts and numbers, enable the respondent to talk freely and emotionally and to have candour, richness, depth, authenticity, honesty about their experiences. In that way, the topics and issues to be covered were specified in advance in an outline form, with which the interviewer decided the sequence of questions in the course of the interview, and the logical gaps were anticipated and closed promptly. Though they remained fairly conversational, the respondents answered relatively the same questions, thus increasing comparability of responses and the data were complete for each person on the topics.

Here below is an extract of an outline of interview plan for the Butamwa village (in 'C1') social worker who is expected to explain about her work that include an epileptic boy DAVI, from a poor family who goes to a neighbouring school:

Q.1. DAVI's case
- *His condition*
- *His activities*
- *His difficulties & strength*

Q.2. *The regular interaction with DAVI's family,*
- *Activities involved,*
- *Reactions of family, the disabled child and community,*
- *Who is involved and who does what, and how,*

Q.2. Supporting the child in school,
- *How and who,*
- *What motivates or discourages him in school,*

- *The reactions and activities in the school community,*

Q.3. The neighbourhoods,

- *Who does what and how,*
- *The prompting circumstances in the locality.*

The interview questions were flexibly constructed from such plans, and were also made longer, shorter or reconstructed according to the prevailing circumstances. They were deliberately framed within a casual discussion framework, guided through the interaction of the researchers' probing questions with the respondent's views, and eventually leading to a narrative used to satisfy the theoretical objective. The strategy is associated with Silverman's (2000: 124) *'realistic approach'* which, according to Miller and Glassner (1997: 103) too, is a way of thinking about how respondents use the culturally available resources in order to construct their stories. They both contend that the idea is to capture the respondents' own perspectives through cultural stories, because the unstructured interviews deploy these narratives to make their actions explainable and understandable to those who otherwise may not understand the local environment.

The interviews in this situation parallel the methods of collecting personal stories. According to Gabriel (1998: 136), 'Personal stories are symbolic narratives, charged with emotions and personal feelings, and the ambivalent facts that they contain can easily provide important clues to the inquiry'. The respondent in the above case was encouraged to keep telling the researcher about her work experiences, and about the people and activities she interacted with on daily basis, through events and situations she had lived. The researcher's interview questions were open-ended and he complemented them with guiding questions, with which he was able to steer the interviewee's bearings into the object of his inquiry, with questions such as 'who, how, in which way, etc.' Stakes (1994: 239) maintains that a qualitative case researcher should let a case tell its own story, subjecting the researcher to interpret or seek out '*emic*' meanings held by the case. In the same way, the rich experiences held by the social workers were found considerably immense for example, and the best way to grasp the reality out of their stories was to listen to as much perspective of them as possible for eventual interpretation or reproduction in narrative transcriptions. This is reflected in Cohen et al.'s (2003: 282) ideas that '*it is often inadequate to transcribe only spoken words, because the case interviewees' statements are not simply collected by the interviewer they are in reality co-authored*'.

Through interviews, the researcher compiled taped stories of different correspondents, compared their accounts in varying community settings or viewpoints from different sampled cases, in order to increase the chances of comparability, categorisation and accurate analysis. They included 'individual interviews' which focused on individual experts; 'Group

interviews' (Cohen et al., 2003; Watts & Ebbutt, 1987) conducted with educators (teachers & district education officers) working in the same school or community and Focus groups (Cohen et al., 2003 & Morgan, 1988), conducted with pupils of the same sampled schools and neighbourhoods. According to Schostak (2002: 219), viewpoints from such sources reflect decisive organization of varying experiences, as a way of accounting for and allowing priority position in relation to others with whom viewpoints are shared, contested, denied and represented. They are reaffirmed too by Douglas (1985) as 'creative interviews' or 'life histories', contending that they allow the respondent to express themselves more freely and have a strong voice in the research report.

6.1.2.2 Participant observations

The observation methods were meant to support unstructured interviews, since it was conducted in the same site as the interviews. Supporting the idea, Adler & Adler (1994) provides a minimalist assertion that:

> *"… as members of society, we make observations of the every day world and these guide us in forging paths of action and interpreting the action of others. They also generate the kind of common sense or cultural knowledge. … qualitative observation is fundamentally naturalistic in essence; it occurs in the natural context of occurrences, and follows the natural stream of everyday life… qualitative observers are not bound,… but are free to search for concepts or categories that appear meaningful to subjects"* (p. 377-8).

The idea is however qualified by Cohen et al's (2003) and Spradley's (1980) suggestions of conducting observation through checklists and field notes of: space, actors, activities, objects, acts, events, time, goals, feelings, etc., which take the shape of a complete naturalistic observer. Cohen et al. (2003: 310), argue that by being immersed in a particular context, not only will salient features of the situations being observed emerge and present themselves, but a more wholistic view will be gathered of the interrelationships of factors, facilitating the generation of 'thick descriptions' which lend themselves to accurate explanation and interpretation of events rather than relying on the researcher's own inferences.

In any case, whereas observation methods were useful in guiding the interpretation of events, actions and reactions of the participants under investigation, this study shares Jackings, Morris and Fitz-Gibbon's (1997: 54) scepticism that observation like other instruments in qualitative studies, may lead to invalid results when the respondents change their natural response to the observation. A circumstance which was compensated by the researcher's knowledge of the local culture and understanding of ways native people react in certain situations, in which he was able to adopt his observational position appropriately. It is equally argued by Johnson (1975: 21) that observation methods generate a cultural knowledge which is at the base of understanding social aspects in a community. An example was cited in the

researcher's field notes in school 'S1B' (in section 5.2.3.1 above), highlighting how participant observation was used alongside other methods in the school community (which included 'Kara' the deaf mute boy), but also evoking the researcher's consciousness of the local attitudes reflected in his reaction to the old man's insistent questions.

In light of the above experiences, the study observes Adler & Adler's (1994: 380) emphasis on the many advantages open to observers, including the many roles that s/he can assume, ranging from that of a hidden or disguised voyeur, who watches from outside, or with a passive (electronic) presence, to the active participant involved in the setting, acting as a member and not as a researcher so as not to alter the flow of the interaction. Similarly, Glaser & Strauss (1967) emphasize that one of the great strengths of the observational methods lies in the ease with which researchers can gain *'entrée'* to settings, because it is unobtrusive and does not require direct interaction with participants. Hence, observation was conducted inconspicuously and data gathering process went on until the researcher achieved relative theoretical saturation, that is, when the generic features of the new findings consistently replicate earlier ones.

It is thus suggested, as confirmed by Cohen et al. (2003: 314); Adler et al. (1994: 380) that there is no hard and fast rule on how much observation to do, it would be appropriate to stop when 'theoretical saturation' has been reached or when observations being observed appear to be repeating the data that have already been collected or reliability has been achieved. In that way, the field notes taken in different sites were constantly subjected to cross-checking with the results from other methods, in order to bring out a more balanced understanding of the phenomena under inquiry. This strategy is also in line with Adler et al.'s (1994: 382) view that observation produces greater rigor when combined with other methods, and is a valuable source of data for enhancing cross-checking or triangulation against information gathered through other means. Hence, the major purpose of the strategy was to yield depth and/or breadth in the study, in order to enhance consistency and validity of the data, resulting in deeper understanding of different dimensions of the grassroots community's way of life.

6.1.2.3 Open ended questionnaires

Questionnaires had not been earlier envisaged for the study, but when it was deemed necessary to gain in-depth understanding of the respondents, especially their professional perspectives, they proved useful tools (See Fig. 10). Cohen et al. (2003: 247) like Wilson and McLean (1994: 3) observe that the researcher will have to judge the appropriateness of using a questionnaire for data collection, and if so, what kind of questionnaire it will be.

Thus, like interviews and unlike observations, open ended questionnaires were directed towards specified group of respondents. These were mainly teachers and PTTC tutors, from whom the questionnaires probed for their views and expert understanding of the local educational phenomena (See table also 1). The procedure is represented in Schostack's (2002) idea of map-work image in research process:

> *"… at each step in the research, a map of the problems and opportunities emerges...rather like taking pictures from different vantage points…. From a spaceship one sees the earth and its relation with the sun and planets. From the plane the scope is interconnections. Depending upon the researcher's purposes, data collection can be limited to either the long range or 'macro' views or closer up or 'micro' views, or a combination that studies the complex relationship between the 'micro' and 'macro' or 'global' or 'local'...".* (p. 65).

In the same way the interviews were conducted to get a clearer view of the field of study and hands-on experiences of the sampled cases (See Fig. 10). Wilson and McLean (1994: 8-9) on the other hand suggest an alternative of proceeding by identifying the research problem first, then to clarify the relevant concepts or constructs, and what kind of measures or empirical indicators there are of these. Either way, the open-ended questionnaires had been prepared in response to the requirements of the three levelled inquiries mentioned in Fig. 6, as an attempt to address the most pertinent issues of the central question, to which they responded. They were consequently developed to elicit the local experts' views and the local knowledge. They included for example among other items:

- *The kind of disabilities or special educational needs they identify in the local school or immediate environment,*
- *The barriers, limitations and potentials observed within the community which young people with disabilities' education face,*
- *The strategies adopted by the teachers and other educators to respond to these,*
- *The adaptation of schools to the needs of the young people with Special educational needs,*
- *The materials used,*
- *Seeking their views to the national and the local planning of an inclusive education for the community,*

The strategy is admittedly influenced by Cohen et al's. (2003: 246) theory on *'operationasation of a questionnaire'*. They suggest three phased move from general area of interest or purpose to a very specific set of features about which direct data can be gathered. These involve taking the general purpose or set of purposes and turn them into concrete researchable fields about which actual data can be gathered first; and then identification and itemisation of subsidiary topics that relates to its central purpose; and the third phase would involve formulating specific information requirements relating to each of these issues. In comparison to all other types of instruments, the questions in the open-ended questionnaires were characterised by questions on specific issues, but allowing the respondent enough

freedom to express his/her own perspective. The questions demanding specific responses (such as 'yes or no'), were in most cases leading questions which provided more open responses through explanations or clarifications of the answer.

6.2 The targeted participants in the study

As emphasised in the above sections, the study focuses exclusively on the selected grassroots communities, in which the sampled members and their activities or interactions were the subject of investigation (See table 1 below). This strategy was also guided by the principle of purposive or theoretical sampling, in which the qualitative researcher proceeded by seeking out groups, settings and individuals where processes and phenomena being studied were likely to occur (Denzin et al. 1994: 202). This implies that the inquiry did not necessarily single out any community member for his/her qualities, but at the social structure within which s/he actively interacts with other members. The sampling was guided among other things by the social aspects (relational and level of interaction and attitudes); seeking views and personal experiences of key community members who influence lives or the general decisions of the disabled young people at the grassroots level.

In order to achieve this objective, the study did not sample any particular disabilities for its inquiry, but the social context within which they occurred. Like in the school-based case in the extract 'OS1B' above, it was also apparent in the community-based case 'OC1A' of Butamwa in Kigali rural province, where CLAU a young man with cerebral palsy was part of a group which was randomly but purposively sampled, as highlighted in the field notes extracts below:

> *"…it is a narrow dusty path amid harvested sorghum fields where young boys are playing while looking after goats …it is almost on top of one of the many hills … the crowded housing of Kigali city in their sprawling pattern can be seen at a distance…here it is different though … it is a typically rural village like many others in hilly Butamwa district, with their characteristic scattered homesteads… familiar lines of young boys and girls carrying water jugs or 'ubusuna' (weaving grass) on their heads suddenly stop their chatting to gaze inquiringly at our intruding appearances…one of the boys in a faded pink shirt breaks the silence …CLAU had recognised Sayi (our informant) the social worker who supports him… The conversation is alive again…the young people are around us observing every detail, inquiring and listening at the same time… CLAU is the most actively involved of the group… we are introduced… and we get to know everyone … of course Martin asks a few questions in French, but is interrupted with many personal and almost embarrassing questions…'about his white skin…, if his bushy head can carry a pot of water…' every one laughs at CLAU s questions … no one is embarrassed to make fun of him openly though,… even the mother when we eventually met her farther uphill…everyone has a story to tell about him: '… he is funny, he is worthless, he is sometimes wise and friendly but gets violent when you do that or the other, some bad people enjoy irritating him…' we learn about their school and why CLAU is incapable of going there with them…'teachers want wise children and not the likes of CLAU …'he is a fighter and not a learner…', his mother confirmed later… CLAU*

confirms too but disagrees with many explanations…some arguments erupt and a peacefully settlement is quickly reached … CLAU gets excited about his recent fight with his brother who always teases him…" (Field notes 'OC1A' of 20th May 2005)

Two major points being emphasized in the extract above thus are: 1. the study is interested in the participants for their activities and interactions with the young person with disabilities. They know CLAU well and are capable of revealing many aspects about his life in a natural and casual manner; 2. the participants were randomly sampled (in the case of the group of young people), but the categorisation of the samples had been purposively pre-determined. i.e. the study had envisaged to sample peers, siblings, neighbours and family members in the selected communities. This should not however be construed to mean that there was no information gained from the disabled children (CLAU in this case), but rather together with community members with whom they interact, are part of the inquiry focus. It should be understood therefore that, though CLAU was an active participant in the observations conducted in the case above, the group could have as well served for similar observations if by any chance he was not around, and the observation would have been carried out until the case gets saturated (Denzin et al., 1994). In other words, his presence was complementary and completing in the sampled group, but could not be isolated from it. The key community members that were taken as participants in the study included (See also table 1):

1. The disabled community members,
2. Community members that closely interact with him/her in daily activities: parents, siblings, peers, relatives and neighbours.
3. Influential community members who influence the lives of the disabled children at the grassroots community level: teachers, social workers, leaders of the organisations of the disabled and the local community leaders.

Through detailed examples of similar studies 'living and coping in a community', Silverman (2000: 32-3) describes the approach as 'hermeneutic' because participants are sampled from different localities, and the researcher attempts to merge their horizons of meanings. He concludes that the resulting actively constructed narratives give direct access to local experiences. It should therefore be understood that the purpose of having these separate groups of participants, is aimed at collecting different view points, which may lead to valid results realised through comparative analysis of views points from different sources of intervention in the same or different categories of samples.

Table 1 Summary of participants and their expected contributions to the study

	No.	Category of expected data	Sampled grassroots community C1		Sampled grassroots community C2		Sampled grassroots community C3	
			Number (N)	**Tags used**	**Number (N)**	**Tags used**	**Number (N)**	**Tags used**
1. Families	**35**	-Family perspectives, -Affirmation, -Roles, -Activities, -Events.	**11**	**C1f**	**12**	**C2f**	**11**	**C3f**
▪ Disabled child	--			C1f1		C2f1		C3f1
▪ Siblings	--			C1f2		C2f2		C3f2
▪ Parents	--			C1f3		C2f3		C3f3
▪ Peers	--			C1f4		C2f4		C3f4
▪ Neighbours	--			C1f5		C2f5		C3f5
2. Key community members				**C1m**		**C2m**		**C3m**
▪ Social workers (also informants)	11	-Local perspective, -Affirmation, -Roles, -Activities, -Events.	**5**	C1m1	**3**	C2m1	**3**	C3m1
▪ Local educators[§§]	65		-	C1m2	-	C2m2	-	C3m2
▪ Local leaders			-	C1m3	-	C2m3	-	C3m3
▪ Others (religious leaders, outstanding members etc	13		4	C1m4	4	C2m4	5	C3m4
3. School community	9	-School perspective, -Affirmation, -Roles, -Activities, -Events.	**3**	**S1A, B & C**	**3**	**S2A, B & C**	**3**	**S3A, B & C**
▪ Educators			5		5		5	
○ Education leaders	15		7		7		7	
○ Teachers	45							
▪								
▪ Pupils	135		15		15		15	
4. Primary Teacher Training Colleges (PTTCs)	**3**	-Local educ. expert's perspective, -Affirmations, -Activities.	**1**		**1**		**1**	
▪ Tutors	15		5 5		5 5		5 5	

[§§] The targeted local educators are repeated in schools (row 3) and PTTCs (Row 4).

6.3 Sites for the study

The data collection process was restricted to the selected communities or zones as explained in the above sections, which were selectively traced following the initial phase comprising of a general exploration of many parts of the country (See, Fig. 8). Schostack (2002: 10) frames this phase within the process of finding the research bearings, arguing that a research project cannot precede such exploration. The selection of the study sites within the Rwandan grassroots communities, was not linked with any particular geographical demarcations of Nyumba Kumi or Akagali (the smallest grassroots unit), but to the social environment and experiences related to the development of young people with disabilities or in sites where their lives and interactions could effectively be best understood. The most resourceful units (sites) for the study were thus determined on the ground that:

1. all the participants (explained above) were present and in active interactions,
2. it is located within the local administrative and social Rwandan administrative structures (Rwanda Republic, 2001a) where the participants were easily accessible.

The selection of sites for the study however took into consideration urban and rural settings, in order to maximize comparative understanding of the grassroots communities in their 'broad social perspectives' (Burgess, 1984: 60). The sites established were mainly in rural zones because the sites offered a view of life for the majority of Rwandans (Rwanda Republic, 2002), but the typically urban communities (in Kigali City) were also represented, with due consideration of affluent and deprived membership. The main idea behind being, to maximize variation of cases, and even though the study sites sometimes involved '*deviant cases'* (Silverman, 2000: 107), they were still considered if they had the potential to prove the established theories and claims of the study. The example of such cases is obvious when Martin (a European colleague) becomes a subject of focus during the observation as highlighted in field notes 'OC1A' above.

Hence, the selection of sites is associated with Mason's (1996: 100) and Denzin et al.'s (1994: 202) ideas of seeking out '*groups, settings* and *individuals'* where the process being studied is most likely to occur. It is also supported by Silverman's (2000: 107) interest in deviant cases only if they are theoretically relevant, and Alastuurtari's (1995: 156) analogy of an hour glass, which emphasises the fact that it makes sense even if it means seeking out negative instances defined by the theory with which one is working. In that way, the research sites were shaped within the theoretically determined boundaries, in which the sampled cases and participants for the study were central determinants of their formulation.

6.4 Data collection schedule

The research process being predominantly based on unstructured forms of data collection, it was developed in an effort to capture views of individuals and groups in their relationships across the research field or grassroots community. All the data collection methods were thus employed to allow investigations across sampled group or sampled cases, in their multiple relationships and interactions. These features demanded a schedule explained below.

The project used Schostak's (2002: 33) example of 'four phased schedules' which progressed as follows (See also Fig. 7 above and Table 2 below): ***Phase 1*** constituted two stages that included consultation of documents at the Ministerial level; negotiation of access into the field; establishing contacts; planning and establishing practical and operational definitions of the survey (Including the initial field survey, Fig. 8). ***Phase 2*** constituted of 2 stages of core research work in selected sites; discussion of issues concerning the field; case studies construction and first data analysis to flesh out some cases. ***Phase 3*** constituted in–depth case studies, analysis and cross checking of results; discussions; writing up and further visits. The ***Final phase*** is the final report writing compiling and presentation. However, it goes without saying that this schedule was subject to changes depending on the conditions, process and programs in the course of study.

Table 2. The proposed schedule of the research project

Periods	Phase of study	Activities
Automn-Summer-2004	**Phase 1** Stage1	***First field visit*** • Consultation of documents at the Ministerial level,
	Stage 2	• Initial field survey, negotiation of access, • Establishing contacts, practical & operational definitions of the field of study,
Spring - 2005	**Phase 2** Stage 1	***Presentation of proposal*** • Discussion of issues & case studies construction,
Summer-Autumn - 2005	Stage 2	***Second field visit*** • Core research work study in selected sites • Case studies analysis of data
Spring - 2006 Summer-2006	**Phase 3**	***Compilation & Presentation of report*** • In–depth case studies, analysis and cross checking, • discussions and further visits, report writing, • Write-up, discussions and submission.
Autumn 2006	**Final Phase**	***Final thesis writing, discussion and presentation***

6.5 Data recording

The instruments for data recording discussed in the above section bring into view yet a significant methodological consideration in this study. Though it appears obvious that all the data collected was recoded, this study finds it necessary to highlight the implication of the process to the study. Among the main data recording methods were:

- Classifying and recording questionnaire data,
- Working with tapes or interview transcription,
- Field notes from observation instances.

It is however admitted that even in data recording, the study recognises its dimension of *'critical ethnographer'* suggested by Cohen et al. (2003: 153). This dimension is recognised within its concern for the underprivileged disabled young people, within which the views related to their opportunities in life, as well as some of the issues linked with their emancipation for equal place in society, are elicited, manipulated and subsequently recorded. The focus of data recording process will thus proceed by uncovering the taken-for-granted meanings or abstraction that participants have, raising their voices in which equal rights, entitlements, legitimacy, values in society and inclusiveness are fore-grounded. The researcher in a comparatively passive and unobtrusive position, will then constructively compile, record and analyse these data, fitting the research findings into the theoretical focus. Hence, since the investigations were conducted in response to the three questions, the data was also recorded accordingly. Table 3 below shows that the data recording was arranged according to the three questions, and the instruments used also served to determine the data cording and the targeted participants as explained below.

Table 3. The summary of the data recording plan

Research question	Instrumentation records	Participants concerned
Level 1: investigates the situation of the youths with disabilities within the grassroots communities: ▪ How are the children with disabilities Described and identified? ▪ How are their disabilities perceived in both families and communities? ▪ What is the relationship between the local perceptions and access to the basic provisions accorded to them? ▪ What is the link between local perceptions and access to local school?	**Q, I, O** **Q, I, O** **Q, I, O** **Q, I, O**	▪ All participants, ▪ Social workers & parents, ▪ All participants, ▪ Teachers, social workers, leaders…
Level 2: Investigates the grassroots community's contribution to the local educational activities: ▪ Who are the key members influencing	**I, O**	▪ All participants

basic rights-related services (notably, their lives, health and education), for the youths with disabilities? ▪ Who takes what roles in the community in determining the development of the children with disabilities? ▪ What are the major community-based barriers, limitations and motivations? ▪ What are the key community inputs to the local basic-rights services?	**I, O** **Q, I, O** **Q, I, O**	in community ▪ All participants in community ▪ All participants in community ▪ All participants in community
Level 3: Investigates the local socio-economic and political influences to inclusive education: • What are the factors influencing education of young people with disabilities in the local schools? • What impact do theses have on accessibility to the activities and performance of the local school? • What impact do these have on the local educators and other key actors of the community? • Are there mechanisms in place to counteract any limiting factors influencing inclusive education?	**Q,I, O** **Q, I, O** **Q, I, O** **Q, I, O**	▪ Educators & Leaders, ▪ Educators & Leaders, ▪ Educators & Leaders, ▪ Educators & Leaders,

Key: Q = questionnaires; **I =** Interviews; **O =** Observations. These codes were only used to differentiate between data sources and records, and are different from those used for data interpretation.

6.5.1 Questionnaire data recording

The questionnaires were mainly administered to teachers, education administrators and PTTC tutors (See also table 3). It goes without saying however that much of the coded data was clear and easily transcribed for ultimate data analysis. However, for the sake of clarity, the two levels of questionnaire data recording methods employed in the study are explained below:

1. On the first level, the completed questionnaires were classified and recorded according to the site of study and the category of respondents. The recording was represented by 'tag' marked from QS1A to QA3C. I.e. Q for Questionnaire; S1A-S3C for school clusters in the three communities 1-3; A-C for schools in each cluster. For example on questionnaire completed by primary teachers in community 1, questionnaires and their subsequent data were recorded under tag 'Q S1A' to indicate that it was from a questionnaire 'Q' administered in a schools 'A' of cluster one 'S1'.

2. On the second level, the various responses were recorded according to their sources (or tag) and to the question items of the questionnaires. i.e. an additional sign was used on the tag to indicate each question item. For example on question 6, regarding 'what methods were used to handle an inclusive large class', the data were recorded under the tag 'Q6 S2A', to indicate that it was an item '6' from a questionnaire 'Q' administered in school 'A' in cluster one 'S2A'.

The recording method was thus devised to approximate a filing mechanism, with which a large data generated by the numerous questionnaires per community (or site) were systematically handled. It was however a means of categorising 'raw data into units for ultimate sorting of meanings' (Silverman, 2000: 126), or 'framing the raw data by sorting, categorising and coding in accordance to the concepts required' (Gall et al. 1996: 562-568), a step referred to by Silverman (2000: 128) as '*critical towards kick-starting data analysis'*.

6.5.2 Recording interviews

Three types of interview notes were made which included those from: *group interviews* conducted with primary school pupils; *focused interviews* conducted with local educators and individuals participants in communities and schools as illustrated in table 1 (Cohen et al. 2003: 287-8; Denzin et al., 2000: 653 & Morgan, 1988: 9). The focused and group interviews were transcribed, while those conducted with social workers and community members were tape-recorded and transcribed later.

All the taped information were transcribed in notes form, drawing from Silverman's (2000: 149) and Sacks' (1992: 26) appreciations of recording for 'Conversational Analysis' (CA). The tape-recorded interviews were most appreciated for the single virtue that they could be replayed, could be studied extendedly with details such as in-breath, laughter, and other utterances that were found useful in data coding and analysis. Sacks (1992: 26) argues that 'if you can't deal with the actual details of actual events then you can't have a science of social life'. The idea is also supported by Silverman's (2000: 150) insistence that working with tapes entails recording phenomena in transcriptions of actual occurrences in their actual sequence, and the empirical conduct of speakers is treated as the central resource out of which analysis may develop.

Hence, the interview tapes were subject to repeated listening for thorough and non-denatured transcription, in which not only the respondent's ideas were privileged, but also their non-verbal expressions that carried a meaning: The raised ton expressing emphasis; the in-breath to express emotions or disappointment; the different laughers to express different reactions and others. However, though recordings of 'CA' forwarded by Silverman (2000) and Sacks (1992) appeared attractive to the researcher, the system of tagging and framing used in questionnaire notes, was found equally useful and complementary in sorting out and categorising interview notes. Accordingly, the interview data began their coding with the tag 'I', while other data items followed with codes that resemble those used in questionnaire recording. For example, data from question 6a which referred to the conditions and treatments of disabled children in community 1 were tagged as 'IQ6a C1'.

6.5.3 Recording observational field notes

The field notes made out of observations have already been highlighted in extracts in sections 5.2.3.1 and 6.2 above. They expressed the researcher's own involvement in the field using his eyes and ears to frame the interactions and activities taking place. Spradley's (1979) suggestion of proceeding by using systematic field notes was also heeded. This meant that short notes were made first, guided by contact summary sheet (Miles & Huberman, 1984: 51) and then were expanded as soon as possible (See appendices G & H). They consisted of field journal or records, highlighting occurrences, events, ideas, activities and observations made by the researcher during the course of the intervention.

Thus, the contact sheets were used as means of recording field notes and categorisation of respondents' responses, field events, situations, themes and sites of interventions, and these were crucial in plotting the expanded notes. According to Miles and Huberman, (1984: 51), contact sheets are used:

1. *to guide planning for the next intervention,*
2. *to suggest new or revised codes,*
3. *to co-ordinate the fieldworkers' program,*
4. *to serve as a reminder of the contacts,*
5. *to serve as the basis for data analysis.*

However, it has to be admitted at this juncture also that the researcher's earlier self perception in a role of an outsider taking a neutral position in the field was soon found unpractical. As it can be seen in the field notes 'OC1A' and 'OS1B' of sections 5.2.3.1 and 6.2 above, the researcher could not merge into the background against a community he was already part of by culture and even by the mere physical presence. It was found safer to accept the situation as it presented its self with himself in the participative observational position, which he recorded as such. By observing and recording his own involvement in *'framing'* the interactions in the community, he was already using Silverman's (2000: 130) and Sacks' (1992: 26) approaches, which perceive *'culture'* as an 'inference-making machine' or a 'descriptive apparatus' administered and used in specific contexts. They both rightly contend that qualitative orientation of many researchers are more concerned with processes through which texts depict *'reality'* in the field, than with whether such texts contain true or false statements.

Hence, the field notes were also framed and tagged like questionnaires and interview notes in order to ease the analysis. Categories or segments of the notes in the same meaning units or inferences were tagged in the same way, and this eased links within categories from different sources of notes. For example, the categories that made reference to the treatments and conditions of young people with disabilities were tagged as 'IQ6a C1' in interview data of

community one, and 'OQ6a C1' in observational field notes of the same community. The same labels were then observed as the basis for ultimate coding and analysis as explained below.

6.6 The analysis process

Data analysis was actually closely linked with the data recording phase as implied in the above section. Silverman (2000: 126) argues that one is not simply recording data but also analysing them. Referring to Goffman's (1974) concept of 'framing', he contends that the emerging categories become theoretically saturated during data recording, and analysis is kick-stated without realising it. In other words, data recording is a part of data analysis.

This study's approach to the data recording and analysis phases however, was admittedly encouraged by Silverman's (2000: 37) minimalist view that coding and interpretation of information are not the preserve of research scientists, because we all code what we hear or see in the world around us and the interpretative practice of our everyday life can as well be made the object of our inquiry. Like Adler & Adler (1994: 42), he argues that 'the research cake can be legitimately sliced in many ways', thus, recommending Foucaultian discourse analysis and Sacks's analysis of membership categorisation. They all treat the phase as a 'tool box' providing a set of concepts and methods with which to illuminate the analysis. He maintains that (p.43) proper 'analysis goes beyond a list', and by this he contends that the identified (theoretically defined) elements are assembled or mutually laminated.

Drawing from Atkinson's (1992) image of moral tale, Silverman (2000: 144) compares fragmentation methods of field notes into relatively small segments, each with its own category and headings; to a narrative that sets up an enigma which is resolved in a form of a '*moral tale'*. The analogies of '*a tool box'* and moral tale in regards to interpreting the raw data, is father illustrated by Schostak's (2002: 95) theory of 'reduction of the real' which is also equitable to Silverman's (2000: 143) analogy of 'a funnel'. They all contend that a research progress has a characteristic *'funnel'* structure with two analytical components clarified distinctly as:

1. the research problem is developed or transformed, and eventually its scope is clarified and delimited,
2. it is over the course of the research that one discovers what the research is really 'about', separating it from the initially foreshadowed problem.

The researcher's own interpretation is thus summarised in an image of his own field observation in rural Rwandan harvesting season activities. In which, village women were observed using traditional tools (Intara) to scoop from a heap of freshly harvested and

threshed cereals, and by vigorously shaking the content on the tool skilfully and repeatedly (kugosora), the good sorghum grain was progressively graded and sorted from the trash, and then put away for ultimate family use in a traditional storage (Ikigega), while the trash was discarded to an already mounding pile.

In view of these interpretations, Gall et al.'s (1996: 562-568) approach to interpretational analysis appeared to be most appealing to this particular case-based study. Accordingly, the tagged raw data divided into meaning units and coded, were also units or sections of recorded data that contained an item of information explaining the phenomena under inquiry. In other words, the tagged meaning units which were sorted, categorised and coded according to concepts required (as highlighted in the previous section), were eventually subjected to analysis for the inferences or the sense they made to the questions they were meant to answer.

The analysis approach involved then proceeded by examining and re-examining the meaning units (or segments) in order to identify the concepts they described or explained, and were coded accordingly. All the segments which contained codes of the same categories were grouped together to identify the prominent features that would lead to the question under inquiry. In this way, data from the different cases and sources were examined and compared to find out what inferences they would make for a given inquiry.

It is however mentioned in the previous section that all the instruments used for data collection (interviews, observations and questionnaires) were expected to lead to complementary analysis strategy for two major reasons:

1. so that the instruments reinforce each other in reaching for both depth and breadth in the inquiry by broadening the tools and methods of the inquiry,

2. to increase the chances of validity and reliability of the results by comparing or cross-checking the results collected through different methods and from different sources.

Silverman (2000: 133) suggests that one common solution in data analysis is to look behind our data in order to find explanations for the inference made. It involves analysis by working backwards and forwards through the transcript to see how the data arise, and how ambiguity is treated as a resource. He concludes that (p.151) 'good data analysis is never just a matter of using the right methods or techniques, but is always based on theorising about data using a consistent model of social reality'. In other words, the analysis phase provided measures to ensure that validity and reliability were accurate, and these are deliberately looked into in the next sections as the most critical components of data analysis.

6.6.1 Analytical procedures and interpretational coding

The study takes the analysis phase as the move from the coded data to its interpretation, that involves the transcendence of *'factual'* data and the cautious analysis of what is to be made of them (Silverman, 2000: 142). The procedure thus also takes Miles and Huberman's (1984: 21) staged move from words to data analysis:

1. *data reduction that involves a process of selecting, focusing, simplifying, abstracting and transforming raw data, so that chunks of data provide the initial focus,*
2. *data display that permits conclusion drawing and action taking, giving rise to matrices, networks and charts which clarify the main direction of the analysis,*
3. *conclusion drawing that means theory generation, resulting from deciding what things mean, noting regularities, patterns, explanations, possible configurations, causal flows and propositions,*

The staged analysis therefore proceeded by examination of how elements were linked together, according to some theoretical schemes as a steady move to a more focused stage. This progressive process of focusing during the interpretation of data has been described in the previous sections by using an analogy of a funnel. Accordingly, an ethnographic researcher characteristically uses a '*funnel structured approach'*, to progressively clarify distinctly some components during the data interpretation course. The study has thus drawn from Silverman's (2000) ideas that:

> *"…it is over the course of the interpretation that the research problem is developed or transformed, and eventually its scope is clarified and delimited, as the researcher discovers what the work is really 'about', and it may even turn out to be about something quite remote from the initially foreshadowed problem …"* (p. 143).

The common analytical path as a response to the need for validity of the findings takes Alasuutari's (1995: 183) view that suggests 'triangulation' or the attempt to get '*a true fix on a situation*' by combining different ways of looking at it. It resembles a mystery story that proceeds by gradually developing questions and answers by discussing them it gradually leads the reader to interpretations of the material and general implications of the results. This analytical path thus suggests appropriate coding, based upon a given set of categories that furnish a conceptual grid to organise data analysis and deflecting attention away from uncategorised activities.

The present study took 'coding' as a key feature of data interpretation or analysis phase, and this was planned as soon as data compilation began. For the researcher, it was a selective device to sort and condense what is relevant to the central question and sub-questions of the investigation (Miles & Huberman, 1994). They are in that case, the tags or labels that were attached to chucks of varying sizes, sentences, paragraphs for their descriptive or inferential meanings they carried. In other words, they were not devised to label the words themselves but the meaning they carried, and were thus descriptive and interpretive codes.

Because of the big size of the data involved and the different meanings that were envisaged prior to the investigation, the codes were conceptually constructed, or the key to their creation was the concepts within the questions the data was meant to respond to. All the codes began with the master code denoting the key concept, and it was from these that other segments of data denoting sub-categories of meanings were added. For example, in interview data codes marked 'SW IC1' from a social worker (SW) in community one (C1), three key issues were based on to form the stem of the code: the situation of disabled children, coded as '***ST'***; the community contribution coded as '***CT'***; and the socio-economic and political influences, coded as '***SF***'. These constituted the basic stem on which sub-categories of codes were built. The extract below shows the lists of codes and sub-codes, recoded under three different questions.

Table 4 Illustration of codes used in interview data interpretation

Descriptions	Codes used	Notes
1.Situation of disabled children in families, 2. Situation in families describing the child, 3. Situation of the child expressed through attitude & perceptions, 4. Situation in families describing their health and education,	ST-F ST-F/Des ST-F/Des/Att/perc. ST-F/Des/h.lth/Ed.	-The language used in descriptions -Description of attitudes expressed
1. Community contribution –family inputs 2. Community contribution–Family input in education, 3. Community contribution & school-based initiatives, 4. Community & individual initiatives in education, 5. Community & opportunities 6. Community & opportunity barriers 7. Community & opportunity cannels of access to education	CT-F CT-F/Ed. CT-Sch/Inn CT-Ind/Ed/Inn CT-Op CT-Op/Bar CT-Op/Chan/Ed	- Individual attitudes expressed in response -Description of the differences in situations
1. Socio-economic & political influences expressing factors, 2. Socio-economic and political influences - cultural factors, 3. Socio-economic and political influences - economic factors, 4. Socio-economic and political influences – Practice & provision in education,	SF-Ft, SF-Ft/Cul SF-Ft/Eco, SF-Ft/Pra,	-Local interpretation perceived as dominant and persistent. Will constitute the section on dominant voices

Through the above illustrated method of coding thus, the different data were crisscrossed, categories of meanings with similar inferences were displayed within the same data sources or across different data sources and matrices connecting the categories of meanings were built to derive an analytical path or implications of the meanings. The approach draws from Cohen et al.'s (2003: 282) ideas of '*stages in data interpretations'*, as well as Hycner's (1985) sets of data analysis mentioned above. They both suggest generation of natural units of meanings through classification, categorisation and ordering these units into structured descriptions or

interpretation of the data, as a systematic *emic* approach where the definitions of the situations are captured through the eyes of those being researched or the research field, opposed to *etic* analysis in which, the researcher adheres unswervingly to his/her conceptual framework. What is being emphasized here is reliability and not necessarily '*hard and fast rules'* (Adler and Adler, 1994; Cohen et al. 2003), which is found within the simplicity of the approach that focuses at accuracy or true results, and not necessarily strict adhesion to ideal type of analysis of conventional researchers (Silverman, 2000 & Weber, 1945).

6.6.2 Validity and reliability in data analysis

Validity here refers to how the research findings march reality and with what certainty the right conclusions or claims are derived from the data (Flick, 1992 & Yin, 1994). Reliability is the demonstration 'that the operations of a study, such as the data collection procedures can be repeated, with the same results' (Yin, 1994: 33). Consequently, this study did not only take steps to increase the validity and reliability of the results, but was also on the lookout for factors that may impinge on these. Considering that these are measures to ensure accuracy in capturing reality in the phenomenon under investigation, the researcher employed various courses of action:

- Checks were made to ensure that information was collected from first-hand sources, whether observed or through respondents,
- Checks were made to ensure that evidences supporting the claim is sufficient and relevant,
- Checks were made for human errors resulting from bias and distortions from both the participants and the researcher,
- Checks were made to ensure that claims were derived logically through compared data and common sense.

In all cases therefore, the central issue that was being addressed was the reliability and validity or the 'warrant for accurate data inferences' (Silverman, 2000: 176). Whether from observational field notes or from interviews and questionnaires recodes, the data was considered useful only if it had satisfactory responses to the questions posed.

6.6.2.1 Measures to ensure validity

Validity refers to 'the certainty of measuring what it is wanted to measure' (Egelund, 1997: 10). Both Silverman (2000: 175) and Hammersley (1990:57) insist that 'validity' is another word for 'truth' whether the data being referred to is quantifiable or qualitative. Thus, in social sciences, it may be interpreted as the extent to which an account accurately represents social phenomena to which it refers. In other words, validity refers to the degree of certainty that the research findings would answer the original research questions. For Yin (1994) however, validity is represented in three ways: a) internal validity, which is relevant to those studies that seek to establish a cause-and-effect relationship between phenomena. b)

Construct validity which refers to correct operational measures for concepts being studied. This implies that a case study researcher must explain clearly, what s/he is looking for; otherwise s/he would not be certain that what s/he found was what was being looked for. c) External validity which refers to the extent to which study findings are generalised.

In this study therefore, Silverman's (2000: 176) suggestion for '*a golden key'* in qualitative research as a measures to ensure validity was heeded. It arguably resides in how the researchers are able to convince that their findings are genuinely based on critical investigation of all the data and not dependent on a few well-chosen 'examples' known as the problem of 'anecdotalism'. He outlines seven common and allegedly infallible analytical paths (p. 176- 80) as:

1. '*Triangulation*' or the attempt to get a true fix on a situation by combining different ways of looking at different findings,

2. '*Respondent validation'*, suggesting that the researcher should go back to his/her subjects with the tentative to refine them in the light of the objects,

3. '*Refutable principles',* also supported by Kirk and Miller (1986: 11), which assumes that the search for validity entails understanding the empirical methods employed, and selecting the fittest ones involves exposing them all to the fiercest struggle for survival,

4. '*Constant comparative methods'* which implies that the qualitative researcher should always attempt to find another case through which to test out a provisional hypothesis. It involves repeated to and fro movements between different parts of the data,

5. *'Comprehensive data treatment'* or workings with smaller datasets open to repeated inspection. The outcome is generalisation that comprehensively describes specific phenomena, instead of simple correlational statement about antecedent and consequent conditions,

6. '*Deviant–case analyses*. These are important in two circumstances: when the existing variables will not produce sufficient correlations, and when good correlation are found but are suspect for 'spuriousness',

7. Using appropriate *'tabulations of categories'* with theoretical rationale behind it.

Hence, the minimalist approach of the present study in ensuring validity was to constantly check the appropriateness of categories in the data, against the theoretical question they respond to. The theory is underpinned by Cohen et al.'s (2003: 105) view that validity in qualitative data is addressed through honesty, depth, riches and scope of the data achieved, the participants approached, the extent of triangulation and the objectivity of the researcher.

6.6.2.2 Measures to ensure reliability

Reliability according to Silverman (2000: 75) is 'the degree of consistency' with which instances are assigned to the same category by different researchers or the same researcher on different occasions. Hence, for reliability to be measured, it is incumbent for the scientific investigator to document his/her procedure and to demonstrate that categories have been used consistently. However, Merrian (1988: 172) maintains that reliability is difficult in culture related research, and that is one of the reasons why emphasis should be laid on detailed description of how the data are collected, categories are derived and how decisions are made so that the trail of the inquiry is clarified. In other words, another researcher should be able to arrive at the same conclusion, with the same approach and the same cases.

This means that in a bid to increase reliability, the researcher ought to keep good record of all the procedures followed during the study. Thus, detailed coding of chunks or categories of data as highlighted above, were measures that lead to triangulation and other techniques used to ensure reliable conclusions or logical claims. These measures were useful in underpinning reliability during data collection process, but also enabled the researcher to refine and improve the data analysis procedures (Yin, 1994 & Gall et al., 1996).

Another measure used in order to avoid misinterpretations and biases that risk unreliable and invalid results, was the use of critical friends for both the respondents and the researcher views. These involved revisiting the field of research with some segments of data in order to seek the views of key persons or experts in the field. Some sections of the taped information were discoursed and views and comments recorded. The social workers of Inkurunziza and the local educators were particularly resourceful because of their experiences in communities and local schools respectively. The emphasis in this activity was to obtain consistency in data interpretation, and this was reached by constant comparative accounts of different correspondents. What was repeatedly emphasised by different respondents was taken as reliable and what was not significant in different respondents' data was refuted as anecdotal.

6. 7 Ethical issues

It is already emphasized previously that the approach privileged qualitative methodology, in which the perspective of the subjects under inquiry were accorded a voice in the data, as means of addressing the social complexities in the field (Schostak, 2002: 92; Adler & Adler, 1994: 380). The point being stressed here is the principal of anonymity of the researcher, who is expected to assume roles that do not get into the participants' way. Hitchcock & Hughes (1989: 57) confirm that addressing ethical issues is critical in approaching research, and it entails a decision on how to present oneself in the field, as whom, how to gain knowledge that

you would otherwise not be able to gain, the dilemma of overt or covert research or the issue of privacy.

However, it has been noted previously how the researcher was unable to completely abstain from his implication in the field, because of his physical presences and cultural interaction with it. Silverman (2000: 200) considers this as ethically inevitable in qualitative research, by noting Max Weber's (1946) earlier assertion:

> *"… all research is contaminated by the values of the researcher. Only through those values do certain problems get identified and studied in particular ways. Even the commitment to scientific rigor is itself a value… The conclusions and implications to be drawn from a study are accordingly grounded in the moral and political beliefs of the researcher…"* (Silverman, 2000, p. 200).

The emphasis here is that there are many advantages open to the researcher in assuming his role in the field. These advantages involve flexibility as they may even entail changing the object of study while continuing the interaction with the participants (Adler & Adler, 1994: 380), in order to gain more confidence of the respondents for 'easy entry' into the field (Glaser & Strauss, 1967). While attempting to adapt his methods accordingly, the researcher also notes Mason's (1996: 166-7) warning about ways in which such ethical issues may impinge upon the qualitative researcher:

1. *the rich and detailed character of qualitative research can mean intimate engagement with the public and private lives of individuals,*
2. *the changing directions of the interest and access during a qualitative study mean that new and unexpected ethical dilemmas are likely to rise during the course of research.*

It is thus stressed here that relationships and interactions in the field, were also expected to be theoretically guided (Silverman, 2000: 200), and were not for that matter considered as mere technical issues to be resolved by technical means. Mason (1996: 29-30) issues three forms of advice in achieving this:

1. decide and pursue the purpose of the research,
2. decide at the start how to relate with individuals or group of people who might be interested or affected by the research topic,
3. consider the implication for these parties in framing the research intention and interactions.

However, it is important to underline here that the researcher's ability to understand the local culture was crucial in order to determine his approaches and ethical limits. Some of the approaches used were to confront the problem in the field by clarifying the objective within the limits of the research problem.

Conclusion

In this study, we have outlined the background, process and procedures related to the research undertaken. It has been made clear that the primary base for the research activities is in the Rwandan grassroots community, selected from different social contexts and representing the Rwandan society where young people with disabilities live.

The research questions the grassroots community appropriateness for inclusion of the disabled youths, and through three interrelated levels of inquiries, it is planned to investigate the current situation of the disabled youth within the Rwandan society, the potentials and weaknesses at hand, worth developing to fit the current community-based national development programs.

A naturalistic case-based qualitative approach was designed for its suitability to studying in depth the social phenomena involved. Unstructured interviews, participant observations, and questionnaires were chosen as instruments for the approach, with which the data was collected and subjected to coding and analysis process.

Since the research question is grassroots-based, the sampled participants and intervention sites were pre-selected in representative communities. These constituted mainly of community members linked to the development of the children with disabilities, or sites where these variables offered the perspective of theoretical focus.

Data analysis phase was taken as the most significant phase of the study, and measures such as comparisons and triangulation of coded data, as well as other techniques to ensure validity and reliability of the results were important in generating fruitful outcomes for the study.

Data analysis and findings

Introduction

This part has been planned to present a report of the data findings, as responses to the three levelled and interrelated questions highlighted in the previous chapter. It is thus a procedural compilation of the data, in a write-up displaying a comprehensive analysis (displays, sorting, coding, categorising and building interconnectedness) of the response to the questions and their subset questions. It is in the process that the study develops coherent descriptions and explanations to *what, why and how,* in accordance to the sampled cases in the field (respondents, events or observed instances), or across sampled cases (across respondents, communities and schools). Its content arises directly from the respondents' views and the field realities, and is dominated by 'within-case' and 'cross-case' inferential analysis of 'emic' meanings (Miles & Huberman, 1994). This strategy has given rise to an analytical framework built on three key elements: Description of the data; illumination and interpretation of the data (noting themes and linkages, explanations and illustrations); and drawing conclusions or clarification of outcomes and generating theories.The framework is intended to lead to grounded explanations or answers to the set questions, by generating theories from a multiple network of sources, out of which the central issue will find answers. It is thus envisaged that this chapter will only proceed by discussing and interpreting the resulting raw data.

The study was centred in the three surveyed communities (C1-C3), in which about 35 families and nine local primary schools were sampled (S1A-S3C) and subjected to investigations. The scanty but generalised education of about 41 disabled children was found to be taking place despite the many problems they faced. Thus, the practice, the motivation and limitation of individual school administration, teachers and parents working together or in isolation in response to the various needs of the disabled children, were of particular interest to the investigation.

Out of the 45 teachers, 41 were largely aware of benefits of including the learners with special educational needs and disabilities into their schools, but they all expressed phobia and disapproval to teaching classes in which children with challenging disabilities were included. Data from the sampled educators (45 teachers, 15 PTTCs or Primary teacher Training Colleges and 15 District education officers) resourcefully revealed awareness of constructive methods and approaches, which they claimed could be used in order to support the disabled children in their schools. Citing overwhelming inadequacies and difficulties they face in their tasks, they were able to outline some of the major strategies used in schools, in addressing some of the educational challenges. The concept of *'inclusive education'* was generally found

to be unknown to many respondents, though few children with disabilities were observed in all the local ordinary schools and communities.

It was also confirmed by respondents in PTTCs, that the teacher training programs do not adequately include components of special needs education in general and inclusive education in particular. They expressed a shared reiteration for the urgent need for special lessons and training in both special needs education and inclusive education techniques. Their views were repeated in the neighbourhood schools, where the head teachers and teachers deplored among other setbacks, the high discrimination rate and social exclusion levelled against the disabled children in the local culture that spills over to their schools. As it will be explained in the subsequent details, they also forwarded a number of suggestions to improve their practice to include inclusive education in their schools. In other words, it was made evident that they recognised their inadequacies in handling the challenges, and the need for support and partnership with the local community was prominently apparent in their suggestions.

This study thus, explores both the challenges facing inclusive education in Rwanda, as well as the potentials that are able to foster its development. The analysis phase leads into a deeper understanding of inclusive education for young people with disabilities in the sampled communities, by bringing out in a comparative interpretation the determinant factors that underlies the situation in Rwanda. It shares the conclusion expressed by Thomas (2005) that much of the basic requirements for the development of inclusion is already in place, and it is high time that what is documented is translated into concrete action. In her study carried out in the same periods as the present one, on '*Mainstreaming disability in Rwandan development'*, she asserts:

> *"Rwanda has made extraordinary progress since the genocide and the country is well placed to make similar progress with regard to disability. All the key components are broadly in place, and the government should be congratulated for its recognition of the needs of disabled Rwandans. All stakeholders in the sector need to work together to support each other and the government, to build on the firm foundation that already exists, and to ensure that commitments on paper are fulfilled by concrete actions on the ground"* (p. 11).

The next three chapters thus look at the major findings of the investigations, beginning with the first level of the study question, which investigates the situation of the young people with disabilities within the grassroots communities.

Chapter 7
The situation of the disabled children in communities

The investigation into the situation of the youths with disabilities within their communities responds to fundamental issues that concern education of the youths in the post-genocide Rwandan grassroots communities. It is perceived as the first step in investigating the grassroots communities' influences on the lives of the young members with disabilities (CSIE, 2002), through which the underpinnings of the locally situated inclusive education perspective will be better understood.

7.1 Descriptions of the children with disabilities

The direct translation from 'English or French' expressions into the local language in order to bring out local meanings envisaged earlier soon proved inappropriate, unfitting or irrelevant with increased field contacts. Instead, the importance of understanding how the children with disabilities were described and identified locally emerged as more pertinent. This phenomenon had sounded an early alert to the researcher, prompting the study orientation towards the search for a deeper understanding of the Rwandan cultural description with which young members with disabilities are identified. It is arguably through the understanding of the local descriptions that their situation in families and communities would be reached. As highlighted in table 5 for example, not only are expressions referring to 'disabilities and impairment' interchangeably used in 'Kinyarwanda', but there are also many different descriptions used in reference to issues and activities around the disabled children, which appeared to be only agreeable to the local culture.

The local educators and opinion leaders in the sampled zones of study were questioned, and it is through their descriptions or perceptions of the children with disabilities in families and immediate neighbourhood that the situation was underpinned. It entailed among other things, capturing the local perception of disability and related issues and how these are expressed and interpreted within the dominant beliefs, whether religious or other cultural orientations. The questions concerning the situation of the children with disabilities were for example formulated in the local languages and in various ways, with the deliberate intentions of drawing the local description and understandings. Thus, depending on the intervention instances or the approach used in questioning, the descriptions of the youths with disabilities usually emerged as responses to the first rubric of the questioning items, expressed through the respondent's own language.

7.1.1 Description of disabled children' personal identity

A total of about 41 children in varying ages, sex and backgrounds participated in the research directly or indirectly through family members or other community members. The contacts with both the child and other family or community members, brought into view two key identity-related phenomena that were unexpected:

1. A disabled child was usually known in the family and neighbourhood by an identity which also described his/her disability, to which s/he responded with either indifference or resentment.

2. The daily interactions and reactions to the disabled child also expressed the identity and moral position that the local culture accorded the child, or simply the general community attitudes towards his/her disability.

These ideas are illustrated within the following identities accorded to the disabled children in families and schools surveyed for example: It was noted that twenty three out of the twenty seven children with mental disabilities were identified as '*ba bana b' abasazi'*, or 'those mad children' by the family and community members interviewed, depending on their disabilities. All the thirteen children who were mute and deaf were identified as *'Karagi'* or 'speechless small thing', or '*Ibiragi'* or speechless things. SHEM is an 8 year old girl for example, and as she explains why she was sent out of school, she also emphasised, '*erega jye ndi umusazi',* admitting that her mental condition is generally like that of mad people. Then her sisters and auntie expressed their agreement to her view. During the course of group interviews with a sample of school children in Gakenke Primary school (S2A), the discussion was disrupted by the children's loudly expressed names and descriptions, when one of them pointed to a visibly mentally disabled young man passing by with a water container. The descriptions were so loud and some were openly unfriendly that the young man had to run away. It was apparent that the young person's disability had earned him descriptions that he did not necessarily like to put up with, but the age-mates and the community at large insistently identified him with them. It was noted though that the children and their teachers did not understand the boys' specific impairment, and thus the descriptions were not necessarily expressing the specificity of his impairment, but rather his behaviour due to his disability such as, *'wa musazi'* or the other mad one; *'dore wa wundi nawe'*, or look at the other one again, *or ntakigenda*, or the one whose brain cannot move, and others (See table 5 for descriptions).

However, though the identification of the children with disabilities appeared to express unfriendly and more often than not, inappropriate attitudes which can easily be construed to indicate absence of love and commitment, it was also noted that it was not always the case. In five of the thirty five families surveyed, it was very apparent that though the children were identified with disability-related labels, they were also being described as the weak family

members who required extra care and support. Three of the children were clearly overprotected by their grand mothers and siblings, and this was evident in the attitudes and the meanings of the descriptive identity accorded to them by those who were closest: The mothers, grand mothers and siblings. This is apparent in the research field notes:

> *"…'ISAK is sick … he will get well soon'… the four year old girl said as she played with her six year old brother with severe cerebral palsy. 'the two get on well with each other, and when the elder sisters are here, they are quite friendly too'… the mother also explained with satisfaction. … '… they are all convinced that when he is cured, he will be climbing the mango trees for them [the local culture does not allow girls to climb trees]…'. When the clergy father and the children came in later, the rapprochement in the family members was self-evident and ISAK was clearly benefiting from it… the unfriendly labels [common in other disabled children of the neighbourhood], identifying ISAK with his weaknesses, were conspicuously unheard, and were replaced by pitiful and cajoling expressions* …(Field notes in community 'C1').

The study noted in a number of instances therefore, that the identity accorded to the child with disabilities by any family and community member, which s/he was made to accept as her/his own or resented in different ways, was also subject to influences of established community norms or dominant cultural attitudes. In which case, though a child is generally identified by his/her personal names, recognising his/her equal individuality in the community and family, it was evident that the identity was also tagged with descriptions related to his/her disability or difficulties (See table 6).

7.1.2 Identification and non-identification of the children with disabilities

The description of disabled children with personal names as well as the labels as explained above, were actually perceived in the investigation as identities accorded to them as community members with deficiencies (or as defected members). The description explicitly expressed their exceptional characteristics, or the influence the defect has on his/her functional life and activities. The identifications in any case appear as part of established norms that play a significant role in designating the disabled child's place within both the families and communities.

Non-identification of disabled children was also recognised by the study, especially in urban and affluent families for example. Of the 35 families visited, five of them were classified as relatively affluent, eleven as middle income while the rest were of the very low income group (See Fig. 11). The classifications of the income levels were based on the judgement of the quality of the homes (inside and outside), the number of workers hired, the status of the bread earners, as well as the general discretion of the researcher under the informant's warranty. In any case, the categorisation of the rich and poor in Rwandan communities is more or less, so obvious to an average inhabitant that consultations before judgement does not often have to

take place.

Identification for the disabled children does not necessarily mean a procedure of singling out the disabled children in their families; rather it took place during the normal interactions within the surveyed families and neighbourhoods. For example, while the children were playing and the older ones interrupted their homework to respond to our questions, the five year old DIDI was neither identifiable with his siblings nor mentioned. It was not evident that he was a family member, for he was kept indoors and his name did not feature in the conversations, in which the younger family members were incited to talk about each other's activities. It was only when Innoc (The informant), who had helped the family as a social worker, eventually insistently asked to see him that he was belatedly brought into the seating room. He (Innoc) remarked latter with regret that the child could neither see nor move because he was always kept in a dark room. He also expressed remorse but hardly any surprise when the death of the child was announced during our last intervention, explaining that the child had been a victim of confinement and neglect. It was evident to the study however, that the acknowledgement of the boy's identity and membership in his family was by far incomparable to the active presence and identification of his siblings.

On the other hand, IREN, a six year old girl with cerebral palsy in a less privileged family of the same neighbourhood, was quickly identifiable in the seating room where she was playing with her untie and mother. Innoc opened a discussion with her mother about the influence of the prescribed therapy, in which all the family members appeared to be informed and actively involved. Whereas the non-identification in the cases of DIDI cited previously was also apparent in all the other cases in affluent families, the situation of IREN seemed to reproduce itself in other underprivileged and middle income families. In other words, the children's interaction with other family or community members earned them identity within the family and neighbourhood, and where the physical presence and interaction with family members were missing, the identity seemed to be missing too. As a matter of facts, they appeared to be hidden from the public. Figure 11 and table 5 below show some of the recorded observations made in six typical families (cases) sampled in the same neighbourhood of 'C1A' (in which 11 families were surveyed). They explain some of the family conditions and activities that influence identity or non-identity of some of the disabled children.

Fig. 11. Comparative characteristics of disabled children in affluent and disadvantaged families

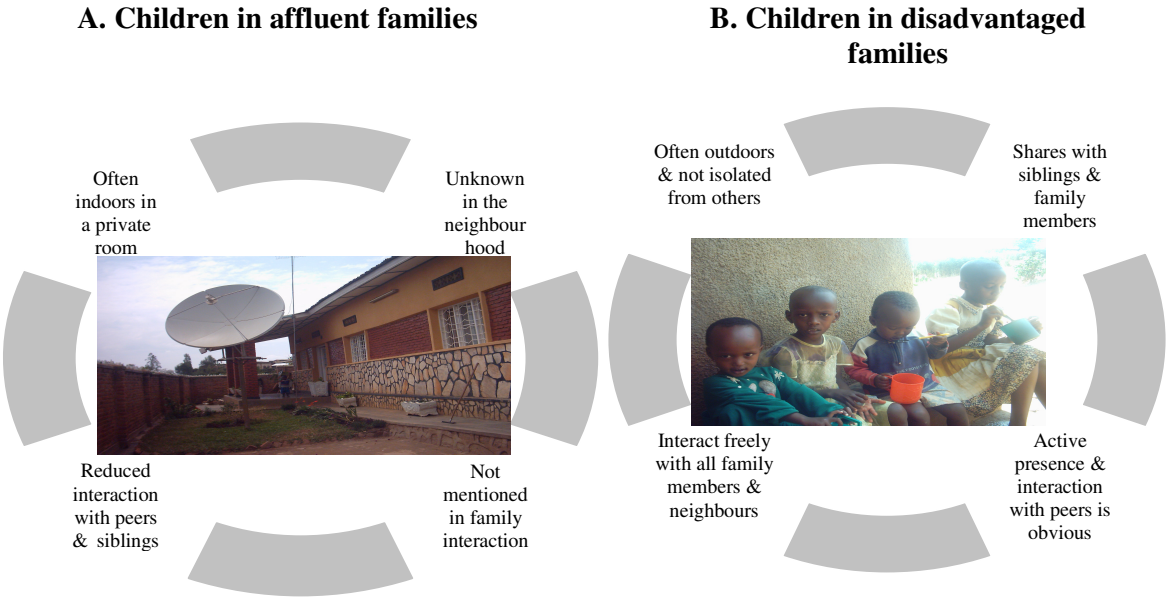


Figure 11 illustrates the differences in the situations of the children in affluent families (picture A), and the situations of those in disadvantaged families (picture B). It explains the fact that each child is surrounded by many factors that determine his/her situation of identity or non-identity. It was noted in the cases of the three children (See table 5A below for AGNE, DIDI & SONI) in rich families for example that they were often indoors, they were unknown in the neighbourhood except for very close family members; they were not significant in the daily family interactions; and hardly interacted with peers or had controlled interactions with their siblings. On the other hand, the disabled children (See table 5B below for ABDU, IREN & SHEM) in less privileged families were observed outdoors with other family members; interacting freely with all family members and neighbours; they shared the family space with siblings and family members and not in isolation; their active presence in the family was obvious to neighbours and family visitors.

In the same way, table 5 below indicates the recorded activities influencing the disabled children's conditions and identity in their communities and families. As it can be observed in details in the table, all the children are supported and cared for in families, but those who are in close interaction with them and therefore determine their lives are different. In the case of disabled children in affluent families, they are more often cared for by paid house workers, and have reduced interactions with the siblings and other family members, or even hardly any interactions with distant family members and neighbours. This is different on the other hand, for the disabled children in most disadvantaged families. They were observed in free

interactions with other family members, and the peers in the neighbourhood were part of it. However, this interaction does not mean that the labelling expressions and negative attitudes towards the disabled children were not apparent during the interaction. Indeed, as it will be explained latter, some of the expressions used often indicated their difference with other children. It is equally indicated in the table that the provisions and prospects for the disabled children are different. Though the conditions of children in less privileged communities are more likely to be influenced by their parents' beliefs and perceptions, the privileged families are often characterised by their willingness to pay for all services, ranging from care to those prescribed by specialists, thus, services such as rehabilitation and education which influence the child's condition of life, are paid for only when they are available.

Table 5. Record of activities and conditions influencing the disabled children's identity in the community

A. In affluent families

Identity			Interaction with				Care & support			Provisions & prospects	
Code	**Age**	**Sex**	**Parent**	**Siblings**	**Relatives**	**Neighbours**	**Who**	**What**	**How**	**Rehabilitation & Medication**	**Education or training**
AGNE Severe Cerebral palsy	12	F	-Very rare at home, they both work a minimum of 10 hrs each day, -The mother expresses grief over her condition.	-They are often in school. -They do not like her room , -They find her isolation appropriate for her health condition	-Do not know much about her. -Some make bad jokes about her condition, others express pity,	-Only the house girl discretely talk to them about her condition, -They are curious about her disability.	-Responsible, paid house girl, -The mother sometimes,	All the basic care services & reporting to parents	-all the basic care services, and directly reporting to the mother,	-The mother claims to have conducted consultations in Belgium and claims that she cannot do more than was done by European experts -Her imported special chair is out of use	-There is clearly no prospect for any education nor training, -It is claimed that her condition is so bad that she cannot go any where.
DIDI Severe Cerebral palsy	06	M	-They both come home, very late in the evening -The mother works during the day and attends evening lectures	-They are often in school, -When they are at home, they are not allowed in his room	-Only those who frequent the home know about him	-They know about him through the siblings and house girls	Irresponsible house girl, and no apparent strict supervision	-All the basic care services assigned by parents	-Expected to carry out all the basic care services for him, but is rarely in the home,	-The prescribed physiotherapy exercises were abandoned, -Passed away in June 2005	-None
SONI Mental	13	F	-The mother is often at	-They are often in	-know about her condition	-those who frequent the	- All the basic care	-She is cared for by the	All the basic care	-Hardly any therapy nor	-She was placed in

disability & epilepsy			home, but the father is rarely at home	school, -Interact with her only when they are at home	as a dysfunctional girl	home interact with her openly,	services	mother who is often at home,	services,	medication -It is possible that she had been confined in her earlier age	the school for the deaf for two years and is now out of school,
B. In disadvantaged families											
ABDU Physical & mental disability	06	M	-Interact with him regularly -Both parents very closely monitor the situation	-the elder sisters support and care for him and younger siblings play with him	-interact with him frequently & openly,	-in a Muslim family & mutual interaction seems a norm	-Mother, unties, sisters, father	-all the basic care & support -no duty roster	- responding to all the needs of the child when necessary	-the social worker claims that there is tremendous improvement in the boy's conditions, after the 2 year physiotherapy exercise,	-the family is in negotiation with the local school head teacher for a placement
IREN Down's Syndrome	06	F	-They are often with her at home	-the interaction seems normal and active	-interact more often with Christians	- frequent visits of brothers & sisters in Christ	-Mother, unties, sisters,	-all the basic care & support	- responding to the child's needs when necessary	- counselling services recommended by the social worker,	- the head teacher has accepted to try taking the child the next academic year,
SHEM Mental disorder	08	F	Often in active interaction at home and in the neighbourhood	-her disability is also a factor for active interactions with others	-is very popular with neighbours	-neighbours openly interact with her in their or her home	-All family members -Some neighbours	-no extraordinary attention	- interacting with her & responding to her needs	-responding to the social worker's counsels	-was sent out of the school by her teacher -she still repeats her lessons at home.

However, the investigation could not precisely establish to what radius of the community the children with disabilities could be identified by the neighbours. Whereas for example the disabled children were identifiable within the entire neighbourhood surveyed in the rural areas and in disadvantaged zones of urban areas, to some extent, it was not equally evident with disabled children in all the affluent families. In fact, even the different labels they were described with in the former neighbourhoods could not be heard in the latter (See table 6 overleaf). It has to be mentioned too that fewer affluent homes were surveyed by the researcher, not because they had fewer disabled children, but because they were generally inaccessible to many neighbours and the informants, thus their disabled children were often unidentifiable too. It also became evident that, though the informants were selected because of their functions in the community and their acquaintance with families of the disabled children, certain social classes and neighbourhoods either limited or facilitated their access. AGNE's home for example was strongly guarded, and the house girls were under very strict instructions not to talk to neighbours about the child. When they connived with Clem, the social worker (also informant) to meet the mother on the subject of the child, the letter's reaction was so unpleasant that they almost lost their jobs.

By description and identification thus, it ought to be understood that in one way or another, the disabled children were known, described and often labelled by certain members of the community and families. The identification within the neighbourhood however, was characterised by a label or clichés denoting 'a difference from others' in the sense that if the child was identifiable, the personal name also came with a remark that described him/her as a member of the community with a difference. SHEM (mentioned in table 5 above) for example, was identified by all the neighbour by her name, and described as '*umwana w' umurwayi'*, '*akana k' agasazi'*, or 'the small girl who is sick', or 'the mad young girl'. In the same way, IREN was equally known to close family relatives and neighbours because she could not displace herself like her peers, and thus she was described as '*ka kana katagenda',* or 'the other kid who does not move', or 'akamuga' to imply a dysfunctional kid. The situation also explains why AGNE, DIDI and SONI in relatively affluent families could not easily be identified in their communities and neighbouring families. They neither moved within their homes and neighbourhood nor interacted with anyone else, and were therefore unidentifiable with any of the popular descriptive labels. When the neighbours were asked about them, they responded with expressions of surprise. In the case of AGNE for example, the mother had angrily asked how the informant got to know about her. Table 6 below lists down the different descriptions used to identify disabled children in various circumstances by the family and community members.

Table 6. Descriptions of the disabled children

Descriptive identity	Use Formal (**F**) Casual(**C**)	Literal meaning	Circumstances in which it is used
1. Umwana umugayee	**(F)**	1. Disabled child (human)	1. For any disability
2.Umwana uremaye	**(F)**	2. Child with disability (human)	2. For physical disabilities
3. Ikimuga	**(C)**	3. Dysfunctional (object)	3. For any disability or impairment
4.Ikirema	**(C)**	4. Deformed (object)	4. For mainly physical disabilities
5. Ikiragi	**(C)**	5. Speechless (object)	5. For anyone who cannot hear
6. Igicumba	**(C)**	6. Limping one (object)	6. Referring to locomotion difficulties
7. Ibiphamatwi	**(C)**	7. Dead eared (objects)	7. For anyone who cannot hear
8. Impunyi	**(C)**	8. Senseless (sightless thing)	8. For anyone who cannot see
9. Umunyagicuri	**(C)**	9. Upside-down (Human)	9. Epileptic person
10. Umurwayi	**(C)**	10. Sickly (human)	10. For mental deficiencies
11. Umusazi	**(C)**	11. Mad (human)	11. Schizophrenic
12. Ikigoryi	**(C)**	12. Stupid (object)	12. For mentally deficiencies
13. Igicucu	**(C)**	13. Shadow (object)	13. For low achievers
14. Ntakigenda	**(C)**	14. No movements	14. Referring to any deformities
15. Bene abo	**(C)**	15. That type of individual (human)	15. For any disabled
16. Ubwenge bwaragiye	**(C)**	16. The knowledge is gone	16. For anyone with mental deficiency
17. Kasolite	**(C)**	17. Casualty (From English)	17. For anyone with deformities
18. Yatewe n' abazimu	**(C)**	18. Haunted by ancestral spirits	18 For anyone with mental problems
19. Yatewe n' abadayimoni	**(C)**	19. Haunted by demons (by Christians)	19 For anyone with mental problems
20. Ishyano	**(C)**	20. Extraordinary mishap (terribly bad)	20. For any misunderstood disability
21. Ibyiwabo	**(C)**	21. From the family (conflicting)	21. Referring to father or mother
22. Kanyonjo	**(C)**	22. Small swollen back	22. Refering to those with bent backs

As it is made apparent in the above table and previous discussions, the descriptions or identification criteria used in families and communities, are predominantly an outcome of established attitudes and perceptions about the differences between individuals. It goes without saying thus that these influences transcend the values and morals about equality or mutual respect, discussed and taught in educational, religious and political forums, whether in formal or non formal settings. Accordingly, the identity and description of the children with disabilities remains a reflection of a tradition deeply rooted in cultures that are indifferent to verbal discriminations (often casual & abusive) to those who are different.

These influences were equally evident in all the local schools. When the school teachers and students were asked to identify students with specified disabilities for example, any of them spontaneously described the child by both the personal name and the popular label used about him/her in the school. The children with some difference from others seemed to be popular, because of their negative or positive identities or both. It was unanimously emphasized by both teachers and pupils (in school S3C) that the epileptic girl in grade five for example, was known to everyone in the school community, and other girls of her neighbourhood were always ready to support her when she developed a seizure. It was noted that when she was described as '*umunyagicuri*' or the '*one who keeps falling'*, some of the students laughed loudly at the mention of the label (especially boys), and expressions of scorn from others (mainly girls) was provoked for the unfriendly behaviour. However, the fact that the teacher could not take any measures to sanction this kind of reaction in his class was also a pointer to

culturally reinforced indifference as a generally acceptable reaction in such circumstances. It looked like the school community was more aware of her disability or illness (as they took it to be), and not necessarily her educational needs, because her teachers insisted that she fitted well in the school system and were not able to discuss farther any provision for her education, because this dimension is not part of their school system.

The identification and description of a child with a disability by any individual in the family, school or community, thus appeared to be a function of the established cultural norms and attitudes, as well as the effects the impairment had on the child's body and active life. It was often reflected in the descriptions that the community members and peer groups expressed about the disability, either with indifference of its impact on his/her educational achievements and the weakness it caused, or even supportively or with pity for the difficulties it caused. The next section will develop farther the analysis of the community perceptions about disabilities and the outcome of these to disabled children's lives in the community.

7.1 Perceptions about children with disabilities

The dimensions related to the situation of the youths with disabilities in the discussions above, have also made apparent the significance of some of the society's beliefs and perceptions. However, the study is also in agreement with the view that the 'impairment' is a feature of the 'individual', but disability is a result of barriers (political, attitudinal, environmental, and legal) built by the society through which those with impairments are accepted or excluded (Charlton, 2000). Hence, the requirement for a better understanding of established social perceptions within the communities, will also lead to deeper interpretation of the situation of the children with disabilities, which is also a crucial measure of ingrown capacities that contribute inclusion development (CSIE, 2002; UNESCO, 1994). The major tools used in the investigation (interviews and observations), aimed at eliciting not only insider views, but also the related cultural beliefs and practices, within which the local perceptions on disabilities were expected to be located.

7.2 Some findings related to the local perception on disabilities

The labels collected from the respondents' descriptions of the children with disabilities in table 5 above, are also some of the indicators of the established community's perceptions and reactions to the occurrence of disabilities in their children. The common expression of '*ubumuga*' in reference to disability for example, is the conventional Kinyarwanda term often used to refer interchangeably to 'impairment' or 'disabilities. It literally means 'a dysfunctional object'. However, the synonymous term *'uburema'*, was found to be more commonly used in reference to physical disabilities implying 'a deformed body', thus, any

malfunctions resulting from body weaknesses or deformities are generically perceived as '*uburema' or 'ubumuga'* in Kinyarwanda. The children with disabilities were formally referred to as *'abana bamugaye' or 'abana bafite uburema'*, but non-formal terms (referred to as 'casual' in table 6 above) were more commonly used in both the community and families to describe persons with different disabilities, through which their perceptions were also expressed.

Accordingly, much of the local perceptions about disability expressed in the local language bring into view a number of issues. The references used for example, were linguistically widely encompassing in their implications, but also limited with regards to the descriptions of the types and the differences in disabilities or the special educational needs of the individuals concerned. The local language perceives disability as a description of its impact on the person, but it disguises or falls short of accurate definitions of specific disabilities or impairments. In fact, it brings out cultural perceptions of disability, notably:

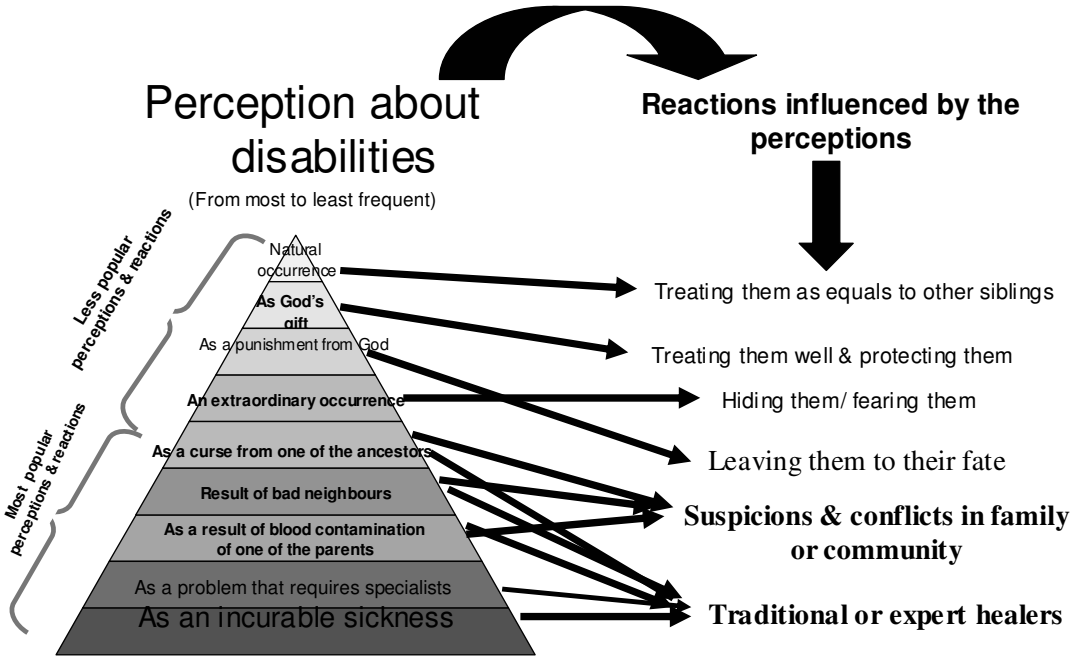
- as a body weakness when it refers to sickness or disabled body, e.g. 'umurwayi';
- as a dehumanising phenomenon where the description of disabilities refers to the non-human nature of the person, especially in casual expressions referring to the disabled with prefix *'iki'* denoting a tool, instead of prefix *'umu'* to denote a person (prefix recognised in most of the Bantu languages);
- as dysfunctional or defunct when the body becomes impaired referred to as *'ikimuga'*, as opposed to a valid person referred to as '*umuntu'* in Kinyarwanda language.

The study is also concerned that the right-related services notably education and health, are usually influenced by such perceptions. It was apparent that the decisions to consult traditional herbalist or conventional experts, taking a disabled child to a nearby rehabilitation centre, to school or keeping the child at home, and other reactions to disabilities, were all influenced by the established perceptions. The mother of CLAU who could neither write nor read, was laughing it off while she exclaimed: *'bene abo ntibajya bakira',* explaining that her epileptic son is of the kind that never gets better. IRAD in Remera Primary school (S1C) and OLIV in Butamwa primary schools (S1A) were convinced that they could never learn. '*Jye byarananiye erega'*, the former had said, meaning 'I am actually unable to follow', and then everyone in her entourage consented. The diagram 12 below illustrates some of the established perceptions about disabilities collected from various community members and respondents. They testify that the daily expressions made in reference to disability in different neighbourhood settings and circumstances, have actually important bearings to the dominant local perceptions about disabilities, and important influences on every individual family or community member's views, decisions or reactions.

The communities and families surveyed showed a wide range of beliefs and perceptions about

the disabilities of their children as shown in Fig. 12. These were ranked from the most commonly held, notably perceiving the disability as a terrible sickness, to the least commonly held perception, notably perceiving it as a natural occurrence to which every human body can be subjected to (on the left). In the same way, these perceptions also prompt a wide range of reactions from parents who are confronted with the disability of their children, and consulting any expert seem to be one of the commonest reactions shown at the base of the diagram (on the right). Thus, considering them as equals to other siblings needing same services is a relatively rare reaction shown at the thinnest part of diagram.

Fig. 12 The different levels of perceptions and reactions to disabilities of children within the Rwandan grassroots communities



As Figure 12 suggests, the perceptions about disabilities vary greatly and are responsible for equally varied reactions, explaining why some of the family reactions to the occurrence of disabilities are more concentrated on some options taken, while others are scanty, as suggested by the diagram. The reactions based on community beliefs and local influences (at the base of the diagram) for example are more popular than others, while those relate to feelings and laws regarding rights of individuals are less popular (top of the diagram). It was repeated by all the social workers (N=11) for instance, that most of the families with disabled children consult traditional healers before deciding to consult modern medical experts. However, in all the families surveyed (N=35), only two admitted having consulted a traditional healer. In other words, the consultation of a healer (perceived as possessing

extraordinary powers) is the commonest option (or reaction) in many communities when a child's disability is seen, and the modern medical expertise becomes yet another alternative when it is made available. That is why traditional healers and modern experts are both linked to most perceptions in figure 12. However, though the former option is not necessarily openly admitted by some parents because it is illegal in the established religious denominations and established laws, it was also established through the 11 social workers and other key community members' responses that:

- Consulting anyone with any kind of expertise to cure (whether conventional or traditional medicine) is one of the family's desperate responses to the child's disability, and the options taken as a solution are largely influenced by the locally held perceptions;

- Consulting any expert is more in relation to the commonly held perceptions about disability that it is an extraordinary sickness, which has a solution in exceptional expertise of whatever specialisation.

Both views point to a level of understanding about disabilities, with which community members are able to respond to its occurrence. It underpins the moral and psychological position the disabled children are subjected to, as an outcome of their parents' and community members' attitudes, beliefs, perceptions and reactions towards their disabilities.

7.2.2 Religious perceptions in relation to disability

Prior to his close contact with various respondents in the field, the researcher's earlier views had been influenced by the dominant perception of the Rwandans culture as predominantly Christian or Muslim (Republic of Rwanda, 2002a), with hardly any visible contrary beliefs and practices. However, this was found to be a grossly misconceived idea following testimonies from a number of respondents. It was confirmed by all the eleven social workers for example, that the families they work with mix both conventional religious and traditional beliefs, and they use both traditional healers as well as the clinically prescribed expertise, or they simply considered each of them as an option to try in response to their children's disability. The assertions below show some of the testimonies of various participants:

- *Twelve out of the forty three catholic families I work with have had domestic difficulties after the birth of their disabled child because the couple accused each other of having engaged in traditional practices prior to marriage. Even simple difficulties such as allergy or mild deformities, would be enough cause for mutual accusation, often expressed as*: n' iby' iwanyu' *or 'it is your family's fault'. Alleging that his or her partner's family had earlier engaged in traditional practices which are condemned by their church catechism as devilish, and the disability of their child is the resulting punishment* (Field notes expressing the ideas collected from a social worker serving in both semi-rural and rural neighbourhoods).

- *A range of beliefs and practices are associated with the converts of different protestant churches we work with. They include cleansing the disabled children*

through intense prayers, claiming that s/he is haunted by demons; that certain disabilities were a result of punishments from God for the sins previously committed; that medication does not necessarily cure or control illnesses like epilepsy or schizophrenia; that it is only through prayers that, 'God reaches the child with a healing hand' (Field notes expressing the ideas collected from three social workers working in rural and semi rural areas).

- *Papa RAMZ for example* (a devout Muslim) *had been told that his epileptic child had been born with ancestral curse. So, he lost two of his best houses and other domestic property, raising enough money to contact all the prescribed traditional healers. We discovered the child at his point of death, because the family was both bankrupt and disappointed and were resigned to waiting for the child's death.* (Field notes expressing a story confirmed through two social workers serving and living in a deprived Muslim neighbourhood of Nyamrambo and Nyakabanda respectively, near Kigali).

However, whereas the above assertions express observations on the established religiously influenced perceptions shared by many community members, it was equally apparent in the majority of families that, they were also characterised by confusion and did not have any precise steps to take when confronted with the disability of their children. Among the common reactions prompted in order of frequency include:

- Confiding and consulting with the closest friends (spiritual brethrens), and sharing the anxiety the child's disability caused to the family;
- Conflicts within the family that might even lead to divorce of the parents because:
    - They accuse each other of being the source of the problem,
    - The family members on either side put the blame on the partners, often asking them to look for another one able to give valid children,
    - They fear having children with similar disabilities, especially when it occurred with the first born
    - Pressure from close relatives or friends to take measures that often lead to conflicting options.
- Entrusting the child to a close family member's custody (usually to grand mothers), especially:
    - when the parents find nothing else to do for the child, other than providing basic care and support,
    - In urban centres where the parent are too busy to provide basic care, or families that find it disreputable to have a disabled child around (case of DIDI mentioned in table 5 above),
- Engaging in spiritual rituals, whether religious or traditional cleansing ceremonies,
- Just leaving the child to a fate to be decided by God.

7.2.2.1 Dilemma and religious perceptions

It has to be pointed out here however, that the study could not establish any outstanding correlations between any of the dominant religious affiliations and the established perceptions about disabilities in communities surveyed. Rather, the investigation findings seemed to be indicating that perceptions and practices are more or less shared within the same neighbourhoods and families, and not necessarily singularly or strictly linked with a particular

religious denomination. They appeared to be linked with religion in many cases where communities were dominated by certain religious groups.

It was interesting to note for example, that Muslim families demonstrated a considerable amount of attachment to their children with disabilities. Observations in five of the Muslim families surveyed and testimonies from three social workers serving in their communities, it was confirmed that within their large families, members fraternally shared responsibilities of care and support to their disabled children, and it was prompting to conclude that it had to do with their religious faith. However, Mama ABDU and mama YUSU, the mothers of the two six year old boys in the same neighbourhoods (C2) casually affirmed that '*it is simply like that*' and could not provide a faith linked explanation. Mama ARUA, a Muslim social worker (also informant) and a mother of a disabled six year old, confirmed with the following views:

> *"… of course the Koran teaching is very important in many families and I make reference to it where I find it appropriate in my work … However, the explanation to the family solidarity in which every one is obliged to support one another, can actually be traced either in the Rwandan culture because even some non-Muslim families have the same practice, or more so in our history than in Islamic faith… The Muslims have always been marginalised by successive Rwandan politics … we have always been confined to Nyamirambo communities … always marginalised in education and training and consequently on the job market… our survival was founded in building a strong unity and solidarity within our families, thriving on activities that were not popular with other Rwandans, notably commerce and public transport…that is the reason why we live in very large, closely nit family units, which naturally include our disabled children …"* (Field notes in 'C1').

In the same way, it was not evident whether the dominant religious lessons cutting across all religious teachings in Rwanda, which emphasise respect for everybody because s/he is in the image of God, could explain why most of the children with disabilities are left at home or are free to move within the communities without any physical harm. In other words, the commonly shared expression by 27/35 mothers (or those taking the place of mothers) in different ways, '*I eventually left him/her to the destiny to be decided by God*', proved more of a common cultural expression or perception than a pointer to any faith-based view.

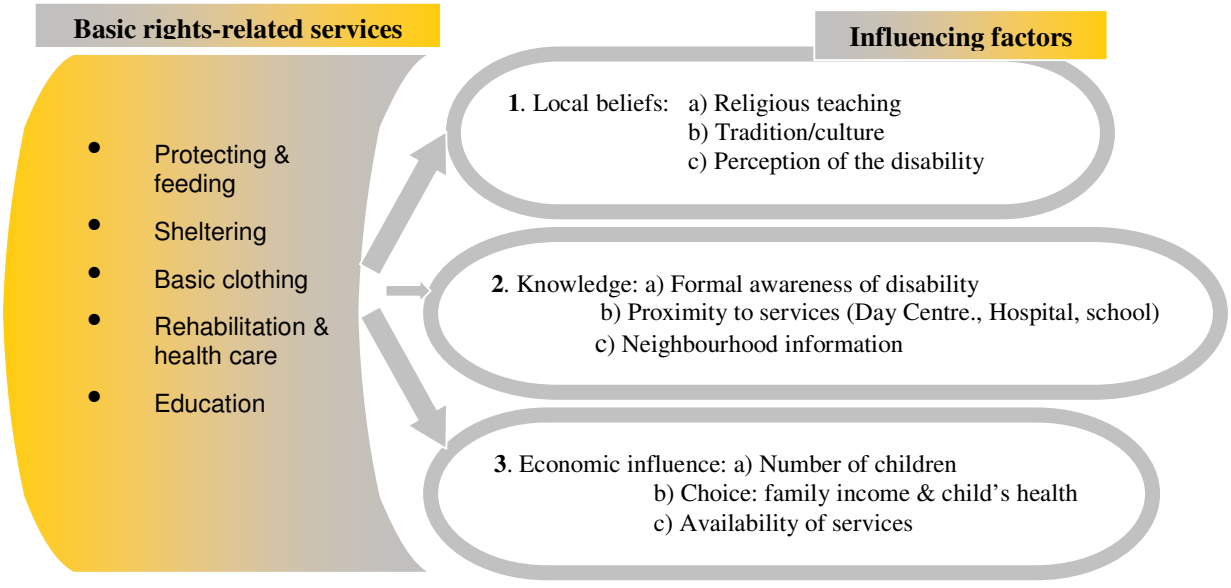
Hence, arising from the dilemma about religious and other commonly held perceptions in the Rwandan communities, is the argument that the chances open to the children with disabilities in education and other services, are subject not necessarily to the religious influences alone, but also in combination with other locally-based factors. These are part of the different factors that strongly influence the families' views in understanding and determining the situation of their disabled children.

7.2.3 Local perceptions about basic services for disabled children

It is already noted in the above discussion that a number of phenomena play an important role in the situation of the disabled youths in the Rwandan communities. The general conclusion is that their access to rights-related services (protection, feeding, clothing, education and health care) appears to be very limited. Rather, it would be quite unrealistic to say that disabled children share equally all the services provided by the society with other children of the same age and family environment. The study deliberately limited itself to the most basic services that concern life sustaining provisions such as protection of lives and feeding, shelter (including sheltering away from hum), basic clothing, rehabilitation and health care, education and training (See fig. 13).

In the same way, the study was able to isolate from the respondents' views three key factors that appear to interactively influence the disabled children' access to most of the rights-related services (See basic rights on the rights of Fig 13 below). By far, the dominant perceptions and beliefs among the parents and neighbours remain the major determinants of the kind of choice of services that was made for the children as illustrated in figure 12 and 13. The factors that were found to be most influential include the dominant beliefs and perceptions about disability in the neighbourhoods, the level of awareness about issues related to disabilities or the knowledge of available provisions or measures to take, and economic-related factors influencing family decisions and the choices of what to do for the disabled child. These findings are summarised in figure 13 below:

Fig. 13 Basic rights-related needs and factors influencing access



By the basic rights-related factors, the study meant only the basic factors that determine the disabled children's survival and development (on the left of fig. 13). This was because rights

such as those related to dignity of individuals, free mobility, free expression and others were not necessarily obvious in any of the respondents' views collected. In other words, the study was obliged to look into what was known and shared by the community (on the left column of the diagram), and thus found it futile to venture into what the community could not consider on its scale of rights. The three key interrelated factors on the right column of the diagram 13 above thus, attempts to explain how and why the decisions and choices concerning the rights-related services for the children with disabilities are made as explained below.

1 Local belief

The locally established beliefs are among the most important factors affecting such decisions for example, as indicated on the first level of the diagram. These are considered at either family level or community levels, and include religious, cultural perceptions or simply the locally established understanding of disability and options taken in reaction to its occurrence. The extract below (Observation notes 'OC1' taken in community 'C1'), citing a discussion between a social worker (**S.W.)** and a mother (**M**) of a disabled child illustrate much of the above explanations on the relationship between the local perceptions and choice of services for the disabled child. The latter had opted to take her son to a local healer because of the child's club-feet, while the former was convincing her to respond to an operation appointment prescribed through CBR Inkurunziza:

> ***M:*** *…* (Lowering her voice*)… Even the father agrees with me … I had considered all the options, but all the neighbours convinced me that the healer is quite capable. …*
>
> ***S.W****: … I came all the way with these people* (indicating in my direction so that we could lend a hand in support of her ideas*), just to repeat to you one thing: 'Your son is not a victim of poison… you have been suspecting your neighbours for no reason…please consider coming to Inkurunziza when the doctor is still available….*
>
> ***M:*** *When you talk to me, you seem to be convincing, but when you leave other people tell me other stories….well, to tell you the truth, we have already taken the children* (the child's cousin had a similar problem) *to the healer and we are anxiously waiting for results….*
>
> ***S.W:*** *… do you really believe that the children were poisoned?*
>
> ***M:*** *…what do you expect me to believe….people here are bad, you know that…otherwise how do you explain such a terrible thing in the same family?...the other day the son and daughter of Rute died mysteriously on the same day because he could not heed the advice to see the healer…* (Observation notes 'OC1' in community 'C1')

Needless to emphasise the point that, the conversation makes clearly evident the close link between what community members believe to be the truth and what they tell each other instructively, also have a strong influence on their perception about disability and therefore what they do about it. The social worker's ideas appear to be just one weak voice among the

many that dominate the community way of life and therefore determine the orientation of their choices and decisions about their children.

2 Local knowledge and awareness

This analysis thus brings into view the important role played by knowledge and awareness about disability-related issues in the community, illustrated on the second level in figure 13 above. The study found that the awareness appears in three distinct levels:

- The awareness about disability received in formal and non-formal means or institutions. These could be through formal education, media, day care centres or from accredited personnel such as a community worker entrusted with awareness raising responsibilities. This level of awareness was found to be very rare in rural areas and was only available in few urban families;

- An awareness raised by being in proximity to services of people with disabilities. In other words, parents who lived near rehabilitation centres, medical centres, special schools, or even with neighbours who are knowledgeable about the services. This level of awareness was also found to be limited to few families;

- It was more apparent however, that much of the awareness was raised through information running from neighbour to neighbour or from family to family. This often raised an awareness that was more popular in the neighbourhood and did not necessarily generate positive decisions as it is illustrated in the above extract.

By far, awareness was found to be more effectively raised through peer communication, through women groups for example; through Christian groups; or even through neighbours or close family members.

However, two key points have to be pointed out here. 1. The study refers to the community level of awareness on disability, with the concern that during the course of the study, there had been no evidence of any kind of deliberately organised awareness rising through the media or other non-formal means. The only sources of formal awareness were constituted in the operations of some NGOs and the neighbourhood information. 2. The study could not thus raise any statistically reliable data (e.g. how many participants were concerned), because much of the respondents' views and attitudes (consulting traditional healers for example), were not openly discussed. Hence, the validity of the data on the different levels of awareness was more in relation to the views of key community opinion leaders, notably educators and social workers.

3 Socio-economic influences

In the same way, the families' socio-economic background was found to have an important influence on the decisions and choices of services for their disabled children. The number of

children or members in the family for example, was found to be an important determinant factor. It was common in deprived families with many children where any additional member meant additional pressure on domestic resources, thus, the needs of a disabled child were often considered less insignificant or a burden. The choice of services often depended on the families' income levels and the child's condition (See the cases of DIDI and AGNE above in table 5). In some of the cases however, a quick response was often found where the payable services were made available, such as paid carers, expensive medical consultations whether traditional or modern, and others. In fact, AGNE's mother admitted having had expensive consultations as far as Belgium before resigning the child to her fate. Farther discussions on the findings related to socio-economic situations will be discussed in chapter 9.

7.2.4 Local perceptions and access to appropriate services

In the above analysis, the study also underlines a phenomenal absence of formal sensitisation programs about disability issues, or rather, an established and commonly shared misunderstandings about issues related to disabilities in the communities surveyed. These issues concern the causes and effects of disability or impairment, the appropriate interventions and where available or not accessible, the options to make when the child has a disability, and others. Hence, the absence of these issues seems to have created ample space within the communities, where a cultural way of interpreting disability has become the order of the day. The recourse to traditional healers is the most common option in such circumstances for example, in families and communities where it is an established norm, and other interventions may follow if perceived feasible by the family. The extract of interview notes 'IC3', below reveals how some of the remote villages can still cling to their traditional views in the face of modern alternatives. A social worker narrates her difficulties and approach used in order to convince an influential old woman to go for a free cataract operation, not necessarily to save her sight, but also as a means of accessing other villagers that included her physically disabled grandson who needed a surgical operation to correct his club feet deformity:

> *"…It was the third time I had tried to convince her to go for the cataract operation…she was over 61 years of age and had been blind for about 12 years.... 'I know where my problem is - and I have always known who did it to me'. She always insisted pointing at the back of her neck. Herself being a reputed local herbalist of the community, villagers trusted her diagnosis rather than our advocacy for alternative practice… any way we had to play her game, at least to save all the 5 children in her community who had been booked for ophthalmologic, neurological and chirurgical consultations respectively… Bringing in Léon with his Congolese accent, to pose as a foreign traditional healer to administer his exotic medicine, he was able to convince her … the old woman eventually ended up in the hands of a foreign ophthalmologist and within a week, she was able to see with both of her eyes. ... This had three main influences on her community: the miraculous healing of the old lady sent phenomenal messages of success to all the villagers; the old lady and all those who believed in her medicine listened with more faith in our message; and above all, the five children we had had difficulties reaching, were*

also easily attended to and are expected to be in their respective schools by now…" (Interview extract 'IC3' from question 'Q.5.1.C').

It is thus made apparent by the extract above that access to appropriate services of whatever kind, is sometimes in opposing interactions with established cultural norms. In the same way, access to services that include education and health care are often influenced by such perceptions within communities. It was asserted by all the eleven social workers for example that 71/107 of the people they serve had had prior contacts with other locally influential interventions, ranging from a variety of traditional healers, intense prayers to curse bad spirits, to consultations with ancestral spirits or *'kuraguza no guterekera'*. In other words, listening to the alternative suggestions made by the social workers was usually just one of the options, and the responses varied from community to community or family to family, as discussed in the sections below.

7.3 The situation of the disabled children and access to the local school

The local perception was also found to be translated not only through the family practices in reaction to disabilities of their children, but also in the local school activities. With due reference to the explanations and illustrations in figure 12 and 13 above, respondents in regular schools that accommodated the children with disabilities also provided their own views as to why the children were in the schools. They included teachers, head teachers and students of the respective schools and their explanations are summarised in the following assertions:

- *The parents had no other alternative school in the neighbourhood;*
- *The disability could be tolerated in the school;*
- *Someone in the family or in the school insisted that the child remains in school;*
- *The teacher (specific teacher or head teacher) insisted and the child is still in school;*
- *Disability was growing and occurred when the child was already in the school.*

Apparently, the explanations seemed to point out that, 'casual inclusive education' (Stone, 1999), was taking place with hardly any planned initiatives to support, halt, or define it. This was testified by a generalised absence of documented records of the children with any particular educational needs in seven of the schools surveyed. '*You are the first to ask for this kind of record'* one of the head teachers had said, then her deputy exclaimed: *'How do we record these things?'*. Thus, the study undertook the option to understand this inclusive educational phenomenon through two ways: 1. Documenting the categories of disabilities and special educational needs in all the nine schools surveyed, ranging from the few severe to the many mild disabilities illustrated in table 7 overleaf; 2. A comparative analysis of the few documented records in only two out of the nine schools surveyed, as shown in table 7 below:

Table 7 Indicating the only documented disabled children in two primary schools[9]

Primary school (S1C)							Primary school (S3A)					
Year	Total Registered	Drop-outs & repeaters	Mentally disabled		Physically disabled		Total Registered	Drop-outs & repeaters	Mentally disabled		Physically disabled	
			Boys	Girls	Boys	Girls			Boys	Girls	Boys	Girls
1	7065	1485	6	10	22	13	3269	968	10	5	9	5
2	4411	879	1	1	7	7	3179	965	1	0	14	12
3	3508	809	1	0	7	10	2359	544	0	2	7	7
4	2768	558	0	0	4	4	1853	528	3	0	9	10
5	2100	436	0	0	4	1	1556	439	2	2	5	5
6	1369	250	1	1	9	3	997	144	1	0	6	5
Tot	**21331**	**4417**	**9**	**12**	**53**	**38**	**13213**	**3588**	**17**	**9**	**50**	**44**

It is thus understood from table 7 above that, though the different categories and levels of disabilities are not apparent, those with mild or rather in the teachers' words, '*those who were acceptable in our classes'* because they had less challenging difficulties were in the schools. This leaves room for only those with mild disabilities of different types, confirming the explanation of the high annual dropout and repetition rates recorded in the two schools (5% and 9% respectively) in table 7. The teachers' explanations apparent on the interview notes (IC3) for example, include affirmations such as: *'those who are able to come to class and cannot disrupt the lessons are often tolerated'*.

Along with the data in the two schools above however, the study also attempted to record only cases of classifiable disabilities in the 9 schools, and these are reflected in tables 8A & B below, explaining the disability features in the schools surveyed.

Tables 8 Aspects of disabilities in the regular schools surveyed

A. Types of disabilities in the 7 Schools[10]

Difficulties	Mild	Moderate	Severe	Multiple	Total
Physical	06	03	-	-	09
Visual	03	-	01	-	04
Auditory	-	05	-	-	05
Epilepsy	-	09	-	-	09
Schizophrenia	11	-	-	-	11
Emotional/ Trauma	01	-	_	-	01
Total	**21**	**17**	**01**	**-**	**39/ 87 198**

B. Proportion of the disabled children in the schools surveyed

School/ Class	01	02	03	04	05	06	Total
School S1A	0.08%	0.07%	0.03%	0.06%	0.02%	0.005%	0.04%
School S1B	0.07%	0.05%	0.07%	0.05%	0.02%	0.005%	0.04%
School S1C	0.08%	0.06%	0.11%	0.07%	0.03%	0.01%	0.06%
School S2A	0.09%	0.09%	0.05%	0.03%	0.01%	0.01%	0.06%
School S2B	0.07%	0.03%	0.09%	0.09%	0.01%	0.01%	0.05%
School S2C	0.08%	0.07%	0.05%	0.07%	0.01%	0.02%	0.05%
School S3A	0.09%	0.08%	0.05%	0.08%	0.01%	0.01%	0.05%
School S3B	0.05%	0.07%	0.09%	0.04%	0.02%	0.01%	0.05%
School S3C	0.03%	0.04%	0.07%	0.07%	0.04%	0.01%	0.05%
Total average	**0.07%**	**0.06%**	**07%**	**0.06%**	**0.02%**	**0.01%**	**0.05%**

[9] The statistics were taken from the school register in May 2005. However, it should be noted from the statistics that schools (S3A) & (S1C) were comparatively larger schools.

[10] The pupils' disabilities were assessed according to the teachers' and students' understanding of the difficulties, and not based on any expert assessment.

The limited numbers and variety of disabilities can be noticed in the two tables above, re-emphasising the fact that the statistical data are still lacking for two reasons: Firstly, the various respondents (teachers, pupils and other key community members) who were the major sources of data, were often doubting and hesitant on what categories and types of disabilities to sample. Apparently, the difficulties of the children with special educational needs were not priorities that was ever emphasised in the school services. Secondary, the recorded data from the two schools in table 7 reflect by far (about 20 % and 10% respectively) a higher proportion of disabilities than those recorded in the study in the 7 schools that did not take any records. As a matter of facts, even some of the children with disabilities and their teachers who were being interviewed, kept inquiring for specifications of what was being talked about. Emphasised the assumption that the children were in the schools because it was a neighbourhood school and no one else knew of any other alternative.

7.3.1 Failure of access to the local schools

The previous sections have emphasised the situation of some of the children with disabilities who go to the local schools, and it has been noted in the tables (7 & 8) above that in all the schools surveyed, children with various disabilities are casually included. However, in a bid to understand the situation of those who do not have access to the local school, the study proceeded by investigating the local communities' (including the school communities) perception and responses to the phenomena.

Accordingly, table 9 and the interview extract below illustrate the views from various respondents, in which limited knowledge of the disabled children's situation is indicated, but the presence of the latter within the communities was abundantly known. All the respondents for example, including the district education officers and teachers, expressed awareness of the presence and locations of the children with disabilities in their communities who do not come to school, but at the same time, openly confessed their ignorance of important issues influencing their conditions and educational needs (See table 9 below). Their perceptions about disability were apparently strongly influenced by the local interpretation of it, to the extent that none of them was able to pinpoint any of the children's special educational needs, but were rather able to use the generic term that characterised them as '*abarwayi'* or '*abamugaye*', or the sickly or the lame respectively. This implied that their condition was little understood or was simply taken as one of the many disabilities. This ignorance is equally demonstrated by the diverse views of various respondents, when they were questioned about the presence of disabled children in their communities in quantifiable estimates. As illustrated by the questionnaire extract summary in table 9 below that gives only estimates, were only quantifiable in terms of: *very many, many, few, very few*, etc.

Table 9 Estimates of children with disabilities who do not go to schools

Questionnaire for district education officers (Q, II, Q. 2.1)			Questionnaire for teachers (Q. II, 2)			Group interview question for sampled pupils (I IV, Q, 1.1)		
Question: Are you aware of children who cannot go to their neighbour hood schools because of their disabilities or related educational needs?			**Question:** Are you aware of children in your neighbourhood who fail to come to your school because of their disabilities?			**Question:** Do you have siblings/peers in your akagari (or cells) that do not come to school because they are disabled?		
Respo nses	**Estimated No.**	**Estimate s of respondents**	**Respo nse**	**Estimated No.**	**Estimates of respondents**	**Respons es**	**Estimat ed No.**	**Estimates of respondents**
Very many	Over 25	3/15	Very many	Over 25	1/35	Very many	Over 25	11/126
Many	15 to 25	5/15	Many	15 to 25	2/35	Many	15 to 25	26/126
Few	10 to 15	6/15	Few	10 to 15	11/35	Few	10 to 15	85/126
Very few	10 or less	1/15	Very few	10 or less	1/35	Very few	10 or less	04/126

However, the results in table 9 can be interpreted within three perspectives:

1. The responses expressed as *'many'* or *'few'* disabled children stranded in their communities, shared by over 80% of the 3 categories of respondents, can be interpreted as a substantial number of children who are unable to access their local schools, due to their disabilities or related difficulties that cannot be understood nor be helped.

2. The schools like the community around them are basically aware of the children's difficulties of access to education, but do not necessarily share the responsibilities in finding the solutions.

3. Schools are open for all the children in the neighbourhood, and both the failure and motivation to access them by those with disabilities might be interpreted as a function of varying conditions they live in, and the support they are able to receive from their families and communities around them.

The interpretation of the table thus confirm the earlier analysis of this study that, access to the local school is open to all those able to get there, and both the pupils and their teachers are faced with the obligation or the challenges to cope with the prevailing educational conditions. The interview extract below from a respondent (social worker) in one of the communities 'C3', shows a picture of the level of challenges, limitations and motivations for both the teachers and students in schools 'S3A, B & C':

Q. ***6. What are the challenges and motivations for those that go or do not go to the school?***

1. *"…as I had told you earlier, the level of understanding in this village is the major challenge, and not the children themselves … because it involves all those who take decisions when or where the child should go to school … OLIV had gone to school with others for example, until the grand mother decided that it is better for him to stay at home, complaining that 'other children mistreat him …and his performance was poor … those who go to neighbourhood schools have*

either tolerable impairments or are supported by the parents or someone else in the family or school…"

Q. 6a. Was that the case with the two children (mentioned previously) in school* 'S3A'*?

"… I was talking about those we have on our lists who go to Rugarama P. School.... One is MUHA, an eleven years old in P 4, who is also the son of a teacher in the school; the other one has controllable epilepsy ALBE who is 15 and in P.5, and is supported by both of her influential parents… there was another epileptic girl in Mwendo P. school, MADI who is 11 years, and was at risk of dropping out of school because the head teacher was afraid that she might fall into the school latrine …"

Q. 6a1. Is the head teacher's attitude generalised in most of the educators here?

"*…I would not say so because I have not talked to all of them, … but generally speaking, the female administrators are very responsible and responsive (in school or local leaders) … well, it was a dilemma for the head and her teachers, she could not repair the toilet nor take any other measures to control her seizure because she did not have the means to do this, …, I am scheduled to check on her progress tomorrow, hopefully her condition will have improved and she will be more acceptable in the school …"*

Q. 6b. Are people here aware of the importance of educating their disabled children?

"…Generally, they pursue a place for their children in the schools … but I would not be able to answer on behalf of everyone … I am only evaluating it from the position they give to those who are educated … yes, many people would value education but they do not always educate them and I do not understand why', because primary education is free for everyone…sometimes, they simply stop their children from going to school…".

Q. 6b1 May be they believe that the disabled are uneducable?

"…You are absolutely right…someone was telling me the other day that: 'the school takes bright students and not fools like this one of mine … he is my fool not for those teachers' (Laughter).

Q. 6b2 What do they say when you suggest to take them to special schools like Amizero?

(Loud laughter) *"… they made me look a fool when they started counting the cost of the tickets to the school, the cost of the uniform, school equipment and especially the time spent escorting the children instead of attending to their crops… well ISAK and PRIN will go for sure, when they are of the age, then others will take a lesson … they watch each other's steps and inform each other…they do not necessarily listen to people like me…".*

In the extract above thus, the study presents through an original testimony, the generalised perceptions underlying many families' and educators' challenges or motivations in deciding support for the disabled children's education. It seems to underline the fact that schools and communities around them have a common understanding of disability, and influence one another in the options to be taken for the disabled children at schooling age. It emphasises the already mentioned fact in the above sections too that, the perceptions about disabilities in the Rwandan communities are varied, and do not necessarily present well defined aspects that can be correlated with specific treatments and situations of the children in schools.

Chapter 8

Outcomes of the grassroots community survey

In the second level of inquiry, the study was more concerned with the grassroots community's contribution to disabled children's access to services, especially to the local educational settings. It investigated among other things the key community-based potentials as well as the limitations responsible for the access, and thus, progressed by exploring aspects related to:

1. The different community members' influences on the key rights-related services for the young people with disabilities (including care, health and education),
2. The role distribution among the community members who influence the daily lives and development of the disabled children,
3. The key community inputs to basic rights-related services for the disabled children,
4. The link between the community and the local school activities.

It was stressed in the above sections for example, that cultural aspects play an influential role in the lives and the development of young people with disabilities. It is inevitable thus, that these aspects feature prominently in the ensuing sections concerning the grassroots community's contribution to local educational settings. The findings will portray the outcomes drawn from investigations conducted in both local schools and communities, and through these even none-evident factors will be revealed.

8.1 Opportunities and barriers for the disabled children

It has to be underlined here that one of the major preoccupations of the study was also in its concern for opportunities (or pathways) and barriers (or limitations) for the children in accessing local education services. It is a deliberate investigation into how the marginalised young people (including the disabled) are perceived or treated within the local communities vis-à-vis the difficulties and opportunities available. However, it has to be noted too that the earlier interest of the study to consider these community potentials in terms of the 'Index for inclusion' measures, or school-based standards for inclusion (CSIE, 2002), was compromised with the fact that the standards in the Rwandan regular schools and communities surveyed, did not offer adequate parameters for the planned comparative analysis. This is mainly because the schools generally fall short of the basic standards and requirements in terms of equipment, staff training, school environment, community awareness, etc. This section thus proceeds by firstly highlighting the two dominant findings: Evident and non-evident opportunities and their limitations to education.

8.1.1 Evident opportunities for access to services

The initial encounter with the field of research prompted an inevitable conflicting understanding of the disabled children's education in their neighbourhood schools. As the field realities in the surveyed schools and communities became more and more clear, the researcher's earlier theoretical views in relation to the universally recognised standards of inclusive education (notably in '*Index for inclusion'*, CSIE, 2002) were put into question. The picture that appeared reflected an increased inclination towards the local perception in understanding field aspects, and it was within this perception that the local capacities or limitations in supporting educational services emerged. This section deliberately singles out some of the inclusive opportunities that were evident in all the sampled zones of study.

8.1.2 Tolerance of a wide range of disabilities in the local schools

One of the unexpected phenomena for the researcher was the fact that all the 9 schools surveyed were able to present children with a wide range of disabilities in different age groups and challenges (See tables 7-9 above). It was equally phenomenal that of the 65 educators (teachers, directors & tutors) who participated, most (53 of them) expressed a sense of either sympathy or tolerance for the children's educational difficulties, while the rest (12 of them) expressed phobia for the challenges that they presented.

The educators' views were admittedly not necessarily reflected in neither educational programs and practice, nor any interventional plans. However, in their languages they expressed in different ways an attachment to the children entrusted to them in their classrooms, and the concern for all the children's achievement through education. An interviewed headmistress who had just sent out of school an epileptic girl for example (also cited in the interview above chapter 7), had earlier been perceived by the researcher as one of those with biased ideas about the disabled child's inclusion in the school, but her explanation rung a different note about the child's education:

> *"…I had tried my best to accommodate her in the school for the last five years, despite her growing sickly condition.… the parents had wanted to take her out of the school since the start of her condition….I insisted that she is a good student and luckily enough you came along with some controlling measures (the social worker).…the teachers are not difficult to convince because I am constantly discussing with them about her condition.… now that there is no more medication, she falls more constantly and more violently, …. When she feels a seizure is coming she runs to the pit latrines… you should not see the conditions of these latrines.… I have no funds to change the conditions of the latrines…I cannot get her the medications…, I cannot let her die such horrible death by falling into the latrine…her life comes first…'* (Field notes in school 'S1A' of community 'C1').

The interview extract thus presents the singular initiative of the head teacher to keep the disabled girl included in the school, more as a humane concern for her life, or the obligation to keep her opportunities in education open. In other words, the headmistress' testimony does not appear to reflect her responsibility to offer an equal place to the disabled child in the school, rather, an opportunity to offer her a better future through education. This possibly explains why, when the school premises became dangerous to the student's life, the opportunity for the better future appeared to be endangered too, and thus the option did not necessarily involve searching for other educational alternatives, but keeping her away from the eminent danger. It is also apparent that the head teacher's testimony links the opportunities for both survival and education of the student as interdependent. In other words, the head teacher would be responsible for the latter only if the school did not endanger or jeopardise the former.

In the schools surveyed thus, the evidence of widespread tolerance of disabilities in the local schools came as a response to three key questions underlying the investigation:

1. Are there children with disabilities or special educational needs in the schools?
2. What are their conditions?
3. What are the major educational difficulties and how are these addressed?

The major outcomes of the investigations were mainly portrayed in the previous sections, and table 8 above illustrates the key responses, from which some of the facts are highlighted as:

- In all the nine schools surveyed, all the teachers and students respondents were aware of the presence of children with disabilities in the school, ranging from the least to the most challenging disabilities (See tables 7-9). These include among others chronic illnesses like schizophrenia (known as *'ibisazi'* or madness), HIV/AIDS, different forms of trauma, sensory, mental and physical problems.
- Adequate understanding of special educational needs that were caused by the specific disabilities, were not quite evident in both schools and communities.
- Hardly any individual school or educator was able to present a comprehensive planning in terms of practice or provision for education of the disabled children. However, data from interviewed and observed respondents proved that isolated individual initiatives were scantly present, both in latent and active forms as discussed in the next section.

The head mistress' testimony above is one of the indicators of the situations in which a few educators are involved, and apparent in a number of cases confirmed by other respondents' views discussed in the next sections.

8.1.3 Individual initiatives and appropriate interventions

The community and individual people's attitudes highlighted in the previous sections signals the difficulties met in responding appropriately to the needs of the children with disabilities. It is thus compelling to consider some of the initiatives that stand out as outlets to appropriate

practice in rights-related services that include education and rehabilitation. The researcher's own experiences in including disabled children in a disadvantaged school is an example of such an initiative, as discussed at length in the first chapter (EENET, 2003 & Suubi, 2003). DAVI's teacher who supported the disabled boy, both morally and in schoolwork (Interview notes extract in question 'IQ 3a in section 8.1.5 below), as well as the religious head mistress' initiatives (Field notes extract below in section 8.1.4, taken in school 'S2C'), are all examples of individual initiatives or interventions taking place unheeded in schools and families.

The examples underline the observation that parents' choices of rights-related services such as education and health as responses to disabilities of their children, was also a decision taken individually or in close consultations with close family members, depending on the prevailing beliefs and awareness in their homes or communities. Accordingly, having considered the different ways interventions and decisions are made by different families or community members, the investigation interpreted personal initiatives as a journey through three critical stages, along which any individual family or group was prompted to respond to three critical questions posed before any decision to intervene is taken as illustrated in diagram 14 below.

Fig. 14 Three critical stages mapping the development of individual initiatives in confronting disabilities of disabled children

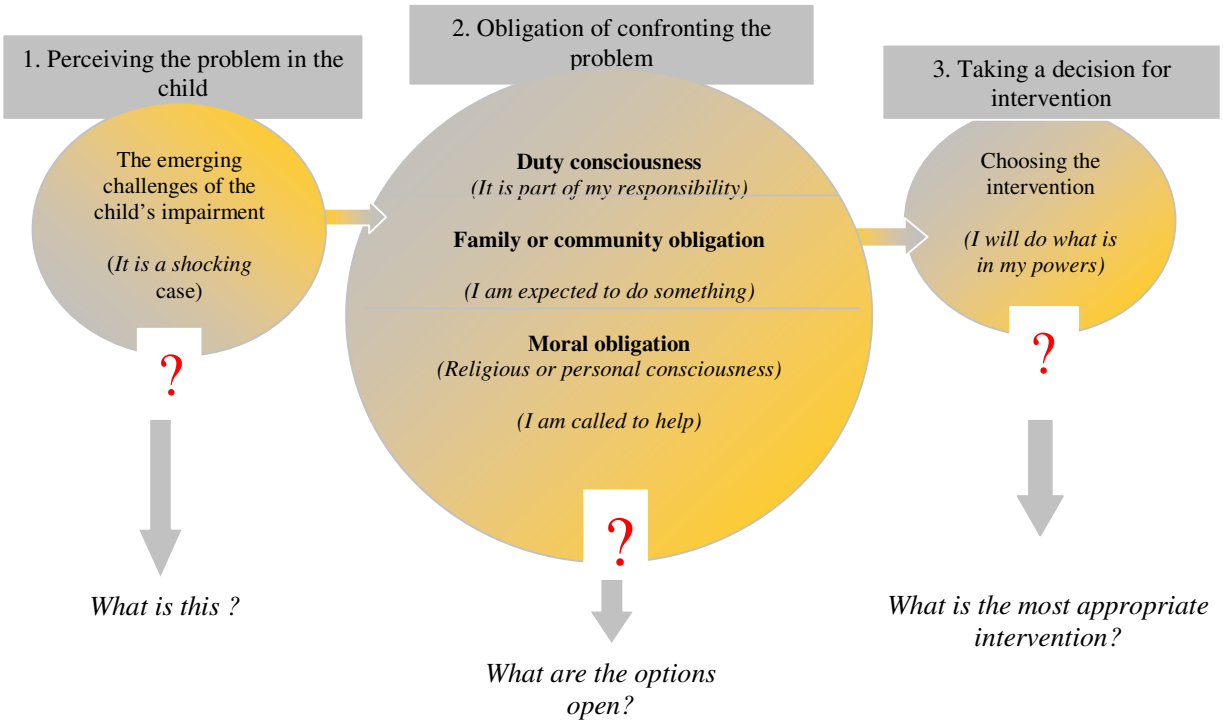


Figure 14 above brings together in an illustration of the critical stages individuals or families pass through, when confronted with the needs of their children with disabilities. They include observations made in 27 of 35 families (validated through informants) and interviews notes

taken from 7 of 9 schools. The first critical stage seem to appear when the individual parents or educator come face to face with the shock of the child's impairment and is questioning what it is and what to do about it. The second stage seems to appear as a response to the first question also, when s/he is faced with the obligation of confronting the problem, and attempts to find out the options to take. In other words, the question '*what is this problem?'* is followed by, *'what are the options open'*? The final stage involves taking a decision on what to do for the child and choosing among the available options, or questioning about '*the most appropriate ones'*. As the three steps in the diagram above illustrates.

The issue being illustrated by the diagram thus, is that at every step taken there are critical decisions to make, and each of them determines the future of the disabled child. The decision to abandon the child or the state of conflicts and confusion in families because of the birth of a disabled child for example, often take place when the parents find themselves in a situation where they cannot find adequate explanations to the questions that arise at the first or second critical stages. The decision to consult either a local traditional healer or a social worker often occurred at the third stage, when the parents are responding to the obligation of intervening, as one of the options open, or rather, as a response to a question: *what is the most appropriate intervention?*

Hence, the families' responses to the children's disabilities that were relatively appropriate or inappropriate (cases mentioned above), were also influenced by individual's or group of people's level of awareness about the problem and the interventions, but also their initiatives which were a result of the three critical stages. The testimony apparent in the observation note extract with the family of PRIN, a five year old with '*Cerebral Palsy'* also reveals this phenomenon:

> "*… the place is remote and impoverished alright, and the family is like any other in the surrounding in many ways… quite outstandingly distinct though, in the way they respond to their domestic needs… the mother is an established village tailor and looks after her disabled child while working with her manual tailoring machine …. The father attends to the domestic animals in the neighbourhood … he must be the village role model farmer* (the informant confirmed latter that he holds the village farmers' prize) *… it came as no surprise when they explained about their child: '… we were really confused at first … everybody here recommends this or the other traditional healer, and we actually consulted one…., but having seen no good results, we decided to stick to 'Inkurunziza' CBR … she latter inquired about the possibilities of educating the child in the near future… they deplored that the local head teacher had expressed his ignorance about including such a child in the school ...they were thinking hard about the child's education though …"* (Field notes, 'OC1').

It is apparent however, that in the absence of established and deliberately planned programs and policies reaching the grassroots communities, through which services, support and

opportunities for children with disabilities would be developed and channelled, the choice of appropriate intervention in response to disabilities is often marred with confusion and difficulties in many communities.

8.1.4 Initiatives in meeting the needs of children with disabilities

Our study considers individual or even family initiatives in responding appropriately to the needs of children with disabilities, as one of the most important potentials that would determine their education. Thus, a number of approaches observed with some of the educators (See table 10 below) highlight resourceful ideas for schools systems. It has to be admitted though, that most of the approaches expressed by educators in the table, remain classified by the study as 'theoretical', because little if any of it was observed in the classrooms. Rote learning and collective repetition was by and large the most common method used in schools (See extract in section 5.2.3.1). The teachers were clearly overwhelmed by the class sizes, shortage of teaching materials, and they portrayed hardly any motivation for innovative work. What emerged as evidently exceptional however, were isolated cases of individual educators' initiatives (head teachers, teachers and other educational partners such as parents and opinion leaders in communities). Extract above portraying DAVI's teacher' s initiative in school (S1A), and the observational notes below, reflecting the headmistress' work in an average catholic primary school (S2C)[11], are all examples of some of the school-based initiatives:

> *"… I had participated in group work in the seminar organised by the ministry of education, and I was now in her school… I am being convinced that the religious head mistress is determined to fulfil her God-given obligation. … her charismatic leadership was evidenced by her expressive relationship with the members of staff and students… her energetic movements seemed to be bothered by her heavy religious habits … her reactions to my inquiries were expressed more in active demonstrations of: … how the children and teachers are sensitised in the morning prayers and the general assembly;…how the boy with chronic schizophrenia from a foster home is encouraged and supported in school;… how the stigmatised relationship with other children was successfully combated and is no more; …how an albino girl who had been marginalised and had been at the risk of dropping out of school is supported in both class work and socially … she regularly punctuated her explanations or demonstration with the remarks: 'it is a constant struggle with every body and every thing in order to achieve anything for these special children …'. ..I found myself prompted into sharing with her my ideas of 'working with some experts and doing a few more adjustments in both the class and school system'…, which was interrupted by challenging if not enthusiastic questions: which ones, where, how do we get them …, She was obviously eager to learn more for the sake of the kids …"*
> (Field notes 'OC2' in school S2C).

The observation made in school 'S2C' above had marked its difference with its neighbouring schools (S2A & S2B) of the same community (C2), where little effort was spared by neither

[11] Religious linked or founded schools form over 80% of the Rwandan primary and secondary schools. They are popularly known as 'Les écoles libres subsidiées'.

the head nor other staff members to attend to the 3 children with special educational needs (schizophrenic, physical and hearing impairments respectively). The religious head teacher was obviously endowed with both personal initiatives and a charismatic will to explore all the possible avenues within her reach to cater for the children with learning difficulties. The challenges were visibly enormous, but she admitted that it was also one of her 'religious calls' to support the weak and the disabled. Like DAVI's teacher in school 'S2A' below and others mentioned above, her initiatives to support the disabled children in the schools could be characterised as a motivation of both her personal character and a vocational obligation.

8.1.5 Adjustments in educational approaches

Given the above testimonies of school-based initiatives, this section turns its attention to some of the classroom-based initiatives and adjustments observed. It has already been mentioned that the general survey of the school environment, the investigation of the school curriculum and school programs show no evidence of any planned inclusive perspectives. However, it is through in-depth interviews and selective investigations that some isolated responses to different difficulties are clarified, much of which are based on individual initiatives and 'latent know-how' that are hardly evident in the general educational practice.

DAVI's (an epileptic boy with a disabled parent who is supported by the teacher to buy medication) teacher for example, is a staff member in school 'S2A' with 9 children with disabilities, two of whom are the only ones that were singled out in the school as disabled (including 'DAVI'), because the others had mild disabilities and were perceived as non-disabled. In his response to the interview (IQ. 3a) he says:

> *"… I had known 'DAVI' as a capable pupil despite his disability … when he started missing classes, I took interest in his problems and eventually in his family,… then I understood how courageous he had been and difficult it could have been for the boy… I became even more determined not to loose him …I give him 900 Francs every month for medication,… making sure other students know his problem and support him when it is necessary, … allowing him to trust me is actually a way of getting him closer so that I am able to counsel him…he needs that more than anything else…"* (Interview notes, IQ 3a)*"*.

As discussed in latter sections, much of the school-based initiatives with which children like 'DAVI' have support for their inclusion in schools, are owed to different individual educators, parents or even close relatives. Accordingly, the data taken from teachers in the nine schools revealed enormous knowledge of theoretical approaches the teachers are able to employ in response to different challenges they face in their work of teaching such children. From the most to the least frequently repeated response by the respondents, the challenges and the methods are summarised in table 10 below:

Table 10: Educational difficulties in educating disabled children and some of the methods

Some of the educational challenges expressed by educators	Some of the methods used to handle the children with disabilities in regular classes
1. They often retard the class progress, 2. They often lag behind the rest of the class in performance, 3. They demand special attention, 4. The class performance is not homogeneous, 5. They miss lessons more often, 6. They demand more time, 7. The methods used are not applicable to their educational needs, 8. They are hard to teach, 9. They perform poorly in class work, 10. They are affected by different types of discriminations, 11. They cannot follow what the teacher is teaching, 12. The regular schools are not adapted to their educational needs, 13. Require special resources which are not available, 14. They usually suffer from various complexes, 15. They are usually uncontrollable, 16. They bring down the school standards, 17. They are not capable of learning, 18. Those without disabilities are not used to those with disabilities.	1. Explain to those with special educational need or disabilities individually, 2. Foster peer support and collaboration in class and outside, 3. Talking and listening to them, 4. Use guidance and counselling techniques, 5. Allow them more time and special position in class, 6. Use different methods and differentiated curriculum wherever possible, 7. Repeat for them in class work whenever necessary, 8. Sensitise them about schooling and opportunities open to them through education, 9. Show them that they are equally capable, 10. Work closely with the parents, 11. Explain to the class that all students are different but have equal place in life and education, 12. Working with key community members, 13. Encourage recreation for all the young people, 14. Counteract any form of discriminations, 15. Group them with others during class tasks, 16. Motivate them for class activities, 17. Allow them enough time for recreation, 18. Use memorisation approaches, 19. Be loud enough in class, 20. Encourage study tours in similar schools.

It will thus be understood from the tabled ideas that teachers face enormous difficulties in teaching the children with disabilities, but they are also theoretically equipped with ideas to respondent to the problems. The next section will look into reasons why these theories are not effectively put into practice.

8.2 Barriers to including children with disabilities in their neighbourhood schools

In the course of the investigation within the grassroots communities, the limiting factors appeared glaringly evident to the researcher. The significance of these factors to any educational projects is even exaggerated by the generalised poverty and deprivation in schools and the general community. In other words, whereas it takes a deeper understanding of what takes place in the communities to be able to dig out some of the potentials and opportunities that support the education of disabled children, the limitations and barriers seem to be openly perceived. However, the ensuing discussions indicate that it is only through interpretations of local perceptions, that the community-based barriers and opportunities to inclusion of disabled children could be best understood.

8.2.1 Absence of a deliberately planned policy

It came as no surprise to the researcher that the presence of a planned policy or any kind of action program guiding the education of children with disabilities in Rwandan schools was not evident in any of the correspondents' views. He had never encountered any specific government plan related to the education of the disabled children in his experiences in Rwandan education. This explained farther why it is only through isolated initiatives of some educators that their education was made possible, as highlighted in the previous sections. What is being underlined here however, are some of the limitations affecting practical innovations and initiatives in schools, resulting from the absence or inadequacies in both the local and the general policy plan related to inclusive education.

The study noted with concern that none of the respondents made any reference to his/her work in response to any planned policy, whether school-based or national. However, about 94% of the educators (85% primary school teachers, 97% of district education officers and 95% PTTC tutors) agitated for a nationally planned policy and budget, as a way out in supporting the education of the children with disabilities in schools. Though they all expressed awareness of many children with disabilities in their communities (See tables 8 & 9), and the difficulties they face in accessing education in the local schools, their suggested requirements for the development of inclusive education listed in table 10 below point to the missing links within both the national and school or local community policies.

In table 10, the major elements perceived through the relevant respondents' views (local educators' ideas in questionnaires QI, QII & QIV), as the most critical requirement to develop inclusive education in the local schools are listed. In a close scrutiny of the raw data thus, an insiders' perspective is presented, with which suggestions of indirect call for relevant programs or policies is sounded, in an informal way by which the local educators are able to inform the policy planners. Among those most repeatedly voiced requirements by the educators are:

- *The training policy in skills required for inclusive education,*
- *Sensitisation policy of educators, key personnel and the general community,*
- *A policy on provision of assistive devices and appropriate educational materials,*
- *Policy on adaptation of the educational systems and school infrastructure to inclusion,*
- *Policy of support to those who are in especially difficult conditions, like the poor and orphaned children,*
- *Policy on elimination of all forms of discrimination in schools and communities,*

It will be understood that table 11 only brings together the raw suggestions according to the respondents on the ground, and it is from their view that this study perceives the generation of appropriate plans and programs required to respond appropriately to the needs in their

schools. The suggestions are assembled from the tutors', local education inspectors' and the teachers' responses to their questionnaires as indicated in the table below:

Table 11 Suggestions from the local educators for the development of inclusive education

Q.II. 6 - PTTC Tutors	Q.I. 6.1 - Education inspectors	Q. IV.6.1 Primary school Teachers
What is most required for developing IE?	**What is most required to support inclusive education in the district?**	**What are the most important requirements that would support inclusion in your school?**
▪ Training of the required personnel, ▪ Adapting the teacher training programs, ▪ Providing assistive devices in schools, ▪ Sensitise the communities, ▪ Controlling the teachers/pupil ratios ▪ Provide adequate and appropriate educational materials to teachers, ▪ Plan a program that reaches the grassroots community, ▪ Train and provide a special personnel in each school in charge of children with disabilities, ▪ Improve the social science programs in the PTTC curriculum, ▪ Prepare regular schools to handling children with disabilities, ▪ Extra time for those with difficulties/disabilities of completing tasks in time ▪ Include guidance and counselling programs in the PTTC curriculum, ▪ Create pilot schools in each region, ▪ Provide resource centres in different areas.	▪ Sensitise and train teachers, ▪ Develop a support and a follow up program for the children with disabilities in schools and communities, ▪ Provide assistive devices and educational material whenever possible, ▪ Develop rehabilitation and health care services programs, ▪ Adaptation of the school infrastructure and equipment, ▪ Foster and encourage inclusive policy and practice in all educational settings, ▪ Foster and encourage partnership with interested NGOs, ▪ Minimise any forms of discrimination of the children, ▪ Identify the children with disabilities and assess their difficulties, ▪ Develop and encourage schools to accepting the children with disabilities, ▪ Provide the basic needs to all children with disabilities and other difficulties, ▪ Sensitise all the people with disabilities and effected families, ▪ Allow the local leadership to support the children with disabilities ▪ Develop special schools for those with severe disabilities,	▪ Training of teachers, ▪ Provision of specialised educational materials, ▪ Sensitisation of parents and community members, ▪ Provision of assistive devices, ▪ Health care for all the children with disabilities and other educational difficulties, ▪ Support the poor children with disabilities and other educational difficulties, ▪ Bring schools closer to the children with disabilities and other educational difficulties, ▪ Reduce the teacher/pupil ratio ▪ Organise study tours to schools where good practice is provided ▪ Remove all discriminative barriers, ▪ Improve remuneration for the affected teachers, ▪ Improve the infrastructure and accessibility for all the children ▪ Develop special programs and policy for all the children, ▪ Foster social and peer spirit among the all the pupils, ▪ Develop games, sports and other recreational activities that cater for all the children, ▪ Train specialised personnel, ▪ Support partnership with supporters, ▪ Assess the needs of the children.

The suggestions by the local educators make evident not only the requirements, but also the inadequacies caused by the absence of planned support to education of disabled children in the local schools. Through their views on the solutions to the pedagogical problems, coupled with the initiatives discussed previously, a feasible plan to break the barriers imposed by lack of support through the national policies can plausibly be foreseen. More detailed strategies will be discussed in chapter eleven.

8.2.2 Inaccessibility of the local schools

The results of observations made in schools and community sites surveyed, and views from various respondents, reflect little evidence if any that local schools are ready or willing to accommodate children with educationally challenging difficulties (See table 12 below). The interviewed teachers repeatedly reiterated that their classes had no means to handle children with profound sensory, intellectual, physical and emotional impairments. In a casual conversation with one of the teachers recorded in the observational notes 'OS1A', it is noted: *"… 'We are only able to teach those who are teachable…', the teacher remarked and her colleagues nodded in agreement…".* She was referring to pupils who are unable to follow her regular education because of their disability, citing an example of a child in the neighbourhood of the school with severe cerebral palsy. The child had severe mobility and profound sensory difficulties.

It was thus clear that whereas some educators and parents were able to go out of their way to initiate and improvise support for the education of some of their children as explained above, their schools and the general educational systems were still ill prepared to handle the challenging educational needs. Table 12 below present their difficulties not only in terms of shortage of educational resources and inappropriate learning environment, but also in a number of inadequacies in the collaboration expected between the community members and the schools in order to find some of the solutions. The latter is also perceived as a key factor in the development of inclusive education policy and practice (CSIE, 2002 & UNESCO, 2005). The extract of the observational notes below taken in school 'S1B' in community site 'C1', underpins the dominant views that point to access in the local schools:

> *"… the pastor's view was not distant from that of the local counsellor and five other community opinion leaders previously met.… They all leave no doubt that there is quite a number of children with disabilities in the neighbourhood, whose places in the local schools is not provided for and remain nobody's preoccupation… '… how would she see what is on the blackboard … (talking about a 10 year old blind girl) …God gives and takes our children's sights, for he is the only one who gives and plans for our future… I have never seen a blind teacher, doctor, politician for example…what would she do anyway if she ever went to a school …?' … he went on to explain what a wastage it would be to educate the child… The local counsellor on the other hand, in reference to the same child, boasted of his exceptional achievements in forcing all the educable children of his cell into the local schools except her… 'She could not because of her disability… only three are uneducable in my village'. He went on boastingly…* (Field notes 'OS1B' in community C1).

A number of phenomena about inaccessibility to the local school for many children with disabilities are thus raised within the opinion leaders' perception of the child's education as:

- Opinions of key persons in the community like the pastor and the counsellors cited above, express a generalised ignorance about the possibilities open for inclusion of the disabled children,

- They underline needs raised by the educators tabled above, especially the need for sensitisation of the community as a fundamental prerequisite for breaking the barriers to equal access to the local school for all the children.

Table 12 below indicates the most frequent responses expressed by educators and their explanations as to why the pupils are likely or not likely to be taught in their schools. In other words, it presents the teacher's earlier views on who is or is not teachable in their schools and the reasons.

Table 12 Local educators' explanations about children that have or do not have access to their schools[12]

Categories of children with disabilities *(From the most to the least frequently repeated suggestion)*	**Explanations expressed by local educators** *(From the most to the least frequently repeated suggestion)*
QII .2a. Categories of children that are not likely to be taught in the schools with others: 1. Mentally retarded 2. Blind and very low sighted 3. Dump and Mute 4. Schizophrenic (disruptive) 5. Profound disabilities 6. Those without limbs	**Reasons** 1. Inadequate training of the teachers, 2. Lack of educational equipment, 3. The child's impairment or weakness, 4. Problems of disrupting the class, 5. School environment not adapted, 6. Fear of loosing time on few children, 7. Stigmatisation in the school community, 8. They are unsupported
QII.2b. Categories that are likely to be taught in the school with others: 1. Mild physically disabled 2. Mild visual disability 3. Heard of hearing 4. Speech difficulties 5. Some street children	**Reasons** **1.** They are mentally sound, **2.** They progress at the same rhythm as their peers, **3.** Their disabilities is compensated **4.** They are more easily accepted by peers **5.** Teachers and parents can be able to support the child **6.** They do not require extra time for their support **7.** They are commonly known in Rwandan schools **8.** They would be like others if supported **9.** They are more easily supported in class work

It must be understood however, that the specifications in terms of numbers and exact conditions of the disabled children who had or did not have access to the local schools were not reliably established. As explained previously, this is mainly because the data were collected from the local respondents who are not necessarily predisposed through their job description to the kind of data required. Hence, it can be deduced again that inaccessibility to the local school for many disabled children is more in relation to attitudes of the educators and the general community than the physical environment of the schools. Tables 11 and 12 above in the teachers' views also explain the state of provisions the schools are able to work with. They express these as limited provisions demanding:

[12] The responses are summarised from the teachers' questionnaires Q. IV, item 2A & B

- *adjusted and improved school infrastructure to suit the needs of the disabled children,*
- *appropriate educational materials for both the disabled and the non-disabled,*
- *appropriate training for the staff,*
- *adjusted curriculum that address the needs of the disabled children,*
- *sensitisation of both the school and the surrounding communities.*

Since the schools surveyed did not particularly present any deliberately planned programs for education of the children with disabilities, it was necessary for the researcher to conduct the inquiry through discussion methods first, explaining about inclusive education and provisions necessary. In this way, the respondents were able to express the required provisions. Among the major issues raised are:

- *Inadequate human resources,*
- *Inadequate educational materials,*
- *Inadequately prepared school environment,*
- *Strain on existing provisions due to the high student-teacher ratio.*

The explanations provided by the different respondents (especially by educators) were discussed previously and they feature in the tables 10, 11 and 12 above, also illustrating the difficulties resulting from these inadequacies, or simply the barriers in the schools.

8.2.3 Dependence on support

Throughout the study, the issue of foreign support appeared to be a prominent feature in activities linked with the disabled. The first encounter with the practitioners and groups (social workers and paramedical experts) serving disabled children in the field, indicated that they were directly or indirectly dependent on with foreign NGOs or foreign expertise. This was mostly apparent in all the five established special centres and schools, especially those under the management of 'Inkurunziza Church' and the Brothers of Charity, the two biggest religious organisations with the longest history of rehabilitation and educational services to the people with disabilities in Rwanda. They respectively depended on the western-based funding agencies, among which the Belgian CREAS and the German CBM were particularly highlighted during the discussion.

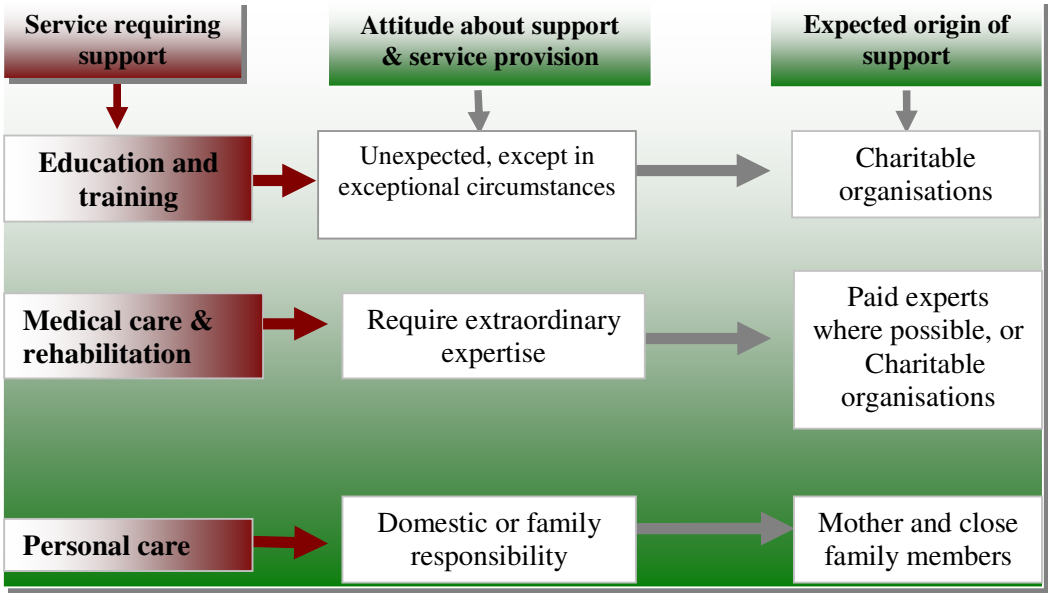
However, the study was more attracted to the interpretations of the collaboration by the beneficiaries targeted by the organisations. Thus, having observed what was being done for children with disabilities by family members in communities and centres, the researcher's views of support to the children had seemed a matter of family and community members only, and the collaboration with donors had looked an issue that strictly regarded the management teams, and therefore unknown to the grassroots community. It turned out though at the very contact with families, that the expectation of support from outside the communities

was a prominent phenomenon that transcended the organisations' structures and services. The researcher's earlier openness to all his respondents about his background in a European University for example, was changed because it raised unexpected reactions from many respondents in the communities. The insistence of the old pastor to know the researcher's background in community 'C2' and school 'S2C' highlighted in section 5.2.3.1 is one of the evidences. Because of similar experiences thus, the researcher had interpreted the insistence of the clergyman as the usual approach to find out the kind of connections the former might have with western-based supporting agencies. These sentiments were repeatedly expressed in many ways, and were apparent in observation and interview notes which included for example:

- *The child may go to school if some benefactors come to our aid* (a local counsellor who was opposed to the education of disabled children in local schools).
- *I have been told of some foreign experts who are able to fix the problems, but I don't think I will be able to reach them* (a clergy man whose deaf son could not study in the church school).
- *The problem of our children is made worse by the fact that we are out of reach for foreign expertise* (a head teacher in reference to the need of support for her initiatives).
- *Now that you live in Europe, what support can you mobilise for our children?* (A mother of a physically disabled child)
- *The disabled children can only study in special schools like those in Butare and Gatagara where European experts are involved* (A PTTC tutor in opposition to inclusion).
- *These cases are possibly fixed by foreigners,* (A mother whose child's epilepsy was not controllable because she had stopped medications).
- *I have tried everywhere, even in Europe; I have nothing else to do (*a Mother who had given up the prescribed physiotherapy exercises for her child after attempting to consult experts in Belgium).

It was not possible to figure out the origin of this kind of expectations, but what was made clear, is that the community members' attitudes are strongly influenced by charitable and religious organisations, that have traditionally supported people with disabilities. The Brothers of Charity in Butare, Gatagara, Ndera and Rwamagana centres, have particularly become popular icons for their services to disabled people. Their longstanding history in the service of the disabled people seems to have earned them a reputation of working with foreign support to provide for the most disadvantaged groups. Hence, the services in the centres were still expected to be free and foreign in many remote communities, and therefore, preferable to any community-based initiatives. The pattern in Fig. 15 below represents attitudes expressed by over 29 in the 35 families surveyed, in a comparative analysis of expected support and services:

Fig. 15 Expressed attitudes about service provision



As schematised in Figure 15 above, the three key services that require support (on the left column) were ranked against the established family attitudes about support and provision in terms of care, health and rehabilitation, as well as education (Central column). It is thus noted that the support was only expected from only two sources: the family, through what it can afford to do or pay for, and foreign support through charitable organisations (Right column).

8.2.4 Open refusal of access to the local school

The issues raised in the previous sections point to both the levels of preparedness within the educational systems and the awareness within their neighbourhood communities, as the key factors influencing the responsibilities of many schools in supporting some of the children with disabilities. However, in the investigations made, the cases of widespread rejection of the children from the neighbourhood schools were not so evident. It was through the analysis of the prevailing conditions that the study was able to bring out the isolated evidences of some disabled children who were openly refused entry into the local schools. The study looks at this '*open refusal'* of the children with disabilities in two ways depending on the methods of refusal used in the schools: *Covert and overt refusal*.

1. The *covert refusal* of many categories of children with disabilities in neighbourhood schools has been mentioned in a number of examples highlighted above. The study considered this as a hidden way of limiting access of education and other right related services to children with disabilities. This is apparent in all the school systems surveyed for example, because in all the cases they were not prepared to accommodate any of the children

with disabilities. Such schools presented educational situations in which the children were covertly refused entry in two ways:

- The unprepared educators, who found themselves in confrontation with a student's condition that they were unable to handle, often reacted in a manner that repulsed the child from the educational setting. These included for example, subjecting the child to the class routines and regulations like other children that the former cannot adhere to; condoning social stigmatisation and discriminative behaviours or by simply not providing the school regulations and policies,

- The generalised absence of support services, ranging from community-based services to simple school-based accessibility and assistive services for the disabled children. The unavailability of these in all the communities provoked a situation limiting access to the local school.

The case of ALBE highlighted above in school 'S1A' is one of the typical examples of covert refusal of access, in which the headmistress was caught in a situation where she had to openly keep the epileptic girl out of the school, simply because there was neither medical provisions to control her condition, nor enough financial support to adjust the school premises to accommodate her.

Accordingly, the widespread inadequacy of resources in both schools and in communities, as well as the generalised inadequate awareness among the community members and personnel involved have lead to covert refusal in many school. Based on all the cases investigated, the study is convinced that this kind of rejection appears to be generalised, accounting for the many inappropriate services in education and other rights-related services for even children with mild and correctable disabilities, and therefore accounts for the majority of school drop-outs.

2. Unlike the previous category of refusal, the cases established by the study as *overt refusal* of services such as education to children with disabilities, were not many. In other words, the cases where a teacher openly sent the student away because of his/her disabled condition, against the child's or parents' will were not very apparent. In fact, the commonest cases were where the parents withdrew the children after a seeming compromise with the school authorities, or the child simply stayed out of the school because s/he cannot cope with the school situation. The typical case highlighted earlier, involves SHEM (See table 5), an eight-year-old girl who had been sent away by her teacher in the fourth grade. All the previous teachers had found her acceptable in their classes, until the fourth level teacher who proved relatively strict and conservative, decided to send her home. When the teacher was confronted by the researcher in school 'S3A', she had this to say:

> *"… the girl does not belong here… she belongs to Ndera (a psychiatric centre) … I am expected to raise the class standard and it is through good discipline that I am to achieve it … it is unfortunate that she cannot cope… I sent her to her parents so that they find her an appropriate place…"* (Field notes in school 'S3A'*)*

However, given the quality of educational resources and the teachers' attitudes in schools surveyed, similar cases of rejection are also likely, but it has to be observed here that both overt and covert rejection of children in schools appear to operate interchangeably in all communities surveyed. When SHEM was found at home (in community 'C3') for example, it was not evident that she was sent home against her own or parents' will, because nobody in the family seemed to oppose the teacher's decisions.

Having considered the levels of rejection of disabled children in the local schools, the study is prompted to analyse the community contributions with particular interested in the kind of provisions available, the community members responsible and how their responsibilities are organised and dispensed at both family, community and school levels.

8.3 The community potentials and limitations

Complementing the previous one, this section restricts its consideration to the contributing factors within the communities, as potentials or setbacks influencing access of the disabled children to the local schools. Those highlighted include the different community members' influences in supporting or discouraging rights-related services such as care, rehabilitation and education, particularly the various roles played by the family and community members; as well as the effectiveness of information circulating within the neighbourhood. The study raises the apparent and the non-apparent potentials and limitations in communities including schools surveyed, as determinant factors influencing the education of children with disabilities.

8.3.1 The roles and responsibilities in supporting children with disabilities

The disabled children in families surveyed were mainly cared for by family members, and the distribution of their roles and responsibilities was particularly of interest to the study. This is mainly because the responsibilities in caring for the children at home were perceived as important determinant factors not only for the kind and quality of welfare of the children, but also for all crucial services for their lives, notably education and health care.

Taking different cultural aspects into consideration, the services offered by the community and family members appeared to depend on issues like abilities or disability, age and sex of individuals concerned; as well as established community beliefs and customs as summarised in the table 13. The investigation also considered the fundamental needs of the children with

disabilities and the different inputs of the community members. The basic responsibility inputs considered included basic care provisions and protection of the child's health, as well as other services that may include basic education or instruction. The community members considered were family members including the close and distant family members, neighbours, hired workers and specialists. The resulting distribution is summarised below, and subsequently explained:

Basic inputs	**Responsible (in order of importance)**
• Basic provisions	Whole family and close neighbours
• Basic care	Mothers, sisters, siblings, paid house-maids, unties, fathers,
• Education	Siblings, peers, social workers, teachers,
• Special instructions	Specialists, concerned neighbours,

1. It is meant by *basic provisions*, the very basic and necessary requirements for the survival and development of the child with disabilities. These included protection of the life of the child by sheltering him/her from any endangering phenomena, ranging from any environmental hazards like rain, fire, preying animals to natural occurrences like diseases.

2. The study considered *care* within two influential locations where children with disabilities were cared for and these included day care centres where some of the families brought their children for both rehabilitation and other care services, as well as their homes where the children live and are cared for in families.

3. By *education and instruction* inputs the study means any instructional program carried out at home or centres, which included both the formal and non-formal education; inclusive or segregated; basic or advanced education.

It has to be noted from the explanations above thus, that two key aspects are stressed: the wide range of services that are organised for children with disabilities, and the different responsibilities organised in homes or family levels, or in specified centres. The latter are established through the existing Community Based Rehabilitation (CBR) structures, developed differently by some NGOs, in which family and expert services are brought together regularly in community centres known as '*centres de jours'* or '*day care centres'*.

It is in the '*centres de jours'* that the children with disabilities in the neighbourhood are brought in for basic services such as basic guidance and counselling on home-based care services that include physiotherapy; taking appointments with specialists, how to use some medication, awareness and assessment of some disabilities or other related factors. Of the 35 homes investigated however, only 8 of the children had regular appointments in the day care centres, 17 had had irregular visits and 10 were being looked after at home. According to the concerned social workers and families, this choice was strongly influenced by three dominant factors: proximity to the centre or services involved first; the parents' level of awareness

about the child's disability and the required provisions and interventions; confidence in the services being offered at the centre; and the financial resources available to the family. However, all these factors seem to operate together in most of the cases. The mother of SHEL (the 6 year old with severe cerebral palsy) for example, had a relatively good standard of living before she lost her husband. She is now jobless and lives in an unfinished house in one of the Kigali slams. Though she had earlier attended all the CBR sessions and is quite conversant with the right treatments her child deserves, almost in tears she explained:

> *"… When I am not sure of what to give to my hungry children, I am so stressed and confused that I loose morale to conduct daily physiotherapy exercises for my* SHEL *… even his paternal relatives have abandoned us and we do not expect any more support…"* (Field notes in community 'C1'*)*

The extract thus testifies the range within which responsibilities of family members or the provision of services in centres are interfered with by other important factors, notably the socio-economic situation the family is subject of.

Similarly, investigation of care services offered at family levels seemed to depend on the disabilities or the needs of the child concerned. The observed examples involved taking care of personal needs such as feeding and toileting for the children, and administering some prescribed rehabilitation and medical care services; conducting physiotherapy and occupational therapy exercises. These were administered by mothers, siblings (and peers in two cases), or other family members in the home, or paid house girls in some of the relatively affluent homes. As noted in table 13 below for example, the male family members played a relatively remote supportive role in caring for the disabled children. Some of the extreme cases were apparent in three of the families investigated where the fathers had even abandoned the disabled child to the mothers and had remarried, and five were reportedly in constant conflicts due to their children's disabilities. In both the in CBR centres and in homes, almost all the young people with disabilities investigated were cared for by the female family members, ranging from sisters, mothers, unties, grand mothers or paid house girls. In a number of cases, the elderly male family members (fathers and elder brothers) restricted their contributions to financial and material support for the children's welfare, and sometimes by taking them to the specialists and rehabilitation centres.

It is noted from table 13 that *sex, age and proximity* to the disabled child (in terms of relationship and neighbourhood) play a key role in determining what responsibility community members take to support the child, notwithstanding the level at which the family understanding the child's problem. Table 13 below gives a summary of responsibility distribution observed in the 3 communities:

Table 13 Distribution of roles and responsibilities in families and communities

Responsible members	Proximity in relationship	Description of member	Responsibilities and services	General attitude to responsibility
Family member	Close	Female (mature)	Caring including feeding, cleaning and taking them for medical services	Generally accepted as one of the responsibilities.
		Young female & Male	Playing, supporting protecting and feeding depending on the disability and age.	Accepted as a norm in the family or community.
		Male elders	A duty to supervise services, and ensuring that the disabled child is catered for,	They take it as a responsibility but not always well accepted.
		The disabled	Family cores depending on the family or cultural norms and disability	It is one of the responsibilities, unless refused or unable due to the disability.
	Relative	Distant	Sharing information about the appropriate services for the disabled child,	A responsibility owed to family members.
		Close	Information sharing and participation in support when called upon, depending on the sex and age	A responsibility owed to close family members, but sometimes nagging.
Neighbours	Close	Depends on the links with the family or what they have in common.	Consultation and information sharing about disability, but often nagging	Culture of good neighbourliness, which is not always positive…
	Distant	-	- unknown	Rare in urban and rich communities
Other community members	Varied: more closely linked among the disadvantaged urban and the rural, than in urban rich communities.	Depends on the linking factors within families. E.g. those who have common beliefs or those who have children with similar disabilities were often very close.	They share information concerning the disabled child: The advice to visit a traditional healer, see a medical expert or other specialists.	Dependent on the proximity to the family and responsibilities of the individual in the community. E.g. A social worker or Christian brethren.

The study considers that responsibilities in basic provisions by the family and other community members are important inputs for the development of the children with disabilities. However, education and instructional services appear not to be a priority provision in many families. The study was able to establish only 3 out of 15 *'community-based day centres',* in which rehabilitation instructions and basic education were jointly

carried out by the social workers and parents under the support of religious NGOs. The instruction programs included[13]:

- physiotherapy exercises taught to both the parents and the older physically disabled children;
- reading and writing to those with mental disabilities;
- daily living skills, such as cleaning one self, dressing, weaving and knitting for some,
- the general awareness raising on a wide range of disability related issues

It will be understood thus, that most of the day centres served as meeting places for the parents of children with disabilities with the assigned social workers, and the instructions were mainly focused at the rehabilitation of the disabled child and awareness rising in disability related issues.

On the other hand, the study could not establish any evidence of family or community-supported services related to mainstream education. The disabled children who went to the neighbourhood schools mentioned in the previous sections were few, and were there either because their disability permitted access into the school or because a community or family member supported it. It is with this background that the study turns its attention in the next section to the nature of collaboration and relationships within families and community neighbourhoods, and how these have an influence on the children with disabilities.

8.3.2 Collaboration in families and neighbourhood

Having considered the significance of different roles and responsibility distribution among different family and community members while supporting their disabled children, we look at collaboration as part of the traditional relationship within the families and neighbourhoods, and its significance to the way the members react to the children's disabilities and related difficulties. During the course of surveys within families and homes, the bond linking mothers with their disabled children, siblings with their disabled brothers and sisters, and the interactions of these within family or peer groups, appeared a unique phenomenon that required further investigation. The study arguably associates the collaboration with the cultural ties that bind close and distantly related family members, previously discussed according to Kagame's (1954) and Nothomb's (1965) views of this relationship in what they termed as '*ubumwe'* or unity. However, it was equally apparent that the collaboration could easily lead to either negative or positive services for children with disabilities. Thus the neighbourhoods and extended family collaboration was perceived as a social entity with two divergent significances to the disabled children:

[13] Most of the exercises were also therapeutical, to stimulate both the mental and physical capacities in some children.

1. as a hostile environment in which disabled children are endangered by both the neighbours who are in conflict with each other, as well as the physical and social surrounding that is harmful (or exclusionary) because the child's impairment puts him/her at a disadvantage,
2. as a place where families find immediate support that is implicitly beneficial to all, including their disabled children.

These thus constituted the cultural or natural norms of the same neighbourhoods, demanding that neighbours share domestic tools or ideas for example; are present when there are cultural obligations such as weddings or burial ceremonies; peer groups of young people find themselves together in games and family cores. It is within the same social proximity however, that individual and private lives are violated, provoking contempt or other conflicting relationships. Such contradictory relationship is apparent in the observational notes made in community 'C1':

> *"… we had waited for ALBE, the 15 year old epileptic orphan and her only sister in vain … the house was open and had been freshly cleaned, … the lonely goat was still tied in the compound … 'these are signs that the girls are not far'… Sayi* (the informant*) had insisted as she lead the way to BYIR's grand-mother's home, explaining that the latter is the closest neighbour and a close friend of the two orphans…The old lady was welcoming and friendly…she later explained that the girl had just passed by with two age mates carrying water containers, indicating that they will soon pass by from the village water hole…she then went ahead to express pity about the poor girl in a lengthy story, punctuated by curses or appreciations addressed to specific individuals in the neighbourhood and family…the elder sister was characterised as brave and a good Christian who could not abandon the girl for example, but also stupid enough because she could not confront the malicious neighbours who are responsible for the sister's health condition…"* (Field notes in community 'C1').

The extract indicates three interrelated and yet contradictory qualities of community collaborations, which contributes meaningfully to the lives of children like ALBE. These were classified by the investigation as:

1. Collaborative neighbourhood reflected by the grand-mother's apparent concern and responsibility over the two orphans, expressing willingness and interest to offer support when required,

2. Malicious and dangerous neighbourhood reflected in the old lady's expressed suspicion of the bad neighbours, who could have harmed the poor girl. She also alludes her unwillingness to engage into any collaboration with them and expected imperative concurrence of the two girls,

3. A close interaction between family members and neighbours, reflected in order of proximity to the disabled child: in the elder sister (in lieu of the mother and other siblings); the peer groups with whom she shares domestic chores; the good neighbours such as the old lady and the bad neighbours referred to as dangerous to the child. The collaboration within and between these groups is clearly dependent on their close relationships and proximity.

The contradictory collaborations in relation to young people with disabilities were actually reportedly found to be rampant in many communities. The coordinator of the Inkuriunziza outreach rehabilitation program for example, claims that the disabled children were often escorted and supported to or from the day centres by their older siblings, parents or responsible neighbours, alleging on the other hand that unfriendly relationship was equally cited, ranging from casual teasing, discriminative labelling, to violence and raping. The director of Humura rehabilitation centre expressing his commitment to working with the local community, also expressed his disappointment about the local community as he discretely pointed at a girl (about 15 yrs) who had been a victim of rape, and the community leadership had not intervened. In other words, the collaboration is also dependent on the child's disability, age, sex, family links and activities involved; and what is perceived locally as conflicting or constructive interactions within the groups that directly or indirectly affect the disabled child.

The relationships within siblings and within peer groups appeared to be significant to the collaboration too, and dependent on the disability, sex and age of the disabled child, as well as the socio-economic status of the family. For instance, DIDI (the bed ridden boy highlighted in table 5) who hailed from a relatively wealthy family in urban Remera Kigali (community 'C2'), could not go to school like his brothers and sisters and was always locked up indoors. When he was brought out of his room, his youngest brother eagerness to play with him was evident, but was stopped because he would hurt him. The latter apparently saw little of him and subsequently knew little about his disabled brother. ISAK and PRIN on the other hand (in community C1), who are relatively of the same age in a remote rural community, were often found playing with their younger and elder siblings who clearly understood some of their difficulties. It was observed too that elder sisters and other female relatives of the disabled five years old ABD, in the Muslim quarters of Biryogo (C2), often worked hand in hand to feed him; conducted prescribed therapeutic exercises and rendered other basic support services to their disabled brother. RUDO (in C1), who was about twenty years old and had epilepsy and learning difficulties, told stories about his brother who always mistreated him and took his money after working together for it. The social worker summarised these contradictory collaborations and relationships in the following expressions:

> *"… young people on the whole, understand disabled young people much better than their older people… they interact with them more freely and more often, … they are able to share their languages, their games, their cores, their difficulties … they support each other and even conflict like all peers do… it is not acceptable to isolate one from the other …"* (Interview report, in community C1, Question, Q.7, 3b)

Hence, the roles of siblings as the closest family members, as well as that of peers as closest collaborators of the children with disabilities, cannot be ignored. It is through this relationship

that some of the basic services mentioned previously are provided in many families and neighbourhoods. The study thus, considers the collaboration at all social levels of the community as a critical potential because it builds on the social and cultural relationships or proximity to the disabled children and their families. It thus perceives the collaboration within the families and neighbourhoods as a fundamental base in supporting young people with disabilities, but also as a complex phenomenon that requires critical interpretation of each individual member's role in order to render it a useful channel in this regard.

8.3.3 Informal circulation of information within the neighbourhood

The more the researcher got into close contact with the community members, the more information sharing within the neighbourhood became important to the study. It was noted with interest for instance that the routine traditional greetings in Kinyarwanda, was also an important daily conveyor of information about the health and general conditions about members of the same community, including those with disabilities. It was formally shared in two parts to which every interlocutor was obliged to respond. The first part was an inquiry about each other's conditions such as, *muraho se?* is everyone alright? M*wiriwe mute?* Or how have you spent the day? The second part comprised an inquiry about other family members or neighbours, such as *Abana baraho?* Are the children all right? *Abandi baraho?* Or are others (family and neighbours) all right? Or how is your sick family member or neighbour? It was noted that such greetings were an obligation to every community member in their daily interactions, to which explanations or responses were expected whether in close proximity of each other or even at a hearing distance. Not only did they express the feelings of each other or other community members, but were also more often a casual way of prompting a discussion and exchange of views on the conditions of people or the general situation prevailing in the neighbourhood. It was noted however, that the amount of information exchange depended on the relationship between the interlocutors rather than the time allocated for the information exchange.

In the same way, the information about the family members' health and daily life conditions were openly shared among the people on daily basis, and this naturally included the conditions of the disabled or sickly children in the community. The study could not establish how far the information could circulate, but it was evident to the researcher that it was through such media that the most effective local healer was publicised, the effectiveness of the nearest rehabilitation centre was known, or the condition of a disabled child in the neighbourhood was discussed with scorn, sympathy or pity. The information sharing methods were quite informal, but well established and able to spread both dangerous and constructive ideas on a wide range of interventions for the children with disabilities. The extract of

DELP's (social worker and informant) interview (Question Q. 5.3a & b) below explains the effectiveness of this phenomenon in Christian communities:

> *"…because they call each other brothers and sisters in Christ and meet in their charismatic prayers* (Ibiterane*), it is easy to convince one another …those with epilepsy are particularly in danger…just yesterday I found that one of the epileptic girls' condition had worsened … It was clear that her born again Christian mother had stopped the medication again claiming that 'Christ has cured her' … it takes just one of them to convince her that the girl is haunted by 'Demons' and the solution is to take her to their church to curse them out of her…, thus, when our medications are able to control her seizure, then they think it is their God who is working miracles, they stop the medication and they will not listen to anyone else… On the other hand, the father of IZAK is an Anglican protestant priest, he does not believe in Demons, and we work together to support 'IZAK' his son with cerebral palsy …and through him, we are also able not only to reach his Christian community effectively, but also use him as a community role model, as well as our messenger of appropriate practice…".* (Interview report in community 'C3', Question, Q.5.3a & b).

In all the communities surveyed, there was no evidence that any form of formal communication was used, but there was sufficient ground to believe that informal communication about disabilities and related issues was effectively used and accepted locally. Hence, the CBR workers had all reasons to make use of this channel as an effective means of reaching the communities.

8.4 The channels of services for the disabled children in their communities

The previous discussions were dominated by a gloomy picture of the Rwandan communities, much of which seem to project a community scenario where disabled children's future appears hopeless. This prompts an outstanding question as to whether there are any feasible opportunities through which services for children with disabilities could be effectively channelled. This section however, attempts to bring together the plausible potential opportunities for disabled children's services that were apparent in the study. Most of these are deliberately summarised because they are actually directly or indirectly discussed in the previous sections (See table 13 & Fig. 15 above).

The study raised the concern earlier that there was no evidence of any locally established or formally planned infrastructure, through which services for disabled children could be channelled in the communities investigated. It was also pointed out that the existing rehabilitation day centres (or centre de Jour) established by church organisations were the only channels of appropriate information and support within a limited radius of operation in the communities they serve for children with challenging disabilities. Otherwise, most of the services and provisions were still very limited and very basic, and most of them were provided in homes through a range of both traditional and conventional services. A summary of those established through the investigations included:

1. *Services related to beliefs, ranging from charismatic praying for the children, to the administration of a wide range of traditional and modern medicine,*
2. *Provision of health and personal care to disabled children by family members,*
3. *Consultation of conventional services provided by expert physicians in centres,*
4. *Counselling and awareness raising on issues related to disability,*
5. *Education in regular schools without seeking any expert support or interventions,*
6. *Training in various skills, ranging from writing, reading, languages and technical skills.*

The study particularly notes that though some of these services are dubiously practiced, most of them are part of the community way of life and are trusted by the community members. It is also noted that by taking leverage of the potential within the trust and people's way of life, some important services have been able to reach the community. One of those that function in this way include the CBR services which operate in direct confrontation with many setbacks but are able to function as conveyors of good practice. One of the typical examples of CBR techniques is apparent in the story of the old lady in the 'Interview extract 'IC3' from question 'Q. 5.1.C', highlighted above. In other words, once the potentials within the community are accurately enlisted and used, then, appropriate services are possible. In the illustration below, the study summarises the link between the available opportunities and access channels to services:

Fig. 16. Channels of opportunities for services of disabled children within their communities

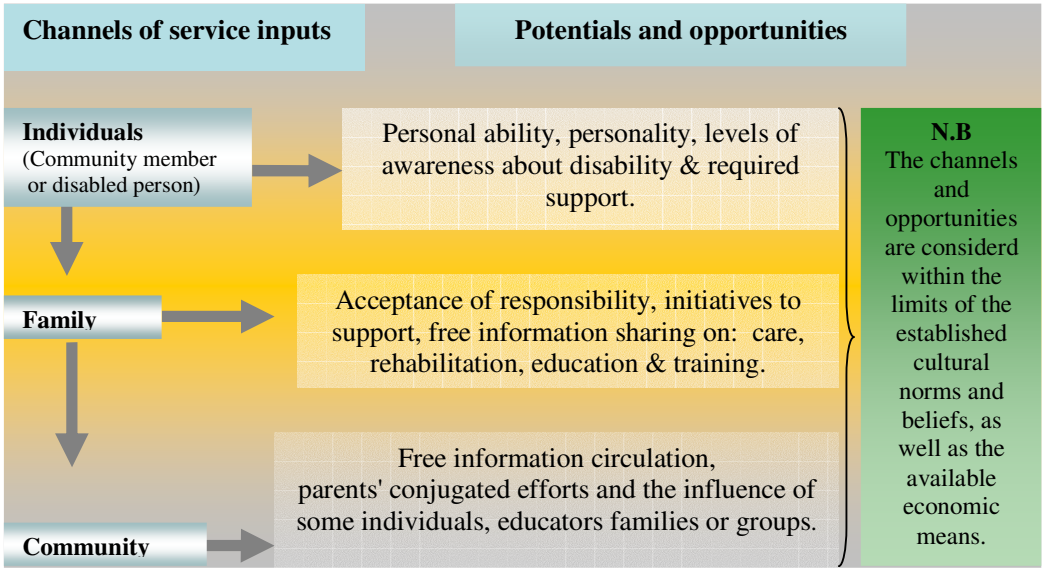


Figure 16 above stresses the fact that, though the previous discussions had underlined the roles played by superstitious beliefs in many communities, the channels these take to influence the members can also be used by good practice. A story of the parents who were convinced that their children born with club-feet were a bad omen for the family for example,

(apparent in observational notes 'OC1' in community 'C1', section 7.2.3), could have been resolved by either working as a trusted expert healer (as it was the case with the old lady in interview extract IC3, section 7.2.4), or by using the local means of publicising the practice, as it was done in Christian communities (See extract of Question Q. 5.3a & b above). In a number of rural families, as the social workers explained later, parents keep switching from one expert to another or from one practice to another, simply because they lack a trusted channel through which the right response to their children's disabilities could be established. The following statements taken from different respondents' accounts regarding perceptions of services for disabled children, underline the idea that the position of many parents is unstable, and the future of their children is still dependent on whether the right potentials are explored:

1. ***'God is the only one who knows what will happen to my daughter'*** (A born again Christian father of a five year old cerebral palsy girl),
2. ***'I am wondering why God chose this kind of life for our child'*** (a mother of a 5 year old epileptic boy),
3. ***'We had tried every where and now we are unable to try anywhere else'*** (a father who had sold two houses in attempt to get his epileptic child treated by different traditional healers),
4. ***'The recourse to the supernatural powers is the language they speak'*** (a social worker in remote village who had pretended to be a witch doctor in order to convince an old lady to respond to her Cataract operation),
5. ***'I had to quite the church after I lost my child'*** (a mother who had lost her 5 years old epileptic child, after opting for prayers in lieu of the medication prescribed by a specialist),
6. ***'Even when you are referring them to a specialist, it is important that you explain what an extraordinary doctor s/he is'*** (a social worker in the remote community 'C1'),
7. ***'It is expected that the community members juggle between religious convictions, traditional prescriptions and the services we propose to them'*** (A social worker operating in a Muslim neighbourhood).

Through the expressions above, the fact is underlined that appropriate practice in the Rwandan communities remains highly questionable, and the possibility of the community contribution towards inclusive education for disabled children might as well depend on how the locally established attitudes and perceptions are correctly channelled into the necessary provisions and services. In other words, the opportunities of inclusion lie in understanding, enlisting and enhancing all the relevant potentials within the community, counteracting the negative perceptions and practices within it. Thus, it takes the practitioners and planners, a good understanding of the community in order to designate appropriate services for the disabled children.

Chapter 9

The Socio-economic and political influences and redefinition of inclusion

It was inevitable that some of the social, economic and even political factors affecting the lives of the disabled children in the surveyed communities emerge as part of the discussion of the previous sections. This is because they influence a wide spectrum of the society in general, and the disabled individuals in particular. They affect their situation directly and indirectly by influencing the community or family contribution to their lives including their access to the local schools. This chapter therefore, is exclusively focused on the findings related to the surveyed communities' social, economic and political factors, and will consider these vis-à-vis the opportunities and challenges they generate to influence access to local education, and how these operate within the local context to contribute to re-definition of inclusion.

9.1 The complexity of the socio-economic and political influences

It has to be pointed out here that during the course of the study, the social, economic and political influences were increasingly perceived as very closely linked phenomena, because they operate jointly to generate influences to both the individual and the general community life. As highlighted in the first chapter however, the cultural characteristics of the communities are by and large the most conspicuous components of the social lives, also emerging in a number of the study findings as very critical to the lives of disabled children (See Fig. 13). It should not be construed to mean on the other hand, that economic and political influences are the least influential factors to the lives of the disabled children, rather, the study finds that, though they appear secondary to the latter, their influences are closely related to the socio-cultural ones. In other words, the attitudes and support that family or community members accord to the disabled children appear to be more of an attribute to their cultural way of lives, rather than the economic or political influences. As previously illustrated in Fig 14, it was noted that parents would be more quickly influenced by what the family, neighbours and relatives suggest as a response to the child's disability, than issues such '*how much to pay, for which services'* or '*what is constitutionally provided for disabled children'*. Thus, in concurrence with the illustrations in Fig. 13 & 14, table 14 below illustrates the spectrum, and emphasises the diminishing influences the three key factors have, both within and across the factors.

Table 14 The spectrum of factors influencing families and communities' determination of services for children with disabilities

From most to least apparent influencing factors

From most to least apparent influencing factors

Social factors	Economical factors	Political factors
Beliefs & values through – Religion – Tradition & culture – Formal education **Perceptions & attitudes towards**: – Others as different – Disability – Suggested services **Methods of communication of:** – Events & ideas – Occurrences of problems & difficulties, – Solutions **Communication through:** - Daily interaction, – Exposure, – Exchange of ideas	**Valuing or choice of** – Child to support, – Services to pay for, – How much to pay, **Decisions to pay** – For which child, – For which service, – How (in kind or cash), – How much to pay, **Obtaining services** - Who pays (supporters, relatives, parent, etc.), - Choice possible within the neighbourhood,	**Rights-related provisions** - Available provisions, - Available policies and plans, **Laws & policies** – Relevance to all citizens including the disabled, – Consideration of rights for all, – Consideration of cultural factors,

Table 14 above actually maps out the observations made in the field or in close contacts with community members' way of life. It translates the respondents' views about their community environment, as a means of transmitting the communities' general outlook vis-à-vis the position of disabled children within them.

Hence, the table reflects the observation that the political issues (3rd column) are ranked lowest in influencing families' support options for the disabled children. This implies that according to the spectrum, issues like national policies, laws and programs for disabled children featuring at the end of the spectrum, are unknown in the families and communities surveyed. On the contrary, socio-cultural factors that have traditionally been part of the community life and culture feature on the first level of the spectrum because they still retain a significant influence on the active day to day interactions within families and general community, including what is done for their disabled child. Free primary education of every child is emphasised by the new Rwandan constitution for example (Republic of Rwanda, 2003b), but none of the respondents or family during the intervention made any reference to it as something to pursue (See also Fig. 17), as a matter of national obligation to cater for their disabled children like every one else. On the contrary, church organised programs and services such as Inkurunziza CBR, and those influenced by the dominant neighbourhood

beliefs or perceptions, such as performance of rituals (Christian-based or traditional), appeared to be more popular and established as discussed previously (See table 14).

9.1.1 Social factors

Having stressed within the spectrum above the varying weights of plausible community-based support to disabled children's lives, it becomes inevitable to look into the social factors highlighted as the most influential variables. Access of disabled children into the local schools for examples, also involves their families' and communities' moral support in the same way they support their siblings or peers. This study thus, through a number of previous discussions, has pointed to cultural attitudes and beliefs influencing daily interactions within community members, as the dominant social factors that have impact on the disabled children's lives. It was discussed too, that the parents' and educators' perceptions about both their disabilities and education have to undergo a positive cultural adjustment, if they have to play a positive role in supporting the inclusion of their disabled children in the local schools. Table 14 and 15 show the dominance of such socio-cultural influences, apparent in the views collected from the communities. When 11 social workers (in the 3 communities), pupils and teachers (in the 9 schools) were asked why some disabled children were in the neighbourhood schools yet there provisions for their education were not adequate, their explanations portrayed some of the socially-linked factors, as summarised in the table below:

Table 15 Views portraying reasons why some disabled children are in the school

1) Pupils & teacher's views	2) Community workers' views
• Live in proximity to school, • Supported by somebody in the family or school, • Disability is tolerable, • S/he is X' s child (influential community member's child), • The disability kept growing when the child was in school, • The child has no other school, • We are able to help the child	• Supported by a family member or educator, • Proximity to the school • The disability is tolerated in the school • There was no other alternative

It is apparent in the school-based views of the sampled teachers and pupils for example, that the social relationship within families and neighbourhood is a dominant factor. In other words, when the child is socially interactive in the school community, or when s/he is known in the school community, is an important reason to earn the disabled child all the support the school can afford. In that respect, the influences of proximity to the school or membership to the community that include the school appears to be very crucial, because the school services emerge as a culturally linked support to which the teachers are expected to comply as community members.

The study considers that the pupils' and teachers' views are culturally and socially motivated and not influenced by the right of the disabled child, as illustrated in the spectrum in Table 14 above. The views of the community workers (summarised in column 2) as the translators of the dominant views of the community members, also appear to convey the dominant local socio-cultural attitudes regarding the disabled children in the same way. It highlights for example, the social role of the community in supporting or not supporting the disabled child in school, by underlining the fact that the child is in school because s/he is supported by the family or a key community member (teacher or social worker); or by underscoring the social role played by the school as the only alternative for some disabled children. In this way, the social position of the school is felt and some of the teachers' and peer's initiatives in supporting the child are implicitly enlisted. The dominance of the social influences are expressed in the interview extract with a senior teacher in school 'S3A' below, testifying why a boy with growing blindness is still in the school though he was not functionally achieving much:

> *"… he had always excelled since his first year… it was at the beginning of his 3rd grade when we noted his declining sight… his performance is no longer counted on now for his school work…, he can neither write nor read, he is even so discouraged that he can no longer listen in class … he is in school because he had always been here or because all his friends and siblings are there…fortunately the family is in the neighbourhood of the school but they cannot do anything…and neither can we …we only make sure that other students support him and the parents also make sure that he comes and goes back with his siblings and friends…"* (Interview notes in school 'S3A' on Question, Q.5.3a & b Q. 4.c).

According to the teacher's testimony, it is evident that the boy is only part of the social neighbourhood because he is free to socialise with colleagues and teachers in the school. The roles and functions of the teachers and other school community members is more and more in relation with the social support accorded to him by his teachers and peers, expressed in their sympathy to him and readiness to offer non-pedagogical services.

9.1.2 Economic factors

The field work involved taking the many small potholed paths criss-crossing villages up and down the hills, and some of the sights that could not escape the researcher's notice along the way included the semi-permanent structures of homes, trading centres and schools scattered on the slops; homestead surrounded by highly fragmented farmland to which large families owe their survival, and on which families were working with hoes or other hand tools; young people of all ages and sexes carrying water containers on their heads from a distant water hole, fire wood from a distant heath, farm products to or from the market; and yet, though their bodies expressed the dire need for better nourishment and care, their friendly smiles did not reflect it. These and similar categories of sights are typical of the Rwandan rural and even

the biggest part of the urban social communities, that seem to announce to anyone, the economic situation the inhabitants live in.

Of the thirty five homes surveyed, only five had water in the house for example, while the rest could be bracketed within an environment of the average or the very poor as described previously. In that respect, it is normal for anyone surveying such an environment to foresee the rampant causes of impairments such as malnutrition from inadequate feeding; water-born tropical diseases (including malaria) from untreated water sources, inadequate personal hygiene and environmental sanitation and others (See Fig. 3 for the causes of impairments). It is equally normal to foresee the difficult situation the disabled people go through because the support in terms of technical services and equipment for them are clearly absent and unknown in the communities. The testimonies expressed above in the voices of various respondents illustrate the conditions in which schools and teachers are expected to function, and the situation the pupils live in. The extract of the observation notes below summarises the situation:

> *"…the father went on to count the school expenses for the five children, how difficult it is to keep his family together …without any expression of remorse, the mother added that the two girls are dropping out this academic year and she was glad that they are already helping her with domestic work… my question as to why 'HERI'*, (a 15 year old girl who had lost her leg by a grenade) *was not going to the neighbouring school had been answered. The school was only one Km downhill from their home and clearly, she could get there with the big stick she usually uses…'what she is going to do there any way? These boys are already a big burden' the father went on* … (Field notes in community 'C3).

Though, the extract highlights more of the level at which the parent perceive and value their children's education as explained previously, some economically-linked factors that such disadvantaged families of disabled children and the general community are subjected to, are also implicitly underscored as:

- Because of many pressures on the domestic income, the children's contribution to the family through domestic cores is valued more than their education. Thus the children that are culturally vulnerable such as the two girls and the disabled are particularly the victims of dropping out of school when the resources are scarce,

- The family is clearly faced with many demands on their limited domestic resources, and amid many basic needs of their children, the parents are faced with the difficult choice between who and what kind of provision for their children. Thus, the disabled child is apparently found at the end of the list of beneficiaries when expenses for services such as education are to be incurred,

- The familial financial pressure does not only have an effect on the disabled child's education, but also point to shortcomings in other opportunities and services for her. The parents' attitudes show the moral position and support the girl is receiving from both the family and the neighbours. The chances for the girl to get an artificial leg are

remote for example, because the parents know little about this opportunity and because they are unable or not ready to incur the expenses involved.

The study thus considers that the economic problems are above all a nation wide issue, but its influences appeared to be felt at both community and family levels where the disabled children live. The impact is translated within the kind of day to day family difficulties in deciding the kind of expenses the parents have to make regarding their children's lives. The parents' frequently asked questions appear to address issues that are raised by the poor economic state of both the community and the family including: *Are there any provisions for the disabled children any way? If they are, how do I afford to pay for them? Is it necessary to pay for these any way amid other necessities? What can be done for other more pressing demands?* (See also Fig. 14 for critical questions asked before decisions are taken). Related issues are also discussed below within the political factors.

9.1.3 Political factors

It was highlighted previously that political strategies and plans providing for the disabled children are unknown in both the families and communities surveyed, and those available were still limited to very few communities and services provided by some religious NGOs. According to a number of families surveyed, the available educational and rehabilitation services for young people with disabilities are only associated with the work of brothers of charity, or Inkurunziza church and other similar organisations, and not necessarily the community or government organised provisions.

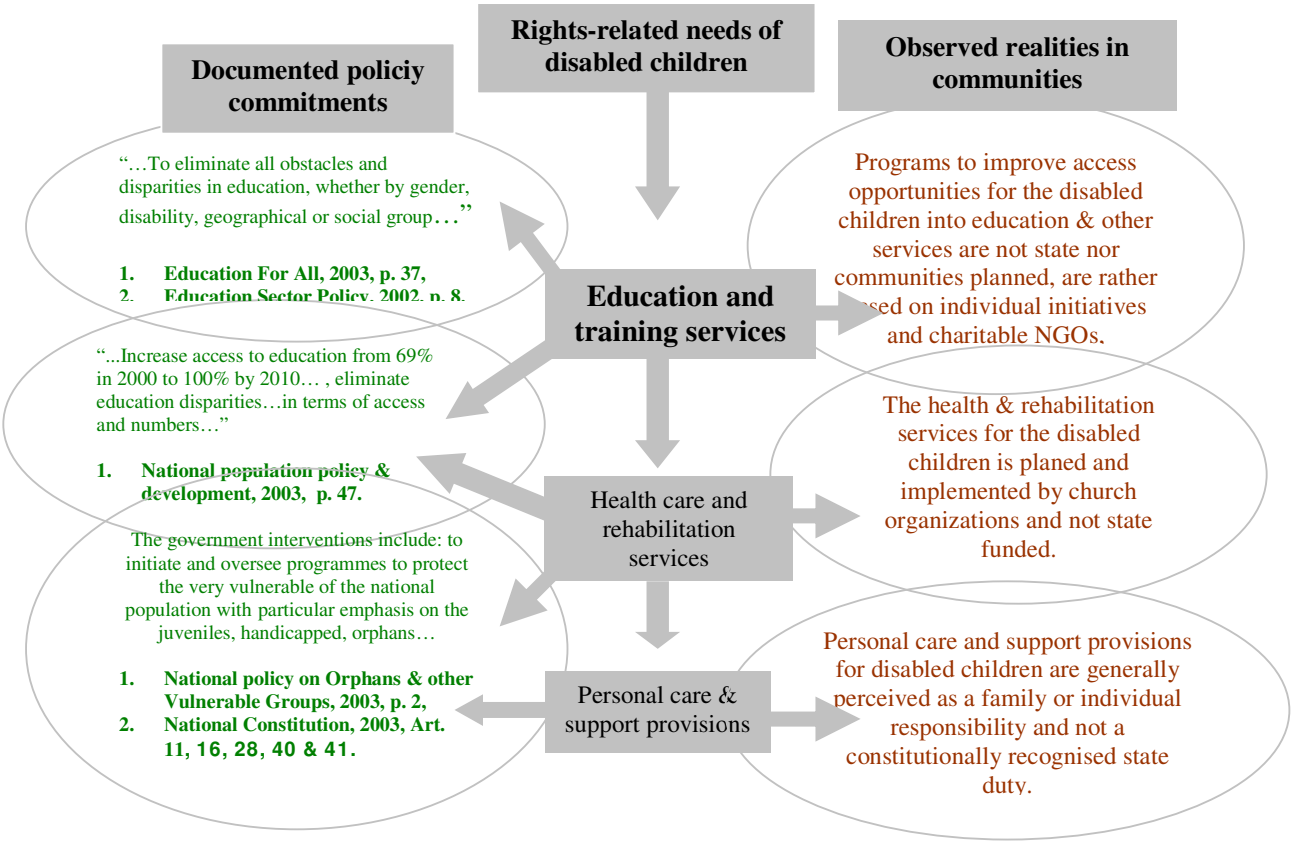
The study was actually interested in investigating the way the national policies (shown on the right side of Fig. 17 overleaf) are translated into practical services for disabled children in the villages, or rather, in the indicators of the grassroots communities' commitments to these in their services and provisions to the children. However, the following were some of the most striking phenomena observed in the communities surveyed:

- The local political leaders were largely unaware of any provisions reserved for children with disabilities, whether in terms of laws, policies or services. Rights of disabled people enshrined in the national constitution (2003b, Art. 11, 16, 28, 40, 41 & 76) and other political documents, appear to the local administrator as details that do not concern the grassroots communities.
- The appropriate services for disabled children are hardly known to many individual community members and families as rights and entitlements that all citizens must pursue and demand from the government, but rather as services that are associated with charitable NGOs or religious groups.
- Disability issues and related services are presented as strictly familial or individual matters, for which a solution had to be found through locally or traditionally established means.

- Activism for particularly the children's right to health care and education are unknown in all the villages surveyed.

Fig. 17 below is a summary of a parallel between the documented national political commitments and realities observed in communities about the rights-related needs of the disabled children:

Fig. 17 Comparative parallel between some of the documented political commitments and realities observed in communities



In other words, the study was unable to establish within the surveyed communities and families, any correlation between what was practiced on ground and the commitments expressed in political documents. There were no indicators of active advocacy or activism that promotes appropriate services for the disabled children as a right and entitlement for example, the local leadership were unable to translate and pursue the documented political commitments to provide services to the disabled children. The resulting situation in schools is summarised in tables 16 and 17 below.

9.2 The practice in local schools in situations of resource scarcity

The discussion in chapter 7 indicated some of the situations in local schools, and this section restricts itself to some of the practical issues related to the socio-economic and political situations observed in the schools surveyed. Table 16 below highlights some of the major findings based on the educators' suggestions or the most repeated observations they raised about the barriers and limitations, as well as the opportunities in the 9 schools surveyed where some of the disabled children were being educated.

Table 16. Some of the school-based challenges and solutions

Repeated challenges and difficulties	Adaptations suggested by educators
a) Practical school challenges	**a) Approaches suggested**
1. largely inhomogeneous class performance,	1. Individual support to disabled children whenever possible,
2. Too large classes,	2. Foster peer collaboration in classes,
3. Tight school schedule	3. Work with the parents,
4. Heavy school work,	4. Use guidance and counselling skills,
5. Increased truancy among the disabled pupils,	5. Foster non-discriminatory school culture,
6. Peer discrimination against the disabled pupils,	6. Use positive reinforcement whenever it is possible,
b) Most affected learners	7. Differentiate teaching methods,
7. Those with severe & challenging disabilities,	8. Use group work methods whenever possible,
8. Those least supported at home and school,	9. Extra time allowances,
c) Teachers' difficulties	10. Identify and assess the educational needs,
9. Inadequate skills,	**b) Suggested requirements in order of priority**
10. Inadequate educational resources and support,	11. Training of educators,
11. Unadapted school system,	12. Sensitise educators and communities,
12. Demanded extra time & special attention for disabled pupils.	13. Support, adapt & develop the education systems,
	14. Provide adequate and adapted educational resources,
	15. Foster and encourage a non discriminative school culture.

Having looked at the various challenges parents face in responding to the various basic needs of their disabled children, the study took interest in the ways school communities surveyed were able to cope with educational needs of the few disabled children who find themselves in the same class with other children. The teachers' and head teachers' responses about their difficulties could be categorised into: those related to the pupils' difficulties; those related to the educators' difficulties; and the practical problems observed in schools. It has already been mentioned that many teachers agreed that the categories of disabled children who impose most educational challenges are those with severe disabilities, specifically when they are unable to attend classes regularly, when they cannot use school resources and cannot be supported in any way in the school. The difficulties are mainly based on: their ill

preparedness to handle the disabled children's difficulties, inadequately equipped schools, as well as many other practical challenges related to the unsupportive educational system of the disabled children's learning difficulties arising from their impairment. When the 39 children who were identified as disabled by their teachers were asked respectively about their educational performances and activities in schools (See also Tables 8A & B in chapter 7), their responses (also validated by their teachers and peers as explained previously) showed the results tabled below:

Table 17. The recorded disabled pupils' performances and interactions in school[14]

A. Literacy and numeracy skills among the children with difficulties in comparison to their classmates

Skills	V. Good	Good	Poor
Writing	05	18	16
Reading	09	15	15
Arithmetic	07	15	17

B. Participation in the school activities

Activities in school	Always	Sometimes or not evident	Not at all
Interact freely with peers	25	14	-
Free with teachers	17	22	-
Collaborates with peers in school work	10	27	02
Requires peer support	17	07	15
Likes studying	11	28	-
Needs special support to study	Unknown	05	Unknown

The records above are based on the interview notes from the 9 schools surveyed, and it should also be noted that the data were not necessarily based on classified assessment methods of the children's abilities, mainly because the study was more based on the principle of the local interpretation of phenomena. It thus took numeracy and literacy as a very crucial measure of performance and the study proceeded by recording the school community' views on these as summarised in table 17A above. Complementary to that, different activities in schools were also perceived by the study as important indicators of disabled children's performance through participation in school activities, thus, the views collected from the school communities are summarised in table 17B above. The head teacher of school 'S1A' for example, expressed his interpretation of the practice of educating epileptic children as:

> *"…our work involves attempting to teach everybody in the same way first, then attempting not to leave anyone behind in the same teaching, and finally struggling to retain every one in the same small classroom with same teaching materials…the two epileptic children have to fall in line some how if they can ..."* (Field notes in school 'S1A' of community 'C1').

[14] The data on the disabled pupils were recorded in accordance to the teachers, peers and own ideas.

Though the head teacher was expressing neither any specific school policy nor practice about the education of the disabled children, he actually pinpointed the fact that the school was open to all the children without necessarily making much effort to neither discriminate nor adjust the educational environment.

Whereas the approaches suggested in table 16 for example, seem to explain why few disabled children find opportunities to study with others, the requirements suggested on the other hand seem to point to challenging limitations in what the schools are able to do for the children. As a matter of facts, the suggested solutions to the different challenges teachers face while attempting to educate all the children together, has been referred to previously as predominantly more theoretical than practical, and this is also summarised in the comments made by a European tutor in 'PTTC3' while referring to schools occasionally used by his students for their teaching practice:

> *"… many simple educational strategies like occasionally listening to individual problems of some children, or improvisation with some local educational materials, are often submerged by many pressing demands in the whole teaching schedules … much of the pressure on the teachers are actually personal (family issues, or are simply unmotivated for various reasons) … and are farther discouraged by the absence of a school mechanism that caters for specific or general problems …we are only able to keep talking and thinking about what we can best do to answer the numerous challenges in the schools… yet, the conditions are such that to address specific technical issues, the need to address the fundamental barriers first is crucial …"* (Field notes in PTTC3 of community 'C3').

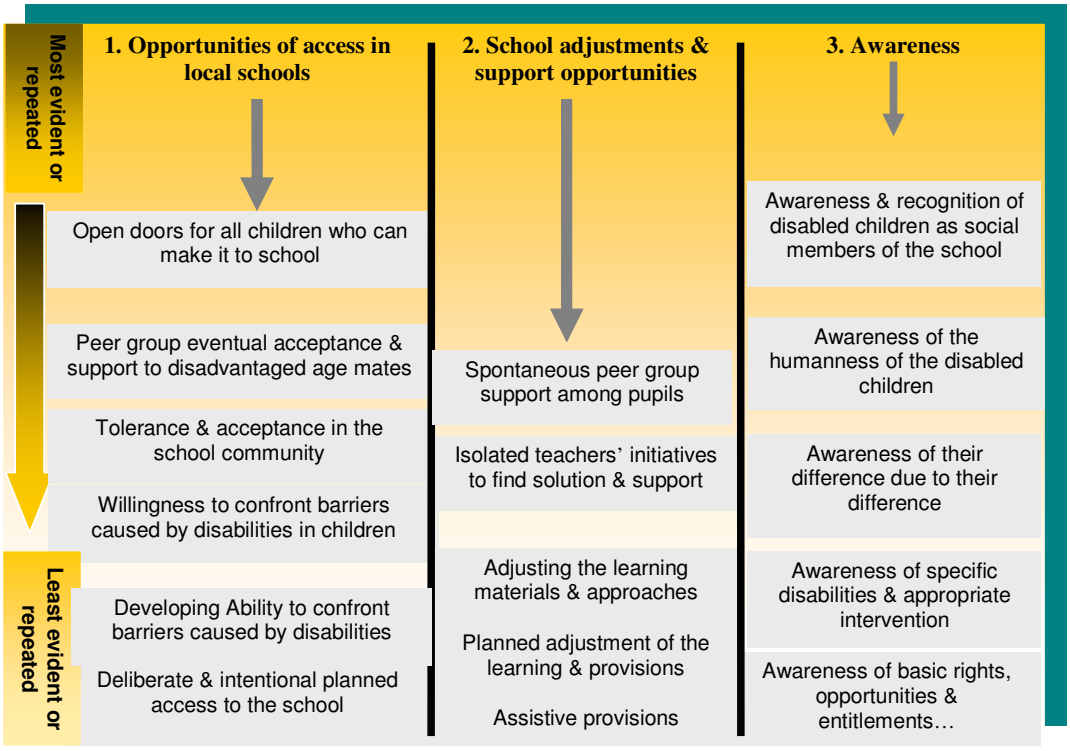
In the tutors' views thus, the emerging picture of the schools where some of the disabled children were learning with their peers, is that of a substandard educational setting, with hardly any evidence of innovative performance on the part of individual teachers and the school administration in order to counteract the many challenges. Given such a gloomy picture in the school however, some isolated phenomenal individual initiatives noticed in a number of schools as discussed previously, still offer a different view. The study was prompted to look into the opportunities open for some disabled children in such educational settings as explained below.

As illustrated in table 18 overleaf, only three items that might encourage their learning were considered: evidence of some *opportunities* offered by the schools through *encouraging access* of all the children; evidence of a degree of *adjustment of the school system* to accommodate and support the disadvantaged children; and *the level of awareness* of the disabled children's difficulties. These were compiled and classified from the observations made or the respondents' views in the 9 schools surveyed, from the most evident to the least

evident opportunities that the schools were capable of offering or were evidently at the disposal of all the school users for the benefit of the disabled pupils.

The opportunities of access to the schools surveyed for example, was not necessarily an issue that was discussed or openly made evident through school programs and policies. These were rather evidenced by some of the general qualities and interactions (largely social) that were clarified through observations made, and through some of the respondents' views. Though there was no observable active support that were offered to the disabled children in the schools, some of the teachers were able to discuss the different approaches they are capable of using (See also table 16 above). In all the schools however, the pupils were perceived interacting and working indifferently with their disabled colleagues. In other words, among the observed qualities that determine access opportunities for the disabled children, table 18 ranked as the most evident, the social or cultural spirits capable of opening school doors to any child who is able to come in from which some teachers built their obligation to provide possible support; as well as the spirits of free interaction among the children, within which peer support is also made possible (See 1st row in the table). On the other hand, issues such as *planning* and *developing* abilities to improve access of the disabled children in the schools, were ranked as much less evident in the table (See Column 1).

Table 18 Opportunities open for some of the disabled children classified from the most to the least evident in schools



According to column 2, opportunities of access open through adjustments and support opportunities in the neighbourhood schools was perceived as comparatively less evident. However, peer group support and some isolated individual teachers' initiatives that were positive to access were relatively more evident, while assistive provisions and deliberately planned adjustment of the educational settings were ranked as non-evident in the schools.

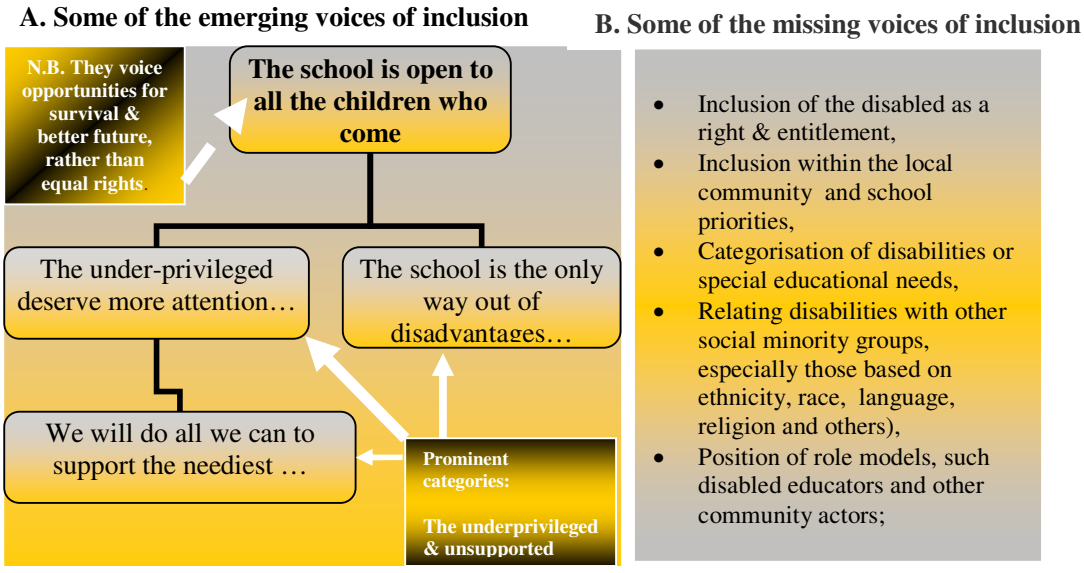
Hence, the study considered the levels of awareness in matters concerning both disabilities and related services in the school communities as an important determinant of access in education (See Column 3). By far, the most evident qualities of awareness in the school communities surveyed could only be traced within the cultural ways the teachers and pupils responded to the disabled pupils' disabilities. For example, another commonly used method in the schools to identify disabled children when they were asked for, was: *"the son or daughter of...",* signifying a community member known in the school; or "*the child who lives near the home of…"*, signifying a known place and community members. It was quite evident that the disabled children in schools were recognised as members of the community or family of the neighbourhood first, and their humanness and social beings became part of the recognition. On the other hand, it was not quite evident whether the school community was aware or recognised the disabled children as members of the community with a difference that deserved or demanded special attention as a right. The awareness of the disabled children's rights to educational services offered by the school like other children appeared unknown, as indicated on the last row of table 18.

9.3 Interpreting the emerging voices of inclusion

The previous sections have been interpreting the findings in the field that are related to the various dimensions of access to regular education by the disabled children, without necessarily the direct contemplation of the local views about inclusive education. It has been mentioned on a number of previous occasions too, that the term 'inclusion' has no direct equivalence in Kinyarwanda language, nor does it have any equivalent cultural interpretation for an average Rwandan. However, the investigation was prompted to bring out the local implication of inclusion through various social references of the local language in order to elicit the respondents' perspectives. This section thus exclusively constitutes what the study interprets as the dominant local voices of various community members in relation to inclusion. Some of these voices were heard referring directly or indirectly to issues related to inclusion, and some issues that were expected in reference to inclusion were not heard. Hence Fig. 18 below illustrates these as the '*emerging voices of inclusion'* on the left hand column, and the '*missing voices of inclusion'* on the right hand column.

The study was most interested in interpreting the common clichés in languages used by all educators, parents and all those who had links with disabled children's education for example, in which the '*the interest to support the education of all the children equally'* was sounded repeatedly. This was heard among those who were most supportive of the children's education, and even those who were most intolerant of any deviations among their pupils in the classes. A teacher who had sent away the eight year old SHEM despite her mild learning disability for example (In school 'S1A'), expressed her regrets in words such as: "… *I know the school is for all these children… but it is unfortunate… I am being requested to meet the obligations, and she cannot fit…and I cannot help…* ". Similarly, the head mistress who was struggling to keep an epileptic girl in school against some teachers and her parents' will (In school 'S3A'), explained her insistence as: *"… every one has to understand that we have to give this child a future also … and that future is here in this school …God knows how we shall achieve this task …"*. The most repeated expressions by educators, social workers and other key community members included: *'nabo bakwiye kwiga'*, or they should also be given a chance somehow; '*ubuzima bwabo babuteze mw' imashuli'* or their future is shaped by our school; '*ishuli n' irya bose'*, or the school belongs to all after all. In other words, the issue of including the disabled children was voiced as an interest and recognition of opportunities open in education for their children, but not necessarily as every young citizen's right or nation's responsibility. As illustrated in Fig. 18 below, some of the voices expressing inclusive ideas are summarised in column A, while others that were expected to express inclusion but seem to be missing are summarised in column B.

Fig. 18. The dominant voices of inclusion according to the Rwandan context



It is noted thus that through such expressions, advocacy and interest for access to education for all the children was more in reference to opportunity for a better future, or as an outlet for the most disadvantaged children rather than as an constitutionally endorsed right for every

child. When all the 135 pupils who were subjected to group interviews for example, were also asked: '*why do you like to study in this school?'* Their responses were varied but the spontaneous and commonly shared view constituted: *"ejo hazaza",* implying, 'for a better tomorrow'. The next two sections explain farther some of the voices summarised in column A and B in the above diagram.

9.3.1 The emerging voices of inclusion

The voices of inclusion appeared to be premised within the community members' expressions that were repeated in different ways, including voices such as '*The school is open to all the children who come',* and were generally interpreted as allusions to inclusive implications. As mentioned above, the study noted these from a number of locally situated responses of educators, social workers, parents and even the children themselves. The emerging voices from these seemed to express the perspective coined by Stone (1999) as '*casually integration*' of disabled children within the neighbourhood schools. Among the expressions constituting the voices are:

1. *"MASA' (a popular local singer) had been abandoned by his step parents … it is through school 'S1B' that he made his way out …".* (An education director attempting to convince other teachers about the chances of their disabled children during a group *discussion).*

2. *"If we cannot teach them, who else can? We are obliged to do what we can. It is the only chance they have in life anyway …".* (A religious head teacher in school 'S3C').

3. *"What else can I do for him? I am poor. All that I can do is to support him until I am unable…"* (DAVI's teacher who had supported him when he was about to drop out).

4. *"We are glad that the boys might go to school now…" who knows what would have become of them if they were grounded at home with their grand mothers…"* (A social worker who had worked hard to have a blind old lady operated on, so that if the latter is able to see, she would be able to let her disabled grand children's club feet attended to, and consequently walk to school).

5. *"Of course they insist that it is through school that the children will be able to emerge as some one in the community… but they are unable to bring him to school…".* (A head teacher referring to a physically disabled child in the neighbourhood, who he thought could learn but the parents were too old to support the child).

These expressions and a few similar ones can be interpreted within three types of voices that advocate for the support of inclusion: Those that advocate for an *open school door for all* who can make it; those that advocate for support because the school is expected to *open its door for the needy children* for the sake of their future and survival; and those that express the *obligation of the educators* to provide education for all the children including those who are disadvantaged and unsupported.

It must be underlined however, that as much as the community members' voices were highlighted for their advocacy of education for all the children in the neighbourhood, it ought to be understood that the word 'inclusion' was not necessarily apparent among the voices, and the different categories of the disabled children were not specifically singled out as the main target group. The expressions seem to emerge from the commonly voiced attitudes that advocate against exclusion of the disabled children, or as part of the locally established views that it is mainly through education that the disadvantaged and underprivileged children would have an opportunity to a better future. Thus, as indicated in A of Fig. 18 above, the dominant voices seem to rank the disabled children within the bracket of all the disadvantaged children like orphans and other deprived groups that require getting out of their misery through education. It is within these voices expressing the local values and attitudes that 'inclusion' of all the marginalised groups seems to emerge.

9.3.2 The absent voices of inclusion

As earlier mentioned, the classic definition of inclusion emphasises widely encompassing aspects that stress valuing a wide spectrum of students and staff equally, by reducing their exclusion from, and increasing their participation in community and local school activities, as well as developing deliberately planned policies and programs to reduce all barriers to learning and participation for all students categorised as `having special educational needs' or disabilities (CSIE, 2002).

Thus, having pointed out above the unusual context within which inclusive education is placed by the locally expressed views and attitudes, it is also important to point out that some of the dimensions of inclusion in its classic definitions could not be interpreted from local languages or respondents' voices. We consider these as the '*absent voices about inclusion'* highlighted on the right column B in Fig. 18 above. In the language used by the parents, educators and even the pupils themselves, there was little if any mention of:

- Inclusion of disabled children in the local school as a right and entitlement,
- Inclusive plan and programs as part of the local school and community priorities,
- Specificities in certain disabilities as part of the wide spectrum of disabilities and special educational needs,
- Disability as part of marginalisation based on ethnicity, race, language, religion and others that require to be included,
- Position of role models such as disabled educators and other community actors in the schools or communities,
- The communities' roles in planning and pursuing inclusion.

Most of the issues highlighted however, point to the missing links between the local socio-cultural values and the international standards of inclusion. These account for the locally situated missing voices that indicate a gap between the local and the conventional views of

inclusion. The position accorded by the society to the disabled children's situation, seems to be that of the disadvantaged like in many other societies, but the context within which the neighbourhood educational services are set, does not necessarily fit in with the inclusive perspective as explained previously. Accordingly, the educators, the school environment and programs are expected to respond to the pupils' educational needs with the provisions available and shared by others, without necessarily any obligation for the former to make adjustments required. It is finally considered by the study that much of the inclusive aspects miss out, and what was being witnessed within the grassroots communities and schools surveyed, was possibly what had been described by Emma Stone and Susie Miles (1999: 77) as '*casual integration'* or *'natural inclusion'* by Ingstad (1997) as previously mentioned.

Discussions and recommendations

Introduction

One of the questions that had often intrigued the researcher during his prior experiences in Rwandan education, and all along his research journey had been: *Rwanda's post-genocide situation is desolate and the vulnerable children's demands so multiple. In such a case, is the study on inclusion of the latter an important priority?* The question was actually echoed by some of the colleagues and scholars encountered along the way. It certainly raises several thorny issues, however, the unwavering insistence of the researcher seems not necessarily to be in direct response to the question, rather, as a function of the researcher's attraction to the field, and his experiences in which challenges like new opportunities emerged continuously, prompting his notice and pursuance. It is in this unrelenting pursuit therefore, that new outlooks and understanding of the field were shaped, and a direction for inclusion of the Rwandan disabled children seemed to emerge, in guise of an answer to the question.

In the first place, the argument that the socio-economic situation is the source of the country's difficulties, and therefore requires priority attention rather than wasting scarce resources on inclusive orientations was seen as a clear misinterpretation of the fundamentals of the principles of inclusion. The Salamanca statement (UNESCO, 1994: 11) for example, in recognition of the opportunities and importance of inclusion in developing countries, clearly states that, *'where few or no special schools cater for less than 1% of the children with disabilities despite their challenging numbers especially in rural areas'*, they should concentrate their efforts on the development of inclusive education and the relevant services needed. The idea is reiterated by a few studies on the situation of disabled people in developing countries (Helander, 1997; Kisanji, 1993; Stone, 1999; Stubbs, 2002), sharing encouraging experience that inclusive schools serving all the children in the same neighbourhood, are the most successful in eliciting community support and in finding imaginative and innovative ways of using the limited resources that are available. The point being emphasised here therefore, is that the study does not take the view that socio-economic conditions are the major barriers to inclusive education initiatives, planning or implementation, but rather, values such as equal access and opportunities in sharing available services in education, health, care and others should be the guiding principle.

Besides, this study particularly finds inclusive perspective a relevant antidote to the country's historical social differences and their exclusionary outcomes. It concurs with the Salamanca statement (UNESCO, 1994), in its article 2 that states:

> *"…Regular schools with this inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all; moreover, they provide an effective education to the majority of children and improve the efficiency and ultimately the cost-effectiveness of the entire education system..."*. (p. ix).

Of course this statement extract is pertinently relevant to the Rwandan society and has little to do with situations of resources shortage that is also inherent. However, in her work that highlights a wide spectrum of experiences on *'Inclusion where there are few resources'*, Sue Stubbs (2002: 12) urges that the poor countries have to "*place disability issues squarely on the development agenda, and advance inclusive education as a primary approach to achieving EFA*". The study adds that the field already reveals existence of latent knowledge and practice in Rwandan schools (See tables 10 & 16), thus, prompting the assumption that the issue of resources ought not to preoccupy the education planners. Rather, the sensitisation, motivation and empowerment of the Rwandan communities, and particularly the education stakeholders about the fundamentals of inclusion ought to come first, and then the resources will be generated from their ideas and initiatives.

Secondary, the researcher's own experiences as a head teacher in post-genocide Rwandan schools (See chapter 1), was also a revelation that integration of disabled children could be successful even where the economic support is inadequate, but where local initiative and community support are abundant (EENET, 2003). When blind students were introduced for the first time in the history of the country's secondary education, the researcher then as the head teacher of the school, found little support from the national budget, but when he latter resorted to the local community and its leadership, the response was overwhelmingly supportive. Since then, his stance has always been that, where there are no policies and support, the community potential and obligation to offer support to their disabled children, can also be a resource to rely on.

Inclusion is arguably a global issue but also a development bounded by national politics and economic situations. It is arguably fitted within 'education for humane future', which Henderson (1998: 14) takes as the most important enterprise of human culture, and an investment for the very survival and evolution of human species. This study is thus shaped by the arguments in favour of the ever growing emergence of global citizenship, which has sparked a new search for common humane values that acknowledge the marginalised groups' plight (Bell, 1998: 59; Henderson, 1998: 14; UNESCO, 1994). In the 'Understanding of the futures field', Bell (1998: 59) underpins the place of those who are marginalised within the future orientations as:

> "*…Futures might thus emerge not from the Victor's modernity but from those who accept it as part of many. One cannot be multicultural if one is in a dominant situation; if one has levels of powers over others… futures are more likely to come from the non-western, from the indigenous traditions: Tatra, the Aboriginal, the Hawaians, the African and even the Muslims. Others marginalised by the victory of world capitalism, women, the disabled …"* (p. 59).

It is thus within the perspective of future education that this study perceives the needs of 'inclusive education of the disabled Rwandan children, as a humane social development, rather than an economic perspective. It is premised in the view that every global citizen, whether rich or poor, would like to live in an inclusive and humane society and it is in education that such a society has to be effectively moulded.

The study notes that educational models that entail the inclusion perspective do not necessarily have to be adopted as foreign branded ideas. What is however inevitable for many societies, is usually the foreign influences in terms of resource sharing and the globally shared inclusion values (Lancaster, 1999). Basing on experiences in rehabilitation and other social development projects in Africa (Ingstad, 1997; Stubbs, 2002; Vanneste, 1997, Jones & Vetmeyer, 2002), the study is aware that the most successful development and reform projects are actually those developed on indigenous ideas and initiatives, to which international support comes as simply an enriching addition (See case studies 1-3). They are often less successful when they are inappropriately adopted from the economically stronger societies with their sophisticated organizations, then subsequently imposed to needy societies with weaker innovative capacities (See also chapter 5 of this study). The point being emphasised here is that the Rwandan inclusion development model is not necessarily sheltered from the dangers of external and internal influences, nor is it short of domestic capacities and potentials. Therefore, the most feasible option for inclusion development, might involve consideration of the locally-based situations and potentials, without loosing sight of the global trends, notably the fundamental values of equal access and social justice for all the vulnerable young people.

Chapter 10
Understanding the social context

10.1 Interpreting the Rwandan history and the culture of differences

With due respect of the above introductory arguments, the study also takes into consideration the influences of the Rwandan historical background from which the inclusive context take its roots as it merges with the international perspectives. Whereas the Rwandan past four decades cannot be associated with a history of social tolerance or inclusion, but rather, with exclusionary social conflicts and unrest, there are those who testify that this is a post independence or post colonial outcome (Bazivamo, 2002; Niyibizi, 2006; Nothomb, 1965). The argument prompts the study into the understanding that the post-conflicts trends in Rwanda today, seem to be in relation with the rediscovery of the unifying factors, in which the inclusion of the marginalised groups is implicitly addressed (Republic of Rwanda, 2003a, b & c). It is equally noted that this new trend is influenced by the internationally growing attention to the marginalised groups, from which emerge the concept of inclusion of the disabled since the last few decades (Barnes & Mercer, 2001; Barton, 2001; Bell, 1998; Charlton, 2000 & Henderson, 1998). In their work '*The politics of disability and the struggle for change'* for example, Barnes & Mercer (2001) affirm that:

> "*… during the last 2 decades or so, our understanding of disability has been transformed…, many people across the world, including politicians and policy makers, now recognise that 'disability' is an equal opportunity/human rights issue on a par with sexism, heterosexism, racism and other forms of social exclusion …."* (p. 11).

Of course the UN universal human right declaration of 1948 may not have had any direct impact in many African nations that were not independent at the time, but since the Children's Right Convention of 1989, through the Jomtien Universal Primary Education (UPE) declaration of 1990 and the UN declaration on equalization of opportunities for people with disabilities, to the Salamanca Statement of Inclusion (UNESCO, 1994) and the Dakar 'Education For All' (EFA) declaration (UNESCO, 2000), the ever growing international consensus on the rights of those who have historically been marginalised by the mainstream society was obvious, to which the Rwandan policies cannot afford to turn a deaf ear. However, the understanding of this global consensus has been subjected to different interpretations by different implementers globally, in their varying historical or social backgrounds. Following his experiences in UNESCO and as a disabled person in Tanzania, Joseph Kisanji (1995) once questioned like Stone (1999), how disabled people can have equal

opportunity in the face of continued imbalances of trade and the ongoing rapid technological advances of the modern world.

Similarly, given the Rwandan historical context, this study also questions the orientetion for inclusion of the disabled people. As acknowledged in the previous discussions (See chapter 4 section 4.1), the social image of the previous Rwandan communities sounds grossly glamorised by earlier analysts like Kagame (1954) and Nothomb (1965), given what transpired in the post independence periods. With due respect to their view points however; this study deliberately borrows Niyibizi's (2006) historical analysis half a century latter, in his New Times' bi-weekly column, '*Echoes of Time'*:

> *"The Rwandan genocide has roots in the deliberate colonial misinterpretation of Rwandan history which got unfortunately embraced by their Rwandan local stooges … A French historian, Luis de Langer, is said to have wondered how Rwandans of the 1930's felt they belonged to the same country, for they loved it manifestly and took it to be one, and the foundation of patriotism was their one language. There was no region or sector for Hutus, Tutsis or Twas. They intertwined and intermingled across valleys and hills. … In fact, before the advent of whites in Rwanda, Rwandans had unity based on the same monarchy, one language, one culture, similar way of worship and emphasized tranquillity and good neighbourliness. They complemented one another in their daily lives. Even the king needed priests "abapfumu" to perform some rites for him and holders of esoteric code (abiru) to advise him. Umupfumu (priest) for the king would be selected on merit... Colonialists found Rwanda a nation-state that had been growing and developing across centuries… It required them extra machinations. Apart from leadership wrangles that could crop up within the institution of the monarchy, like anywhere in any society in the process of transformation, no other conflict was feasible among Rwandans, leave alone genocide. The Genocide philosophy is not Rwandan, not African* (The New Times of Friday, 07, April, 2006).

It looks like most of the post-genocide analysts of the Rwandan social situation associates the violent differences between the Rwandans with their unfortunate historical past, pointing an accusing finger to the colonial legacy as a foreign interference (Bazivamo, 2002; Niyibizi, 2006). The study notes that whereas Kagame's (1954) pre-conflict analysis of the Rwandan society, had considered its colourful ethnic diversity, tracing the historical background of the people to different parts of Africa and even the Middle East, he was clearly indifferent to the looming divisions that his work might have implication with only a decade later on. It came as no surprise thus that, only 3 years after independence of the country and five years after the first ethnic–based violence that ended into bloody exclusion of thousands of Tutsi ethic groups, that Nothomb's (1965) work (with Kagame's preface), '*Humanisme Africain'*, readdresses the Rwandan society on the theme of *'Ubumwe'* or unity. He attempts to retrace the rich unifying factors that exist within the Rwandan culture, as if to reconcile a people who are already deeply divided, because the ethnic division had already taken a political turn and was picking strength with time, to the extent that the first waves of ethnic violence were

condoned and celebrated nationally, and not necessarily condemned nor mourned publicly. In fact, Munyatwari (1988: 68), in his work 'Education for development' two decades later, recognises the already established ethnic divisions within the national policies, and asserts that 'the ethnic violence had always erupted since independence, each time there was a slight crisis in country' (p. 69). Accordingly, the 1994 genocide was actually the expression of the ethnic division that had reached its mature stage. This study notes however that Munyatwari's (1988: 41) ideas that contributed substantially to an education reform program that addressed rural development (See chapter 3 section 3.4 for its inputs to development), was strongly opposed by the post-genocide sentiments for its background in regional and ethnic divisionism. This study notes too that the more recent language (Bazivamo, 2002; Niyibizi, 2006) about the Rwandan social division is actually similar to that used by Nothomb (1965) in reaction to the post-independence conflicts. It is relatively reconciliatory, and suggests rediscovery of the lost unifying factors that the society had earlier been endowed with.

It becomes evident thus, that the scary experiences the ethnic-based turbulences have marked the Rwandan society with, have also claimed the people's attention and have submerged the lesser conspicuous ones such as the social discriminations against the disabled. In other words, the Rwandan Hutu and Tutsi ethnic issues that have dominated the country's post-independece periods with violent civil wars based on ethnic discriminations seem to have claimed more attention than differences founded on race, religion, disability or others that are less historically marked. Whittaker and Kenworthy (1995) reiterate the same views about the western societies vis-à-vis disabled children in schools. In *'The Struggle for Inclusive Education – A Struggle against educational apartheid'*, they argue that the western societies have also been strongly influenced by their turbulent past racial differences, and these have claimed more attention for a long time than the disability issues. Highlighting this further, they report a head teacher's complaints against his society as he struggled with inclusion in his school:

> *"Change the label - say black instead of disabled and see if anybody would tolerate that kind of prejudice as it is against a disabled person"* (Jim Hansen, Head teacher in Canada, 1995, p. 1).

Any post-genocide Rwandan would certainly hastily translate this as *'Change the label - say Hutu or Tutsi instead of disabled and see…'.* Any one in the Rwandan communities would not fail to learn how openly Rwandan daily expressions are less considerate of racial differences than ethnic ones. Labels like 'Muzungu' used interchangeably for a white or rich person, or '***Ik***imuga' meaning a disabled person ('***ik***' prefix in many Bantu languages denotes an object rather than a person), are openly used with indifference of their abusive messages to different people. On the other hand, ethnic labels (Hutu, Tutsi or Twa) do not necessarily

feature in the same way because of the bitter historical message these might exhume to all Rwandans, and therefore the fear of the possible reprisals.

Disability in Rwanda seems to be more of a socio-cultural phenomenon rather than a history-linked phenomenon, presenting few dimensions that are easily interpreted or measurable against conventional dimensions of disability-related issues such as inclusion. The study is thus prompted to share Charlton's (2000: 27) and Barton's (2001: 5) theory that 'the perception about disability is also a development that is strongly associated with individual as well as social consciousnesses'. Drawing from the theory, it is understood that the disability issues on inclusion are not yet eminently discussed and do not receive policy priorities, because the consciousness of these within the Rwandan society are not as strongly marked in history as ethnic issues. While discussing about evolution in disability movements and the politics of the struggle for change, Barton (2001) puts a finger to a number of socio-political dimensions:

> *"…in relation to the disability movements there are 3 further criteria against which the movement should be evaluated:…the extent of the consciousness raising and empowerment among disabled people, the extent to which disability issues are raised internationally and the promotion of disability as a human and civil rights issue…"* (p. 5).

According to the assertion thus, the consciousness about disabilities has to develop through social and political support. Conversely, it is apparent that Rwanda's history has contributed to a consciousness deficit among its people including the disabled people, and the emerging situations raises two key issues: 1. The demand for consciousness about disability issues as an emergent political input into the national developments programs; 2. Helping the Rwandan society to listen to the growing voices of the disabled people movements that are globally and actively pressing for equal participation. In other words, the presence of this gap appears to explain the level at which disability issues are addressed in Rwanda. It explains among other things, why the local perceptions and beliefs about disabilities remain negative within the Rwandan communities, and why all the services for the disabled have always been and still are associated with charity (as explained in chapter 7 and 8). The Rwandan situation confirms Barnes & Mercer (2001: 14) assertion that until recently, 'charitable organisations represented disabled' people's interest in many countries. They also contend that historically, the decision makers in organisations for disabled people were salaried professionals, who put forward their own expert views about the needs of the their client group, and this overtly paternalistic approach serves only to undermine disabled people's effort to empower themselves. Evidently, this situation has historically dominated Rwandan disabled people's services and still prevails today. Decidedly, the road towards inclusion of the disabled young Rwandans has not been fortunate in its evolution towards positive consciousness, and change demands

that both fate and relevant developments be on their side. Joshua Malinga's rise (Charlton, 2000) from his Zimbabwean village to active global participation, with which he was able to initiate an effective change in his society, is apparently typical of such expectations for Rwandan disabled:

> *"...Son of a Zimbabwean polygamous village chief, victim of immunisable disease (polio), and was not allowed to go to school like his brothers and sister. Was expected to remain at home to scare animals at home and run errands. By a stroke of luck through his elder brother, he was admitted into a disabled people's centre to train in leather craft reading and math. By another stroke of luck he was admitted in a mainstream school where his performance was excellent and letter graduated as an accountant and served in various positions in Jauros Jiri projects…He was a delegate at the Rehabilitation International in 1981 in Winnipeg in which he was part of the 200 disabled who formed the Disabled People's International (DPI) of which he has held various responsibilities and the chairperson up to 1994. Founder member of National Council for Welfare of the Disabled (NCWD), which later became the National Council of Disabled Persons of Zimbabwe (NCDPZ). It was then that he recognized that disability was about human rights, about social changes about organizing ourselves …"* (p. 11-16).

Joshua's case seems to trace a path for inclusive education initiative within the consciousness of both the disabled and the general society, as something that can only be achieved if the disabled people are also politically involved. While reiterating that towing the political line is inevitable for the disabled people's movements, Barton (2001: 4-5) also underlines consciousness development. He argues that *politics* is an activity, a mean of creating a space in which the fundamental questions such as, *who are we? What should we get? How shall we live? What should be public and private?* and the rules by which societies should be governed are seriously explored. He goes on to urge that disabled people should not only be involved in the struggle over attitudes, but also over the realization of citizenship, social justice, equity and protection. Therefore, among individuals and groups who are experiencing institutionalised inequalities and discriminations, addressing some forms of oppression by endeavouring to identify, understand and challenge the disabling barriers, reinforce the political nature of these engagements, which are still missing in the Rwandan contexts.

The study's argument thus is that, though the many failures to recognise inclusion of disabled people in Rwanda had been made to appear as historical mistakes to be blamed on external influences (Bazivamo, 2002; Niyibizi, 2006), they can as well be readdressed as issues to be handled internally beginning with the consciousness within the society. In this respect, the Rwandans learn that with the emergence of the disabled representative in the national parliament (Republic of Rwanda, 2003b), the development of inclusive initiative is possibly taking its roots slowly. It is equally learnt from Barton (2001: 5) that for the initiation to begin, there should be enough *positive images of disabled people,* and the need to *challenge their stereotyped images* that have been created by non-disabled people through the media

and especially charity advertising; and more importantly, awareness of the rights and equality of access to opportunities, ought to be raised.

The conclusion being shared thus is that the challenges involved in creating a society where all citizens experience full participation is an urgent and fundamental task that needs to be addressed within the social developments agenda in Rwanda. More concretely in Barton's (2001: 8) words, 'serious engagement with the complexity of such challenges require recognition of the necessity to understand the interrelationship between *history, biography*, *context* and *structural* factors, need to be heeded'. It is in this respect that the challenges faced at any levels, as well as the inequalities and inadequacies that are responsible for the conditions of differences are addressed within the development goals that include inclusive education strategies.

10.2 Evolution of inclusion in societies

In its annual report of 2004, the EENET Newsletter (Lewis, 2004: 4) boasts of 1423 submissions of articles representing over 125 countries world wide. It also shares experiences drawn from all over the world since 1997, contending that inclusive education practice is possible in as many circumstances as there are communities and societies. The experiences and achievements reported from Eastern Asia and Africa appear quite phenomenal. Accordingly, the Iranian affirmation by Ali Joibari apparent in EENET (2003: 1) that '*Inclusion is not a privilege it is the natural consequence of a humane society'*, or the Pakistanis experience portraying the teacher in a determinant role deciding the students' fate through education (EENET, 2005), all leave the study with the view that each society has the freedom to offer its own perspective. However, adaptability in each case remains the key to appropriate inclusive practice and progress. Dyson's (2004: 615) outlook on inclusion seems to offers a relevant explanation of social differences:

> "…*it seems to me mistaken to look for a single set of policies or practices which will somehow 'deliver' inclusive education. Such policies and practices have to be developed in different contexts to address whatever threats to equity, and arise in different systems, at different times and for different groups of children* … (p. 615).

Citing Reynolds and Ainscow (1994), Ainscow (2005) contends that educators helping children who were excluded from educational plans had always been a feature in many countries, and it is the provisions by national governments and local authorities that are fairly recent. He argues therefore, that the current international emphasis on inclusive education is, but a farther step along this historical road, and the aim is to transform the mainstream practice in ways that will increase the capacity for responding to all learners (Ainscow, 1999).

Tracing the historical background of deaf education in Europe for example, the weekly 'See Hear' BBC world service television program of 12 February 2006, confirmed that current teaching strategies such as total communication and sign languages have always been in use in many societies before the 1880 Verona international meeting of the hearing professionals. It was in this meeting that they overwhelmingly agreed (with 9/10 votes) for a shift to speech language as a teaching language in European schools, leaving the sign language to re-emerge two centuries later as a result of increased pressure by the deaf culture movements.

Those who trace inclusion through history however, are supposedly not ignorant of the untold stories of exclusion and oppression that disabled people have been subjected to since the beginning of civilization (Charlton, 2000), nor do they fail to recognize the exclusion and limitations the majority of the disabled in underprivileged societies still face in accessing basic rights and opportunities (Helander, 1997; Hust, 1999; Stone, 1999). A personal comment from a colleague appears to provide the international image of inclusion today: '*Inclusion makes me think of water: it is so common, so ordinary, so crucial to life, and it is everywhere. Yet for many millions of children, it is contaminated or lacking, causing illness and death'*. In other words, much as inclusive characteristics have always existed and is still traced in every society, to many children worldwide including Rwanda, it is still unknown, misinterpreted or inaccessible.

10.3 The emerging concept of inclusion for the Rwandans society

The above background observations prompt a revisit of the concept of *'inclusion'* previously expressed in chapter 2 section 2.1 of this study, and its context within the Rwandan society today. In fact, the findings in Rwandan schools and communities explained in chapter 7-9 of this study raise similar concerns, demanding that the standard definition be readdressed to fit the local situations. The standard definition provided by the Salamanca statement of inclusion (UNESCO, 1994) for example, has been considered by a number of discussants as irrelevant to various economical, social and cultural contexts in many countries (Helander, 1993; Kisanji, 1993; Stone, 2001). The argument being that the concept needs to be tailored to the local contexts and situations.

In chapter 2 of this study, it was argued that inclusion finds inadequate interpretation within the Rwandan cultural context. It was argued that to an average Rwandan teacher, it would be more appropriate to talk about '*uburezi budaheza*' or *'non-exclusionary education'* which is the opposite of the conventional concept of inclusive education. It thus came as no surprise to the researcher during the 2005 ISEC conference in Glasgow, that a few other presenters echoed similar argument in reference to their societies (Asikainen & Coutts, 2005; Karangwa,

Ghesquiére & Devlieger, 2005). In a personal correspondence, Professor Gilbert MacKay, who had been the discussant to both the researcher and a Finnish presenter, he commented that, 'the Finnish presenter was using a word that was clearly derived from the Indo-European linguistic roots to denote "*inclusion*", and when asked for a proper Finnish word, she had none!' He adds:

> *"… Like you, she may have to use 'the opposite of exclusion' ... I think that 'inclusion' has lost nearly all of its meaning in education because it has degenerated to the level of a slogan that means different things to different people. It has become a "feel-good" concept that should not be questioned, and so it is protected from scrutiny. The Salamanca Statement almost says that inclusion for all pupils means mainstream education for all pupils, but it is definitely not as explicit as that. This lack of explicitness, I feel, is at the heart of the problem. Salamanca says that the operationalisation of inclusion will be different in countries that do not have a developed system of special education from the way it is operationalised in countries that do have such a system. … I agree completely with the Salamanca suggestion that countries which have not developed a system of separate special schools (or indeed, have not developed a mass education system) should not develop a system of special schools. That was one of the lessons I took from your paper at ISEC, because it helps to show how important it is to understand and respect context when planning the development of educational provisions* (Professor MacKay's correspondence of 29th March 2006).

It has to be admitted thus, that the researcher's own stance takes the same line of argument, with the argument that issues such as culture, attitudes and other local values or contexts have to be taken into consideration for the appropriate interpretation of the concept to any given society (Ingstad, 1997; Kisanji, 1993; Stone, 1999).

In the case of the Sub-Saharan African societies including Rwanda, the controversy founded on cultural and economic values is often raised. The contentious arguments include those raised with regards to over 45 million disabled children in rural areas in poor countries who do not go to school (Helander, 1993; Stone, 1999). Yet there are still evidences proving that these children live in a state of '*natural integration'*, benefiting from care and support of close family members and at the same time, ensured of a chance to be part of a household and local community (Ingstad, 1997: 8). In education, they purportedly benefit from the same cultural attitudes coined by Miles in Stone (1999: 77) as '*Casual integration'* (See also Section 9.5 of this study). They jointly (Ingstad & Miles) confirm that the situation of many disabled people in developing countries is in some ways comparable to what was last experienced in Europe during the early part of the previous century. Accordingly, the consciousness about the problems and needs of disabled people in the industrialised part of the world have had a long way to go; from realising estrangement from the family, to doing something about it through policies of integration and decentralisation. They share the Salamanca statement's (UNESCO, 1994) view also apparent in Sue Stubbs' (2002) experiences in underprivileged societies, by observing that in countries of the south where

there has been relatively little investment in segregated educational provision for the disabled children, inclusive education programmes tend to take a natural course, in comparison to wealthier nations that have created greater obstacles to inclusion through relatively vast investments over a long period. Miles (in Stone, 1999: 77) points out that in some areas, it would even never occur to teachers working in remote rural areas that a disabled child should be educated anywhere else other than the local school, maintaining that this kind of integration is clearly widespread and deserves to be recognised and documented. The same situation was abundantly evident in the Rwandan schools surveyed as reported in chapter 7 and 9 of this study.

Basing his views on the levels and influences of cultural perceptions of disabilities, as well as the situations of the disabled children in the Rwandan communities as revealed by the findings in chapter 7 of this study, the researcher argues that the interpretation of inclusion for Rwanda needs to take two key issues into consideration: the community members' understanding of disability and other related issues; and the different reactions (both positive and negative) that the community members express when confronting issues related to disability. For Ingstad's (1997: 9), the developing countries have, at least in theory, a chance to move almost directly from a state of *'natural integration'* into a more active integration policy supportive of family solidarity and the local potentials. This study adds that the local means by which the disabled children receive support or are marginalised provide a key to this consideration. In other words, the move from this state is not necessarily a smooth one, because it will depend heavily on how those who initiate or implement it understand the local context and therefore are able to plan accordingly. It is implied that the course inevitably involves understanding the concept of integration or inclusion from its operational context.

The emerging concern of this study thus is that, given the conceptual emptiness with which the term *'inclusion'* is presented to an average Rwandan practitioner (Karangwa et al., 2005), and the many socio-economic pressures felt both in schools and communities, an interpretation of the term into a more meaningful one, that is relevant to the demands of the disabled Rwandans would possibly be a more appropriate consideration. As already highlighted previously, approaching the concept from the perspective of *'reducing exclusion'* or '*increasing access'* rather than the rights-related services appears to fit appropriately the Rwandan situation. By using this angle to define inclusion, it would not only underpin the local language, but it would also be addressing the already existing national programs and policies by enriching them with the key elements of inclusion.

Hence, in total agreement with Prof. MacKay's argument above that the conventional terminology of *'inclusion'* should be questioned, the researcher's response had ended with the remarks that:

> *"…by questioning the meaning of 'inclusion' to our societies, we possibly address its depth within our global diversity, which in a way, also questions the effectiveness of inclusion internationally…beyond the medical and social models, I perceive the emergence of the cultural model, which takes into consideration representations of different cultural values and norms, social and economic contexts, and thus, deconstructing and reconstructing the concepts of disability and inclusion to fit it within the world diversity …"* (Personal correspondence addressed to Prof. MacKay of 30th March 2006).

It is thus argued that, the inclusion concept emerges from the current global trends that shift the address of disabilities from the medical perspective (and from the moral and welfare perspectives still present in Sub Saharan Africa) to more social perspectives. This trend is also associated with the growing activism that demands to shift the focus from *'impairment'* or from disabled individuals, to *'disability'* or to the society and environment that are disabling (Charlton, 2000; Oliver, 1996: 41; Thomas, 1999). Needless thus to say that the introduction of internationally recognised reform concepts such as *'inclusion',* in a culture that has a different interpretation of it, raises many controversies, involving the risks of loosing or diverting its focus from the concept. In fact, the reform projects usually risk a natural death at the hand of underdeveloped reform cultures and weak managerial skills, which are known to be inherent in such systems (Davies, 1997; Harber, 1997). Conversely, addressing the inclusion concept from the angle of *'attempting to eliminate exclusion',* is also a way of adapting the concept to the language that the community members use and understand best, with which they would be able to interpret correctly the national educational agenda, needs and programs that may involve some inclusive perspectives.

10.4 The grassroots community-based inclusion: Some considerations

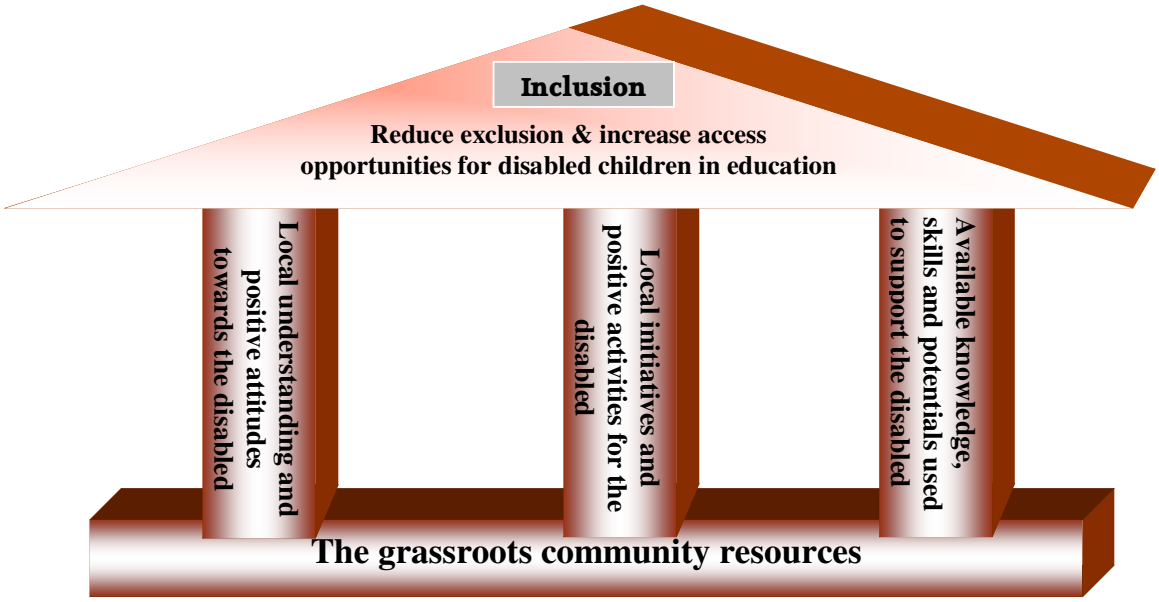
10.4.1 Potential supports for the grassroots community-based inclusion

It was previously raised in this study that the concept of community has no specific definitions, nor is it necessarily represented by any specified group or demarcations. It was evident in the study findings (See chapter 8) that the Rwandan Grassroots community addresses a social representation of inhabitants, who are engaged interactively in activities that naturally involve disabled young people. In reference to families in their homes and villages, their interconnections or interactions as members of the same community was made apparent. In a sense, the study settles with Cohen's (1985: 12) idea of the community as a '*place, interest* or *communion'* according to members on either side of it. Cohen's argument is that not all boundaries are so obvious, because 'they may be thought of, rather, as existing in the minds of the beholders'. This study is particularly associated with his interest in the link

between the community and education that he termed as '*the cultivation of social networks and the associated concern with reciprocity, trust and tolerance*'. His ideas concur with Dewey's (1929) argument that education aims at working so that all may share in a common life, and Buber's (1947) view that education enables people to meet each other as truly humans of the same social setting.

In this respect, this study perceives the natural interaction within the grassroots communities as a valuable potential on which inclusive education can be built. Therefore, in relation to Nagar's (1998: 2) view of the three pillared support while referring to community-based rehabilitation activities, the study argues that despite the many inherent setbacks in the Rwandan communities, three strongly supportive resources appear to survive, and these stand out as the strongest channels through which inclusive activities can be developed (See Fig 19. below):

Figure 19. The three pillared support for the grassroots community-based inclusion



The community is thus perceived as a resourceful ground on which three key dimensions supporting inclusion are expected to emerge (See also in section 9.2 in this study). The first pillar represents the few members of the local community with positive understanding of disability-related issues and the positive attitudes towards the disabled children. It is by enlisting and empowering their potentials that positive results are expected. The second pillar represents the locally available initiatives and the positive activities already in active support of the disabled children. This refers particularly to the few teachers and parents highlighted in the findings, without whose initiatives some of the disabled children would have been excluded from school or even loose their lives. The third pillar represents individuals and

organisations within or outside the local community who have the knowledge, skills or potentials to support the disabled children. This does not only refer to the many religious-based organizations involved in CBR and education services as highlighted in the previous chapters, but also isolated potentials such as those apparent in the children who interact with a deaf peer in a school compound and are able to teach him some reading and writing skills (See extract in section 5.2.3.1). The base represents the community as an embodiment of the many socio-cultural and economic activities from which these pillars stem and is supported. The roof represents the achievements expected in terms of equal opportunities and reduced exclusion from education or other services, as a result of the three pillared community-based support. It is in a way, a concept of 'community-based inclusion'.

The concept of course does not overlook the many setbacks observed within the communities, which might impede the inclusion developments. These include problems stemming from negative attitudes such as social stigmatization, reduced opportunities in education and other entitled services, that need to be resolved if inclusive education of disabled children is to be fully supported by the community. These concerns seem to suggest strategies that are directed towards the whole community, with a set of programs that are geared towards improving attitudes, awareness and skills, social and physical infrastructure or means (See Fougeyrollas' model in figure 2 below). It evokes the empowerment of the community with abilities to support inclusive activities.

The argument revisits Geert Vanneste's (1997: 37) reiteration following his long experiences in Tanzania and other African communities including Rwanda that, despite the enormous limitations Africans are faced with, successful support for the children with disabilities is often mobilised through cultural collaboration of close family members. The same argument is equally voiced by Kisanji's (1993) experiences in the same culture, as well as Miles in Stone (1999) and Tubbs (2002), who jointly agree that the African communities have important potentials yet to be tapped for inclusion developments. They jointly confirm that the shortage of economic resources is not necessarily an impediment. However, this study takes note of the relatively balanced Asian experiences shared by Thomas & Thomas (2000), especially for its warning about the orientation of the current global trends. They contend that:

> *"…the large projects with extensive service delivery systems which lack client-centred planning, have little to do with community participation as active participants… involved in shaping their own future. …The attitude of continuous dependency in many developing countries is viewed as a hangover of the decades of colonial rule, followed by a period of socialistic ideology, in which the state was viewed as the provider of all services. Many believe that in today's changing economic and political scenario, the responsibilities of organising development programmes may shift from the governments to the communities… When one deals*

> *with developing countries, one has to keep in mind that they are unfamiliar with the strategies common to the western world ... Hence, many projects which are planned according to the western attitudes, fail when they are implemented in these countries …"* (p. 3).

The suggestion being emphasised here is that building inclusion perspectives does not necessarily have to depart from the community potentials alone, but are also shaped through the prevailing conditions (economic, social, cultural or political) operating on both the local and global scale. Thomas & Thomas (2000) go on to warn that in certain instances, community participation in developing countries might entail some disadvantages, and suggest that if the community members have to learn to take responsibilities of their disabled members, then there should be provisions for an evolutional trend.

As already demonstrated by the findings in the previous chapters (See chapter 7 & 8), the Rwandan situation can be equalled to that of many developing countries observed by Thomas & Thomas (2000). The disabled children were generally found within their families, where they received all the basic support, and some in schools where the support was minimal. In short, the influences of the local perceptions and beliefs in Rwandan communities are such that the education and related services for disabled children still receive little attention. There are even no evidences that the community was actively engaged in, or is envisaging any planning for their disabled children' equal access to the neighbouring schools. According to Thomas & Thomas (2000), the concept of community participation is not simple to implement in developing countries, because the communities are traditionally not ready to take on this responsibility, though on the contrary, experiences in Sub-Saharan Africa (Ingstad, 1997; Stubbs, 2002; Vanneste, 1997) indicate that well planned community-based strategies ought to enhance community participation in programme planning.

However, this study foresees a way forward towards equal access to education or other opportunities for disabled Rwandan children, in their families and other key community members' active roles and contributions. It means working towards overcoming barriers within their communities, or rather, adjusting both the social and physical environments in a way that the disabled young people are accorded equal opportunities as their peers of the same neighbourhood.

10.4.2 Working towards a non-exclusionary environment

The study results in the previous chapters (Chapter 7-9) indicated with overwhelming evidences that the Rwandan social and physical landscape is still far from presenting a level ground on which all children are able to access basic services such as education, health care and others at equal basis. A big number of disabled children are still marginalised in schools,

simply because the educators, the curriculum and the general school landscape are unprepared to respond to their needs. The dehumanising labels used to describe people with disabilities are by and large part of the dominant local culture (See table 6 in section 7.1.2), and access to health, welfare, economic and human right services are still limited for Rwandans in general and more so for the disabled people in particular. All these are part of a social environment on which the non-disabled culture dominate and is clearly less concerned with the disabled counterparts. In their advocacy for change and equality on such social landscapes, Barton (2001: 3) and Charlton (2000, 9) describe the situation of the Rwandan disabled in what they underpinned as the '*dimensions of disability oppressions'*. Their views are associated with low levels of consciousness with which the disabled are pushed into a position of powerlessness, self-pity and helplessness by the powerful culture dominated by the non-disabled people, a dimension they term as 'a *cultural imperialism'*. Charlton (2000) agitating for consciousness as a means of overcoming culture-linked oppression apparent in many communities world wide, he argues that:

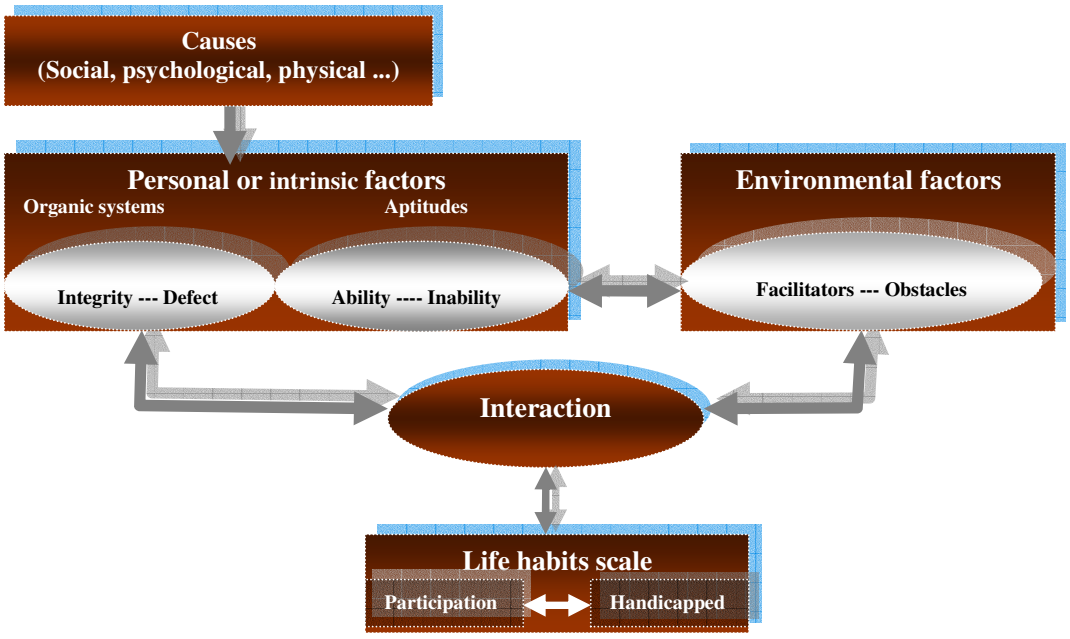
> *"…people are some times described as having consciousness. This is not so … it is just for some. From childhood, people are constantly bombarded with the values of the dominant culture. These values reflect the naturalness of superiority and inferiority, dominance and subordination ... (p. 29)… the dehumanisation of people with disabilities through language (as one obvious example of the level of consciousness) has a profound influence on consciousness. They, like other oppressed people, are constantly told by the dominant culture what they cannot do and what their place is in society. The fact that oppressed people accept their place is not hard to comprehend when we consider all the ideological powers at work …"* (p. 35).

With the assertion above thus, the study also shares the view that disability is not necessarily a personal attribute, but is actually a result of social barriers unconsciously raised by the society members (Charlton, 2000; Fougeyrollas, 2002; Helander, 1993; Henderson, 1998). Such unconsciousness among the Rwandans could equally be associated with, not only the evident differences between the disabled and able-bodied, but also other social differences that include ethnic xenophobia and subsequent violence.

In light of the argument thus, the study is prompted to consider the relevance of Fougeyrollas' (2002) model. It stresses that disability emerges as a situational outcome of the interaction between the functional differences of individuals, with specific physical and social environment. It is within those interactions in the same environment that obstacles or exclusionary barriers emerge, separating the minority disabled and the dominant non-disabled members. In a society like that of Rwanda, where the dominant cultural consciousness is not yet prepared enough to handle the differences, it is almost expected that any inclusive initiative is met with extreme challenges. The study adds that, the challenges are likely to be even more exaggerated if the proposed inclusion programs are not considerate enough of the

local context. However, in its considerations of a way forward for developing an inclusive community, in which disabled children would find less barrier to educational opportunities, the study finds Fougeyrollas' model (2002, 11) also relevant. As already explained in chapter 4, section 4.1.3 of this study, the experiences of the practice at the University of Leuven indicate that it proposes a flexible and widely encompassing perspective to inclusive developments, focussing on both the individual and the wider community at the same time (See Fig. 20 below). It entails the dimension of peer interactions, personal, social and environmental factors.

Fig. 20. Fougeyrollas's model



The study notes with interest that in its broad-based perspectives, Fougeyrollas' model appears to be less concerned with neither the medical nor the social perspectives, or rather, it seems to suggest a combination of both as the most appropriate means of interpreting the environment where the disabled people interact with non-disabled. The model demonstrates that what appears as a handicap or disability can as well be perceived within what he termed as '*life habits scale'*, or individuals' abilities ranging from full social participation to the handicapped level. He contends that this scale results from the *interaction* between '*personal factors',* that are either functional or defected, and the '*environmental factors'* that are either facilitators or obstacles to the interaction. He considers the root *cause* as the different factors that deform or form the physical, psychological, social and organic nature of an individual.

In view of the background thus, Fougeyrollas (2002: 7) suggests a model of intervention that focuses at three key points of disability: the root causes that demand prevention measures; the individual and the impaired functions that needs diagnostic treatment, adaptation and rehabilitation; and the general environment that requires the suppression of all the obstacles that limit social and functional interactions of disabled individuals with the non-disabled. Through this intervention thus, all spheres of the individual's life and environment are expected to be tackled, including among others, the adjustment and provisions of accessibility to services such as education, health, work, residences, transport, leisure, social and economic security etc. In a way it refers to the broad environment in which the disabled person is expected to live in total independence. It does not therefore refer to Independent Living (IL) strategies that place emphasis squarely on disabled consumers, but is rather associated with CBR programs in developing countries, where the entire community is the target, fitting in partnership with other models of community development (Lysack, 1994). In other words, the study stresses again the idea that overcoming barriers to inclusion within the Rwandan communities is widely encompassing, and should by no means be perceived as a straightforward process. In other words, the way forward may as well entail community-based approaches, in which key activities such as conscious raising and empowerment of community members ought to feature prominently.

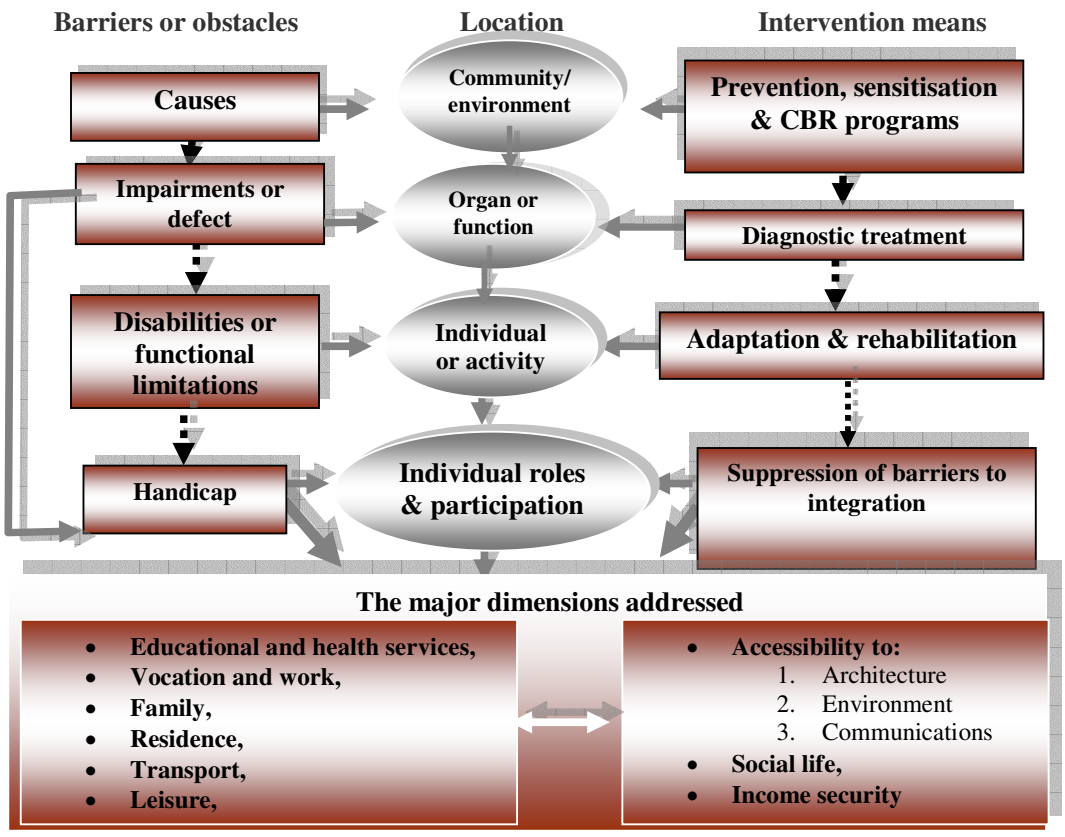
10.4.3 Overcoming community-based barriers to inclusion

Thus, given the Rwandan social and economic context as manifested in the previous results, this study considers that the above model also provides a way forward to overcoming barriers to inclusive education of children with disabilities. It proposes a widely encompassing strategy that addresses disability within all vulnerable or marginalised groups. It suggests approaches that consider the individuals and the community, using interventional measures such as sensitisation and instructional approaches that target all the social barriers, along side other measures that address limitations of the individual or the body dysfunctions.

As explained in the previous model (Fig. 20), Fougeyrollas (2002) goes on to explain that appropriate interventions should be able to address all obstacles that the disabled people are confronted with by designing barrier-focused measures, both within the individual and in the environment. He suggests measures which addresses barriers caused by discriminatory attitudes and beliefs in the society for example, or the interventions targeting families and the wide community. With his model, he proposes differently phased intervention measures to overcome obstacles emanating from impairment, disability or handicaps. They include appropriately designed tools, approaches and expertise, tailored to the situation and the problems as they arise (See Fig. 21 below). The interventions thus may range from medical

prescriptions addressing a clinically diagnosed dysfunction, to social support and environment adjustments, all aimed at adapting both the body functions of the disabled individual and the environment it interacts with. The aim of the intervention proposed thus, is to promote accessibility to the environment, provide opportunities of participation or integration of the disabled individual within the general society, such as family residences, in educational settings, working place or leisure. Figure 21 below, which is also related to Fougeyrollas' (2002: 7) model of intervention above, shows a framework within which some of the key barriers are addressed.

Figure 21. Intervention measures adapted from Fougeyrollas' model



The study associates this model with Helander's (1993: 8) proposal of community–based intervention, concerning rehabilitation of disabled children in developing countries. In his work, '*Prejudice and Dignity*', he suggests strategies that focus on the quality of life of the disabled children by improving service delivery, providing more equitable opportunities and promoting and protecting their human rights. Since the goal is to bring about a change by developing an enabling system capable of providing accessibility to disabled people. It seeks the integration of all relevant sectors, including educational, health, legislative, social and

vocational aspects; aiming at an intervention mechanism that fully empowers the disabled persons.

In the same way, this study argues that access to equal opportunities in education and other services for the disabled children can only be gained if an intervention mechanism that involves removal of the many limitations that impede their active participation in community life is part of it (Fougeyrollas, 2002; Helander, 1993). At personal levels, a network of professional support and provisions that include therapeutic, rehabilitation, educational and assistive mechanisms are particularly crucial. At the community levels, an integrated community development programme promoting the use of available local resources, experiences and skills, as well as the development of awareness through adequate training and awareness campaign are perceived as particularly relevant. As already seen in the previous chapters, there are evidences that close family and community members provide basic services to disabled children (chapter 7, tables 5 & 13). Thus, in many community-based intervention programs, the closest families are expected to be the key partners in matters such as training, planning and evaluation or other key decisions regarding service and opportunities for their disabled children.

At the national level, the government role ought to be restricted to planning, co-ordination and evaluation of programs. Centrally planned referral network coordinating specialised interventions of services that the community cannot provide, is expected to be developed with an outreach network targeting the grassroots communities. The network can as well draw on the resources and the support available in the governmental and the non-governmental sectors, including organisations of the disabled people. Essentially, it is suggested that overcoming the barriers to inclusion takes a twofold plan: empowering the disabled people and their families; and availing enabling tools or mechanisms within the neighbourhoods. Both of these are expected to play an instrumental role in fostering increased participation of the disabled people in general and education of the disabled children in particular.

10.5 Challenges and opportunities in schools for all learners

10.5.1 Challenges in education for all learners

In the previous chapters, it was highlighted by the findings that the kind of class sizes and learning environments in Rwandan schools, the kind of resources and skills that were at the teachers' disposal, were actually very minimal. The average class size in schools surveyed was over 56 pupils for example, and the physical and material equipment such as desks, toilets, water supply and educational materials were all in dire conditions or too inadequate. Though more recent government reports show that these like qualified teachers' supplies are

steadily on the increase (See projections in appendix E), they fail to explain the falling retention rates in schools and the rising school drop-out rates in the country (See causes of school drop-out in appendix B). Apparently, the phenomena are not only linked with the educational needs of the children, but are also sensitive to both rural-urban as well as gender dichotomy (Republic of Rwanda, 2003a), as indicated by the national Educational For Plan of 2003:

> *"All statistics concerning retention and quality have been worsening in the past three years, but during 2001 have begun to show signs of improvement: the repetition rate has fallen from 37.6% to 31.8%. However, the national dropout rate has worsened from 12.8% to 14.2% and at secondary the average is 6.4%. Only 31.6% of the Rwandan population has completed primary schooling (15.3% of poorest quintile and 52.9% of the richest)"* (Rwandan EFA Plan of Action 2003a, p. 19).

The simple and outright explanation to the high rate of school drop-out is the inability of the teachers and the general school systems to provide for those without opportunities of access, or rather, the absence of a safety net provisions for learners who are at the risk of dropping out of the system. Drawing from the field experiences in the schools surveyed during the study, it was also obvious that many children are often caught within a socio-economic order, in which their educational needs are not adequately addressed. Often, the situation is manifested by the poor school-based conditions or even the inadequately prepared and motivated educators. Kyriacou (1987) cited in Romano and Walhstram (2000) explains that the situation of some of the teachers in such circumstances is often associated with a set of emotional responses to the demands of the occupation which include *tension, frustration, anxiety and depression*. He goes ahead to point out the sources of the teacher's stress that are actually familiar to the researcher, following his experiences in the field: *poor public image, low salary* and *poor working conditions, students' indiscipline*, *classroom crowding, lack of support from the school administration and parents*, as well as *weak school leadership*. Donnelly (2000) explains this contradiction in teachers as:

> *"Teaching is an occupation in which reward matters, as do working conditions...in contrast... wishful thinking and contradictory, half-baked initiatives appear to be the order of the day…"* (p. 39).

It is against such a notion therefore, that, this study questions the outlet for the inclusive perspective within the Rwandan schools, which are often influenced by most of these fore mentioned disparaging challenges. The researcher recalls that 'given the many educational and individual needs many of the students were already presenting in the school he had headed, he had often considered it appropriate to give up the project of including the blind students, mainly because he was implementing a project that was not supported, was unknown to all the school stakeholders, and therefore, he was shouldering the strains and challenges of the inclusion inertia all alone (EENET, 2003: 4). The study concurs with the

idea that despite the fact that the UNESCO (1994) *Salamanca Statement* was ratified by over 300 participants, 92 governments and 25 international organizations since 10th June 1994, *'inclusion of all disadvantaged children'* in their neighbourhood schools (Art. 2) still remain a mere buzz word in many countries including Rwanda. In fact, though the Rwandan education sector policy (Republic of Rwanda, 1998: 11) had echoed the commitment since 1998, with statements such as '*mainstreaming all the disabled children in regular schools'* (p. 6), a few educators around the country including the researcher (EENET, 2003: 4), were still condemned to provide educational opportunities to disabled children with neither support nor recognition (See Fig. 17 for the controversy between government commitment and realities on the ground).

Kisanji's (1993) studies and personal experiences in African education, affirm that both *'inclusion or integration'* has been around the educational agenda of most of the African nations, but all special needs education policies and programmes either fail or are associated with difficulties. Harber and Davies (1997: 168) explain that African countries (like the rest of the developing world) are often identified with economic, social and political difficulties, which impose heavy burdens on their educational undertakings. It is equally argued that much of the educational policies remain on paper in the developing world (Bishop, 1986 & Hammad, 1999), or are largely misinterpreted or misdirected by their fragile governments as well as their weak, unmotivated implementers (Bishop, 1986; Harber & Davies 1997). Thus, this study reiterates its previous argument that access to education is not yet an equal right or priority provision for many young Rwandans, especially those with disabilities, and their inclusion still demands costly initiatives and innovations on the part of their educators and other related stakeholders.

10.5.2 Class room challenges

Many of the experiences observed in the field (Discussed in chapters 7-9) were not totally strange to the researcher. In fact, some were quite similar to what he had experienced in his practice in education. His many general school administration challenges also entailed classroom-based challenges that often emerged endlessly amid many others. The inclusive education of the blind children for example, was an addition to many fundamental challenges that as a head teacher he had to confront. These included, '*scarce educational resources, large classes, unmotivated teachers* and *diversity of educational needs in classes'*. As pointed out by some studies on schools in underprivileged communities, ineffective teaching and learning are often characteristic of the developing world (Bishop, 1998; Davies, 1999; Harber & Davies, 1997). Stressing the appalling standards in similar educational settings, Howell and Piggott (1992) sound a call for attention to the risk that many children face in such schools:

> *"Large classes are here to stay --- it is important to find effective as well as efficient ways of teaching --- the quality of students' learning experiences is increasingly at high risks…"* (p. 88).

Extremely large classes at all levels of learning contribute to the many problems hampering achievement for many children in Rwanda (See statistics in Appendix D, E & F), like in other developing countries (Republic of Rwanda, 1998; Simbotta, 1997). According to the findings in the field, the attainment of the learners with or without special educational needs is greatly affected by limited chances of interaction with the teacher, shortage of supporting and learning materials and inadequate or inappropriate curricula. These problems in Rwandan classrooms should however not be construed to imply only high pupil/teacher ratio problems per se, but the wide range of educational challenges that are implicit or explicit to the system, involving among others: *inadequate classrooms*; *unfairly distributed schools*, *staff and facilities*; *as well as the physical structures and educational materials that are unsuitable to the diversity of needs*, within the ill-fitting policies and unaware policy makers and implementers. Having carried out a study on the practice in Malawian schools where classrooms are large, Simbotta (1997: 85) shares his observation that:

- *teachers complete their lesson plans with difficulties,*
- *they require strenuous preparations,*
- *individual help is very limited,*
- *slow learners like those with special educational needs are left behind,*
- *marking pupils' work is time-consuming,*
- *assessment of pupils' progress is not easy,*
- *requires large amounts of teaching aids,*
- *encourages truancy.*

Similarly, the testimony in the Malawian experiences can as well pass as an explanation to the Rwandan situation and doubtlessly in many Sub-Saharan African classrooms. Though, this study in the Rwandan schools is unable to share any successful applications of most of them, the strategies suggested in the next sections have been observed and usefully implemented in schools with similar difficulties. They underline among other strategies, collaborative approaches of leaning in which large classes are split and educational and learning resources are redistributed effectively, creating an inclusive and a flexible learning environment that both the teachers and many learners are expected to find accommodating.

Chapter 11
Pedagogical considerations for inclusion pathways

We are aware that there are many strategies and techniques used for effective inclusive education, which may involve a wide spectrum of educational considerations in both the learning materials and environment, but this study has chosen to discuss some of the general classroom and school-based approaches that are adaptable to the prevailing situations in Rwanda. The next chapter considers pedagogical and administrative strategies, with highlights of specific experiences in circumstances similar to those in Rwanda.

11.1 Group teaching strategies in an inclusive class

It is indeed a great challenge for any teacher to effectively handle a class of more than 40 learners of mixed abilities and backgrounds, especially under stress due to poor and inadequate resources. However, teachers have been known to tackle such educational challenges with success, and some of the effective solutions involve breaking the large classes into manageable groups (Preece, 1999; Simbotta, 1997). This study admits that advices such as those sounded by Fitzgibbons (1981) ought to be heeded before undertaking such educational innovations. He warns that in making any educational decisions that so profoundly affect the destinies of children's educational needs, educators should not be guided by mere hunches. Rather, in order to have a better probability of functioning to the advantage of the children, educational decisions must be based upon knowledge and understanding of the advantages or what is necessary to maximise the learning.

In light of such ideas thus, the study's consideration of group strategies is associated with Simbotta's (1997) (citing Smith, 1990) description of group work as *'an approach based on pupils working together collaboratively, paying as much attention as possible to the learning activities*'. In other words, dividing learners into smaller groups does not always mean the application of the approach. Group work ought to involve learners' interactions as part of the learning process, while the role of the teacher is restricted to facilitation of the learning. In many class experiences like those in Rwandan schools, groups of mixed abilities (inter-group or trans-group) are often observed and are expected to generate the advantages of learning through interactions, in which learners with educational needs are not left behind. The idea is supported by Preece (1999) who views educational opportunities in small inclusive groups, and advocates strongly against the traditional attitudes while dealing with large social groups of mixed abilities. He affirms that:

> *"… Individuals have been manipulated to believe that different social groups have certain kinds of educational entitlements ... In community courses with smaller numbers, a minority group becomes the majority and inclusion takes on a different meaning …"* (p. 42).

Similarly, in their findings, Galton and Williamson (1994: 42) assert from a practical point of view that group learning can only be successful if they encourage fruitful interaction and are well planned. They suggest the following strategies:

> ***1.*** *Groups are likely to achieve more if they are encouraged to co-operate either by working towards a commonly shared outcome or by making an individual contribution towards a group goal,*
> ***2****. There is evidence that groups function best when they are of mixed ability, with relatively minimum support from the teacher. However, the teacher needs to monitor and encourage this independence,*
> ***3.*** *Children in groups perform differently according to the nature of tasks. The high level of interaction occurs when they are engaged in action tasks or practice activities,*
> **4.** *The problem solving tasks in groups with clear, testable outcomes tend to generate greater degree of collaboration than open-ended tasks,*
> ***5.*** *The individual pupils in groups gain confidence in their work and the quality and quantity of both critical and evaluative feedback between the teacher and learners is improved,*
> ***6.*** *The need to promote individual rewards within collaborative exercises is evident. It is possible if the group is regarded as a two-stage process: group collaboration and individual tasks.*

The idea here is the realisation of a good group in which effective learning takes place. Citing Burden et al. (1988), Biott and Easen (1994) describe the activities of a good group with the following characteristics: *organising, supporting, commenting, challenging, explaining*, *suggesting alternatives and finishing*. The view is supported by Galton et al. (1994) who categorise the likely successful groups as:

1. Seating groups with different tasks and different outcomes,
2. Working groups where each pupil has a different task or contribution to the group,
3. Co-operative groups with separate, but related tasks and joint outcomes,
4. Collaborative groups where each pupil has the same task and joint outcomes,

The good learning group therefore, is summarised in Hills' (1994) assertion as:

> *"… A good group and the individual are one and the same --- A good group realises the potential of an individual in order to enhance learning --- It encourages a warm friendly atmosphere that encourages all members to participate …*" (p. 6).

It goes without saying thus, that much as grouping strategies appear attractive and applicable in many educational circumstances, educators' pedagogical skills and caution is equally emphasized.

Grouping strategies in large and mixed classes

Teachers in conditions like those in Rwandan schools, who are confronted with problems of large classes of mixed abilities, ought to share Fitzgibbons' (1981) questions: How should it be taught? What should be taught? What should the outcome be? The underlying premise of the questions being: *the need for effectiveness.* Similarly, Mills and Cottell (1998: 22) citing John Dewey's expression, assert that: 'The most significant question which can be asked about any learning experience is what quality of problem it involves', and they stress interdependence as a key to group related solutions as: *Goal interdependence*, *learning goal interdependence*, *resource interdependence* and *role interdependence* (Also by Smith & Waller, 1997). In other words, the principle of interdependence' among group members, is also a provision for mutual support within groups that involve learners with educational needs. It offers possibilities for solving the high quality problems within large classes of mixed abilities. Simbotta (1997: 86), in his studies of Malawi's experiences for example, points out that classes where children with educational needs are integrated are often very large, the pupil-teacher ratio is very high, and the mainstream teachers find it very difficult to provide individual help to pupils (Similar experience is reported in school S1B in observation notes extract 'OS1B', section 5.2.3.1) of this study). It is not surprising to this study that he also reports that group work is the commonest strategy employed to solve large class teaching difficulties in Malawi. He goes on to evaluate effective and non-effective use of groups (p.74) as:

> **Effective group use**
> *- slow learners learn better,*
> *- group leaders help the group,*
> *- teachers save time by moving from group to group, rather than between individuals,*
> *- pupils help each other. Even shy and weak ones participate,*
> *- the spirit of teamwork and healthy competition is built,*
> *- teaching materials become sufficient when shared within groups,*
> *- it is easier for the teacher to assess or mark pupils' performance in groups,*
>
> **Non-effective groups**
> *- pupils are playful,*
> *- groups are overcrowded,*
> *- members are not confident,*
> *- the instructions are not understood,*

In relation to effective group use thus, it is important at this stage to link the significance of the studies conducted by Heinman (2000) and that of Biott et al. (1994). They both underline the learning achievement potentials for disabled children generated through *friendship* or *solidarity* in schools and group activities. The former maintains that children in special schools expressed a sense of loneliness than those integrated in mainstream schools. While the latter asserts that all children irrespective of their abilities like to feel that they belong, that they can contribute and what they do matters to a given group or community. They jointly

believe that all children's learning groups can function best with strategies that maintain self-esteem, where the group becomes a source of support, security, social creativity and intellectual challenges. They maintain that this can lead to surprising insights, individual contributions and an overall pattern of learning. It is thus argued that, in trying to make sense of how best children participate at tasks, it is very important to reinforce friendship in groups. The Zambian experiences below (Stubbs, 2002) does not only show the practice of group teaching in underprivileged schools, but also the role of the teacher, the importance of relationship between pupils, and how the link between the school and the community is exploited to enhance the inclusive strategies.

Case study 1: Group work and child-to-child

ZAMBIA

Encouraging active learners 'Everyone teaches and everyone learns from one another'. Paul Mumba, a primary class teacher in Zambia, used Child-to-Child to help encourage children to be more active learners. Some of the activities include:

- Developing teaching and learning materials that explore issues of disability and inclusion.
- Investigating the role of group work to support inclusion in the classroom.
- Developing simple assessment tests that can be used by children and teachers in their homes and communities.
- 'Twinning', pairing non-disabled and disabled children together so that they can work to support each other within their school and community to promote inclusion (Stubbs, 2002: 36).

Though Biott et al. (1994) warn that there are no easy rules for successful group work, the Zambian experience prove that grouping strategies remain resourceful for solving some of the big problems entailed in disadvantaged classes that include disabled learners. The key elements being emphasised in effective group work thus are: effective sharing and co-operation, as well as equality and fairness in group tasks. This brings into view related strategies for consideration that includes: *Peer teaching and co-operative learning,* already highlighted in the Zambian experiences (Case study 1 above) as *child-to-child* and *twining* strategies.

11.2 Peer Teaching

Parallel and complimentary to group learning or teaching is peer teaching. The strategy refers to the concept of learners at any level of education teaching other learners, in formal or informal learning situations. It is delegated, planned or directed by the teachers (Wagner, 1982). It is invariably called *peer teaching* or *tutoring, monitorial system* or *mutual learning* (Wagner, 1982); *surrogate teaching*, proctoring, *co-tutoring* or *teacherless groups* (Goodlad & Hirst, 1989), or more generically as *child-to-child education* (Stubbs, 2002). It could be same age, cross-age, heterogeneous or homogeneous groups. Goodlad et al. (1989) argue that it is characteristically more formal and more complex than other types of activity through

which non professionals instruct each other. The strategy is incidentally recognised by the Rwandan educators (See table 16 in this study)

Asserting that cross-age and same-age peer tutoring can be beneficial to both the tutors and the tutees, in both academic and social achievements in under-resourced societies, Allen (1976) argues that large classes have been successfully handled by other children since the 1st century, and there is evidence that this experience is still successfully used today. Goodlad et al. (1989) like Wagner (1982), maintain that peer tutoring or teaching can:

1. encourage peer tutors to learn through teaching,
2. reconcile traditional and progressive approaches of education,
3. help raise tutor's self esteem, which is good for learning,
4. help the learning of children who do not respond to adults,
5. offer flexibility to teacher in mixed ability classes and allows individual help to slow learners and those with special educational needs.

These factors are summarised in Goodlad et al.'s (1998: 120) affirmation that peer tutoring has the potential to release huge amount of hitherto untapped synergy because it has many points of contacts, both conceptual and administrative. It is thus this synergy that this study foresees as a means of solving the complex functional and resource problems in Rwandan schools. The experiences in disadvantaged African communities and schools below (Tubbs, 2002: 36), are some of the testimonies that peer teaching is an effective strategy in addressing inclusive perspectives.

Case study 2: Peer education and inclusive education

A. LESOTHO

A Child's perspective

Mamello (a girl with brittle bone disease) was able to carry on in a mainstream school despite beatings from teachers, because of the help from friends. In order to attend the school, she had to be pushed in a wheelchair on a very rough road and frequently fell over and broke her bones. The community was so supportive of 'the little lady' that they came together to rebuild the road to the school so that Mamello could travel to school without breaking her bones (Tubbs, 2002, p. 36).

B. SWAZILAND

Child-to-Child

Child-to-Child methodology is used as part of the Ministry of Health's CBR program to empower and educate children about disability issues. Children:

- Compose songs and perform plays raising awareness in the school and community.
- Cover issues such as road safety, HIV/AIDs and disability.
- Help to build ramps, or make Toilets accessible, design playground equipment (Tubbs, 2002, p. 36).

The researcher's personal experiences in disadvantaged schools of East Africa and mainly Rwanda prove that cross-age and same age peer teaching systems are commonly resorted to in situations of educational crisis. His primary education experiences in refugee camps, as well as the post-genocide Rwandan school that he had headed for example, are still live testimonies of achievements through peer teaching practice for him. The former Rwandan minister of education, in reference to the post-genocide crisis had often shared his personal experiences with educators in words such as: *'I went to schools under trees, I had no*

teachers, yet I passed my exams and I am now a doctor and a politician …'. According to Stubbs (2002: 36), a similar testimony was expressed by Mamello Fosere, the disabled Lesotho young girl with brittle bones highlighted in case study 2 above:

> *"I was taught how to read and write at home by my best friend - we used to play together all the time. We started a choir and were joined by many children. Teachers from the primary school visited us and gave me some work to do"* (p. 36).

The assessment emerging from Fosere's testimony is that, though not always a pedagogically planned strategy, peer teaching and cooperative learning remain some of the most successful strategies to which teachers often resort in response to educational crisis in their classes. This study considers that they deserve to be seriously considered by educators and planners of education in situations like those in Rwanda. According to Allen (1976), peer tutoring is common in many societies and is a prevalent factor in large primate communities, occurring more often in heterogeneous age groups of non-industrialized societies, as it used to in the 17th century Europe. The advantages the approach has for large classes with mixed abilities are however obvious (as pointed out by Wagner, 1982 above) for both the tutors and the tutees, and it is up to the educators to profitably explore these to the advantage and improved achievement of every member of their educational systems.

11.3 Co-operative Learning

In small group work like in peer teaching for example, learning occurs profitably through *co-operation*, *collaboration, interaction, negotiation* and *competition,* which this study sums up as co-operative learning. It means viewing other learners as resources (Salmon, 1984), or interdependent (Mills & Cottel, 1998). Basing their views on the Wittgenstein's (1953) and Harre's (1984) findings, McCarthey and Mahon (1992) affirm that knowledge is a social artefact that is maintained through a community of peers, consensually formed through their interaction and cooperation. There are at least 50 different forms of cooperative learning methods ranging from student-directed to teacher-structured (Kogan, 1992). Like in peer teaching and group learning, it is not enough to simply tell students to cooperate. A cooperative learning program must be planned, both to solve the problems inherent in cooperation itself and to adapt cooperative activities to the needs and limitations in classroom settings. No method is perfect, or rather, different methods are suited to different learning and teaching conditions (Slavin, 1983). The four major types according to Ulrich (1995: 6) are: Learning together method; Jigsaw method; Case studies method; and the post and pre-conference method.

Whatever the approach however, studies have proved that cooperative learning has been characterised as a successful model of learning and teaching, because it is characterised by

natural interaction between teachers and students (Adams & Hamm, 1994; Johnson & Johnson, 1989; Millis, 1990 & Slavin, 1995). It presupposes active participation between teachers and students as well as between students among themselves, generating higher level thinking skills, increased student retention, enhanced students' satisfaction, developed oral communication skills, students' social skills, promotion of students' self-esteem, and positive relationships. Slavin (1995) categorises cooperative learning into six principle characteristics, namely*: group goals, individual accountability, equal opportunities for success, team competition, task specialisation, and adaptation to individual needs.* Like in peer teaching thus, cooperative learning is identified with qualities that are useful in large classes of mixed abilities, notably: *Positive interdependence, face-to-face interaction, individual accountability, equal opportunities, interpersonal and small group skills, and group processing* (Johnson & Johnson, 1989). It stresses *what to learn* and *how to learn,* as compared to traditional lecture methods that assume learning together in homogeneity. The differences between cooperative and traditional learning are traced by Davies, (1981: 39) as:

Cooperative Learning	**Traditional Learning**
• Positive interdependence	• No interdependence
• Individual accountability	• No individual accountability
• Heterogeneity	• Homogenous
• Shared leadership	• One appointed leader
• Shared responsibility	• Responsibility only for self
• Task maintenance emphasized	• Only task emphasized
• Social skills directly taught	• Social skills assumed and ignored
• Teacher observes first and intervenes after	• Teacher ignores group function
• Group processes their effectiveness	• No group processing

While considering the many advantages in cooperative learning, Smith (1991: 6) enumerates the many components of cooperative learning, underlining some as: "Cooperative learning as a relationship in a group of students that require positive interdependence or '*a sense of think or swim together'* as individual accountability or *each of us has to contribute and learn;* as interpersonal skills or a *sense of communication, trust, leadership, decision making, and conflict resolution*; as face-to-face promotion of interaction and processing or a '*reflection on how well to function and how to function even better".*

It is thus concluded that the natural tendency for children to grow and learn through social interactions, recognised by Hertz-Lazarowitz, Kirkus & Miller (1992) as very beneficial in formal and non-formal educational contexts, not only help them in achieving educational goals, but also in creating long-term benefits. The learners benefit from the friendly, individualised interactions in which the material to be learnt whether social or cognitive, can

be matched with the learner's abilities and interest and the immediate feedback assured. It raises the social motivation, a sense of responsibility and positive attitudes towards school. The researcher adds that the findings in this study indicate that among the strategies considered by the Rwandan teachers in solving the problems in their classes have proved that learning activities in rural Rwandan communities and schools are often identified with these qualities and often occur naturally. Thus, the study argues that for schools in situations of extreme adversities, the well adapted systems of co-operative teaching and peer learning provide yet another avenue to explore as a means of getting out of the many pedagogical crises.

11.4 Reconsidering the teacher's roles in educational innovations

According to testimonies in tables 10 and 16 in this study, the strategies discussed above are not unfamiliar to Rwandan educators. However, the fact that they still remain theoretical in the observed instances prompts this to examine the roles of a teacher and educational leaders in curriculum innovation. There are certainly other strategies and approaches that are adaptable to the different educational situations, and by discussing these, we are actually pointing to key requirements in responding to the educational situation, which is *'curricula innovation'* and *the teacher's interventional role*.

The advocates of curriculum innovation processes (Bishop, 1986; Fullan, 1982 & Markee, 1997) define *curricula innovation* in terms of a *positive change* over *time*, a *willed and conscious intervention*, a *managed educational process* and introduction of *new pedagogical values* for *development in education*. For Markee (1997: 46) curricula innovation is 'a managed process of development whose principle products are teaching (and/or testing) materials, methodological skills and pedagogical values that are perceived by potential adopters'. Thus, the importance of stake holders who are also referred to as *implementers, clients, suppliers, entrepreneurs or adopters,* is strongly stressed. Arguably, for any curriculum innovation to take roots in education, the *teacher*s or *users* (Bishop, 1986) or the *adopters* (Markee, 1997) must be taken as key players in the process. The role and importance of the teachers as key adopters in curriculum innovation is clarified in Markee's (1997: 43) assertion as:

> *"…if teachers support the innovation it will work, and if they resist, it will not succeed. They can only adopt it if they understand it or are part of the innovation planning process…. Besides, the teachers are part of and understand very well the socio- cultural system they are working in …."* (p. 43).

In the above discussions, the role of a teacher in cooperative learning, peer or group teaching session was portrayed as part of curriculum innovation for example, in that s/he takes an

interventional role that is different from that of a traditional lecturer. In the former role, s/he is a *facilitator, resource person and support person*. According to Johnson, Johnson and Smith (1991: 58-60), the teacher provides instructions and objectives to students in groups; assigns students to groups, provides materials and room arrangements; explains the task and cooperative structures; monitors the functioning of each learning group and intervenes when needed; evaluates the quantity and quality of each students' learning and ensures that each group processes and all members are effectively participating. Beck (1995: 226) points to the role of a teacher in this position as: *clarifier, planner, stimulator, coordinator, and evaluator.*

However, the point raised by Markee (1997: 43) in the above assertion needs to be stressed at this point: 'for a teacher to carry out the innovation, he has to understand it and be part of it'. This study argues therefore, that all these roles are innovative and can possibly be rendered even more effective by valuing, enlisting and enhancing or enabling the teacher's initiatives and capacities through training. In this respect, it is deemed important to consider Ainscow's (2005: 6-7) findings about teachers' practice in inclusive classrooms. They indicate that teaching methods are neither devised nor implemented in vacuum, they also involve engagement with evidences that create space for reviewing thinking and practice, because it is not in itself a straightforward mechanism for the development of inclusive practice. This means that new designs, selection and use of particular teaching approaches and strategies arise from perceptions about learning and learners. He asserts that even the most pedagogically advanced methods can also be ineffective, just as new meanings can equally emerge when circumstances create new pedagogical surprises. It is with these warning experiences therefore, that this study finds it quite important for Rwandan teachers to be adequately prepared for challenges while seeking appropriate educational innovation strategies that are demanded by the inclusive education perspectives.

11.5 Education leadership and inclusive education

The study focuses mainly on inclusion of disabled children within the Rwandan education and communities, and has also entailed consideration of the processes involved in overcoming the barriers that impede their equal access and participation. Therefore, it goes on to maintain that appropriate leadership capable of initiating and steering the change process (also referred to as an innovative process), is an important prerequisite. It has been noted that if leaders of inclusive initiatives demonstrate strong support for the change process, their organisations are more likely to devote the time and resources necessary for the process (Ainscow et al's, 2000). According to Ainscow's (2005) and Hopkins et al.'s (1994) research on schools initiating inclusive practice for example, a reform process that involves changing educational strategies

often leads to various forms of 'turbulence' involving organizational, psychological, technical or micro-political dimensions, at the heart of which a struggle arises as people struggle to make sense of new ideas. In this respect, how teachers are supported in coping with such periods of difficulties, what organizational arrangements are made in encouraging the development of practice, are all challenges that demand innovative and supportive leadership.

In the same way, a change process in Rwanda towards inclusive perspectives in education, also demands leadership innovations at various levels, empowered with relevant skills and awareness of both the local and international contexts. Accordingly, the search for improvement strategies that will foster inclusive education has also led the study to explore forms of leadership that will challenge the existing standards and assumptions of the Rwandan context. The study is particularly interested in Ainscow et al's (2000) six inter-connected leadership 'conditions' that are relevant to inclusive developments, which are: attention to the potential benefits of *enquiry and reflection*; a commitment to *collaborative planning*; the *involvement* of all stakeholders and the community in school policies and decisions; *staff development* activities that focus on practice; *co-ordination* strategies, particularly in relation to the use of time; and effective *leadership roles*, not only by senior staff but spread throughout the organizations. In other words, they suggest to leaders in the phase of school improvement, a review of these organizational conditions to see whether it might be helpful to make adjustments in ways that will provide greater support to staff as they face the inevitable periods of turbulence.

The present study notes however that, in what they term as *'politics of schools'* Willower (1986) and Hoyle (1986) warn that schools and schooling effects influence all that are part of it, mainly because of their social environment and their special organisational structures and cultures embodied in them. They argue that a school being a miniature society develops its own values, norms and symbols within its programmes and politics, and establishes its own culture and traditions that are part of the day-to-day activities and interactions. It is within the same context that Waller (1932) cited by Willower (1986) had earlier termed the school environment as the '*museum of virtue'*. In any case, as manifested by the findings in chapters 7-9 of this study, the perceptions and norms in the Rwandan schools still present both their unique challenges and some potential derived from the influences of the surrounding community. Such a situation is apparently recognised in Hoyles' (1986) explanations of the the school administratively. He defines it as an organisation that is different from groups, families, communes, tribes and classes, for it has *specific goals, differentiated tasks, legitimate authority* invested in certain members, within a given *set of management procedures*. He argues that a school system is a social organisation composed of basic

components: *structure, people* and *resources,* and therefore*,* is always guided through a dual system: the role of the members, and the expectations attached to them. In this way, he underpins the importance of quality leadership for innovative schools, as a phenomena hinged on the good *relationship* between *pupils, teachers* and *head teachers* and the school c*ulture* or *climate.* There is little doubt therefore, that the argument advanced by those who consider school and *educational culture* (Astuto & Clark, 1986; Hoyle, 1986; Shann, 1989), also consider it as a fundamental element for school effectiveness. It recognizes the importance of school management skills among other things as the force behind it all. Hoyle (1986) emphasises school management qualities and cultural values in a school organisation as:

> *"…A school is a loosely-coupled system. Its components are centrifugal. The task of the head teacher centripetal ... The core professional task of the teacher is the transmission of knowledge, skills and values. ... Moreover, schools are organisations in which symbols, as manifest in language, actions and artefacts are particularly potent at many levels ..."* (p. 169 -170).

The assertion leaves no doubt thus that the head teacher's position retain important influences to school organisations, hence, initiation of any change process such as inclusion, will heavily depend on his/her leadership role. This is however argued differently by those who discuss school leadership as '*head teacher's power and effectiveness'* (Astuto et al., 1986; Carson, 2000; Grown, 1986). They argue that this influence is generated through the head teacher's powers to organise, to discipline, to change, to judge, to influence, to plan, implement, recruit, co-ordinate and control resources. Whatever the case, through his five years' experience initiating inclusive education as a head teacher, the researcher is aware that school headship is also a position of confrontation between both *powers* and *powerlessness*, because the powers are only effective if they are correctly distributed, delegated and used by all the stakeholders in the school organisation.

In line with the researcher's observation therefore, the study concurs with Kitavi & Westhuizen's (1997) study on principals in developing countries, which also emphasises the importance of their training, not only in managerial skills, but also to raise their awareness of administrative crisis emanating from the shortage of the physical facilities, skilled personnel and other important inputs. The researcher was heading a school shortly after one of the century's most devastating genocide, that lead to vandalising of school equipment and premises, and demoralised students and teachers. The situation is recognised in Kitavi et al.'s (1997) view on problems facing beginning principals in developing countries as:

> *"…Entry is a quintessential situation, when the hopes and fears of all the years are again rekindled, when the dreams and visions of the principal entering and the school inviting are aroused, when all the anxieties of facing the unknown are at their highest pitch ..."* (p. 251).

However, though the developing countries' situation in general and the Rwandan one in particular might present a unique school leadership environment, Martin et al.'s (1997) description of a head teacher provides a view that their roles are globally similar. They contend that a head teacher is someone who is constantly juggling the pupils, staff and governors, within the local and national frameworks to achieve the best of everybody and demonstrate continuous improvement. The minimalist assertion of this study is that, basically all the head teachers' challenges in initiating inclusive education are enormous and quite challenging at that.

The EENET journal on '*Enabling education'* has for a few years presented the phenomenal educational experiences from different parts of the world, portraying the amount of initiatives and changes educators are capable of (Lewis, 2004). In its issue 7 of April 2003 (EENET, 2003: 4), it published the researcher's personal account as a head teacher in a post-genocide Rwandan school (Also highlighted in chapter 1, section 1.1 of this study), struggling against exclusion of the blind children as:

> *"…In Rukara commune (community) enough income was generated to sustain an inclusion project of children with visual impairment in the local secondary school, G. S. Gahini. … A small government-aided school, very poorly resourced and overcrowded with over 800 boys and girls, a third of who are survivors of genocide. The project attracted the attention and support of the government, non-governmental organisations and community members. ... It was in 1997, through strenuous negotiations with the Ministry of Education, that the school had finally admitted eight blind students — the first visually impaired and blind students to enter secondary education in Rwanda… One year later at a parents' meeting, I boldly announced plans to raise funds for the education of the blind children included in the school. Within the following month the project was ready and the first 'parent fundraising committee' was formed. … I explained the potential of the pupils with visual impairments and talked about their needs and rights to learn with others, and how our society has neglected them and its roles. … Eight months later, a resource room, seven houses for volunteer staff and a reading room were opened …"* (p. 4).

For the researcher however, he admits that it was only in a desperate search for the appropriate response to the needs of the blind children at the time, that he found himself resorting to all the available measures and options for an answer. In any case, the important resources available to a head teacher in such circumstances are made apparent in the extract: he was able to mobilise the community, to negotiate with decision makers at different levels, and above all, avail a platform on which a forum on which innovation issues could be discussed, explained and be directed.

11.5.1 Effective school leadership for inclusion

In light of the argument above, the study's support goes to those who advocate for new approaches in school administration that bring the teachers closer to the head's responsibilities and vice versa. These approaches help to build a flatter education administration structure that acknowledges enhanced collaborative teamwork, better understanding of each other's responsibilities, and improved comprehension in the shared services to the school (Astuto & Clarke, 1986; Fullan, 1986; Glover, Miller, Gamblin & Johnson, 1999; Harris, & Beyerlein, 2003; Henkins, Cistone & Dee, 2000; Hoyle, 1986). Admittedly, the post-genocide Rwandan school administration situation could not afford the luxury of some aspects in the above theories, and were in fact, and still are characterised by erratic reforms and often interrupted by constant crises. These impose standards and needs that are contrary to a learning environment that is child-based, flexibly responding to the needs of all the learners irrespective of their differences, with the head teacher as an actively participating facilitator of the learning. Sharing the outcomes of his studies about effective leadership in inclusive schools, Ainscow (2005) had this to say:

> *"…we have recently been working with a 'think-tank' of school principals to address the question: 'What forms of leadership practice encourages behaviour that facilitates the learning of all students within a school?'… It was assumed that school leadership has to be understood as a distributed practice, stretched over a school's social and situational contexts… It was also assumed that the development of leadership practice starts from personal experience and involves forms of social learning,. ... It can be argued, therefore, that the most effective form of leadership development is likely to be based within the workplace, using social learning processes that influence thinking and action in a particular context. …The experience of working with the think-tank principals revealed … how, under certain conditions, leadership practice in different schools can be used to stimulate a form of reflection that makes use of the experience and knowledge that exists within a group of educational leaders* (p. 5).

Apparently, the research evidences in the above extract agrees with the researchers' own testimony above (EENET, 2003: 4), in which they both point out that situational conditions, experiences and personal qualities, may stimulate forms of reflections that may lead to certain leadership practice. What seems to be emphasized in either case however, is *a reflective leadership* with the existing resources or experiences in its context. Van de Grift et al. (1999) add that effective school leadership also emphasise *listening, making suggestions, giving feedback, modelling, inquiring* and *soliciting advice* and opinions, *encouraging* and maintaining a focus on *improving* instruction (Astuto et al., 1986; Henkins, Cistone & Dee, 2000; Hoyle, 1986:). For Astuto et al. (1986: 53), the following are important qualities in effective school management:

- *stimulation of activities,*
- *reinforcement of positive cultures,*

- encouragement, delegation and productivity through people,
- entertaining multiple solutions,
- power diffusion and decision options,
- providing time and resources for change,
- implementation and evaluation.

Accordingly, Hoyle (1986: 12) suggests important notions that all school head teachers should be equipped with if they must be effective: The *theory of education*, of *organisation*, of *management of change* and the theory of *educational policy.* It is not certain thus whether, the Rwandan head teachers have any of these qualifications. However, their position is arguably explained by Hoyle' (1986) analysis:

> *"Third World countries to which colonial systems of education have been exported, there has been less interest in this domain (school management) due to cultural differences ... Experience as teachers, plus certain personal qualities ... have been regarded as sufficient for successful heads ..."* (p.11).

Whatever truth Hoyle's views might hold, to many African educational administrations and practice (including Rwanda), the theory of poorly implemented educational policies, inadequate financial and material resources is real and also applies in many circumstances (Bishop, 1986; Harber & Davies, 1997; Kitavi et al., 1997). Thus, many school leaders are condemned to learn on the job in circumstances of extreme shortage and administrative crisis. The researcher recalls that among other ideas that had kept developing as years of his headship went by, included:

- encouraging diversity among students in clubs and extra-curricular activities,
- empowering, supporting and strengthening active student council,
- Involving, assigning and delegating staff members in projects,
- involving parents in school decisions and execution of school projects.

The researcher recalls too, that he often encouraged diversity based on *sex, ethnicity, background, religion and ability* without projecting these in the foreground, but using their synergetic power to counterbalance any possible set backs based on them. Achievements were made through developing scheduled routines, cultivating competitive spirits and strict time-tabling made through students and teachers' consultations, yet influenced by his priorities such as academic goals and harmonious functioning of the school system. However, this did not stop a few challenging incidences that are still alive in his mind that include:

- Few incidences of ethnic differences and traumatic reactions that often cropped up,
- The fluctuating school performance which was blamed on the integration of the disabled students
- The anxiety with which the inclusion of disabled students in the school was announced and the difficulties in which it was sustained.

Whatever the case, personal experiences also prove that school leadership is an extremely challenging but an instrumental position, and leading a schools with an inclusive perspective in a situation like that of Rwanda, still demands caution. For the sake of the Rwandan school

situation thus, this study takes Saran & Taylor's (1999) view that the role of a head teacher as the main leadership figure in school has no single leadership style, only the *participatory* and *collaborative* means remain the most pertinent tools in making his/her administration effective. To this end, a holistic approach involving thorough planning and a determined interest in reducing all exclusionary tendencies in the educational system, emerge as the key principle for leaders of inclusive educational settings.

11.5.2 New education leadership perceptions and the way forward for inclusion

Throughout the previous discussions about education leadership, this study has been underlining the idea that educators and educational leaders are being asked to become transformational and reformers by drastically redefining the educational structures and systems, as an appropriate response to the ever changing needs of the learners in general and in challenging situations in Particular. Cline & Necochea's (2000) fits this demand into the requirements of the fast changing societies today:

> "… *Rethinking of the schools, to meet the ever-changing demands of the 21st century is pertinent ... Schools need principals to become integrated into groups, also need creativity and new ideas …*" (p. 151).

As the world is entering the 21st century, the world society is adopting new ideas and outlooks, reflected in educational perceptions, educational policies and practice in a fast developing world. This study adds that exposure and sharing of experiences in educational innovations is also an important eye opener required by many educators in challenging situations. However, equally potent prerequisites are the educators' emotional attachment to the local challenges and opportunities or potentials, with which they can be able to develop local interpretations and interventions.

History has proved that a few societies like that of Rwanda have been caught in situations where their meagre resources are often channelled into civil crises, or responding to the outcomes of these, and the growing advocacy by educational futurists for building a more sustainable future and an improved global society through inclusive education (Anderson, 2000; Bell, 2000; Gundara, 1997; Henderson, 1998; Lloyd, 1999), ought to be finally heeded for the sake of the younger generation. They all call for educational leaderships that would encourage a deeper understanding of our living planet, that would improve and maintain freedom and welfare of humankind, that would raise the power of the civil society in a more global citizenship, functioning within an atmosphere of better visionary thinking, critical discourse and social cohesion.

Lloyd (1999: 45) suggests that 'with the current rapid technological changes and developments, the 21st century education should reflect empowerment in education, which challenges the traditional education that functions within boundaries, ceding space to an education which ought to be more flexibly organised, highly permeable, or open to inputs from all, including learners'. He contends that the agenda for the future education should genuinely ensure both '*equity and excellence, founded on the notion of collaborative, problem-solving, barrier-free learning environment'* (p.149). These arguments are reflected again in Gundara's (1997) prediction of the way forward for the new millennium. He goes on to add to his assertion highlighted in section 3.2 of this study, that:

> *"Human societies will require the pooling of all the ingenuity resources and technologies to obviate some of the conflicts, exclusion and deeper cleavage that may occur …* " (p. 208-209).

Admittedly, the Rwandan experiences according to the findings in this study (chapter 7-9), present a uniquely socio-political environment, within which a situation of extreme adversities dominate in shaping of educational policies and practices. Conversely, the new leadership responsibilities demands that a modern Rwandan education leader pursues a relentless search for new solutions and a deeper understanding of his/her career, within both his immediate environment and the wider world. Indeed, the study is aware that the country's educational arena does not offer opportunities for such education innovation opportunities, and many good educators with initiatives often face great challenges. However, this study perceives an open invitation within the new education leadership, that ought to be considered as the most applicable *educational approaches,* especially those inclined towards values of *collaboration*, *critical openness* to one another, and new outlook on values such as *justice, human rights, freedom, mutual respects* within the social and physical environment that the growing children must be made aware of, and be prepared to contribute to actively.

11.6 Rethinking inclusion and the emergent framework

Like Ainscow (2005), this study finds it a forward looking idea, and indeed a priority project to think of an appropriate framework within which the Rwandan education situation would be tailored to accommodate the situation of the disabled and other vulnerable children. Therefore, it goes without saying that the inclusive perspective ought to take into serious consideration how to deal with the exclusionary aspects and potentials, that are inherent within both the society or the environment (See Fougeyrollas' models in Fig. 20 & 21 above), most of which were openly observed in schools and communities surveyed (See findings in part three). In other words, the situation in Rwandan education demands that as a priority, skills, abilities, and especially the awareness of the local barriers responsible for exclusion of the disabled children from crucial services, be developed. Thus, aware of the enormous differences in

socially-linked barriers, this study heeds the UNESCO (2003: 13) comparative analysis of the social barriers to adoption of new changes:

> *"…In the countries of the North, the move towards more inclusive approaches in education is often difficult due to the legacy of traditional policies and practices, i.e. segregated or exclusive education for groups identified as being 'difficult' or 'different', or based on wealth, religion, etc. This influences the attitudes and mind-sets of people creating resistance towards change. In the countries of the South, the major constraint is the serious shortage of resources – lack of schools or inadequate facilities, lack of teachers and/or shortage of qualified staff, lack of learning materials and absence of support. There is also a serious concern about the quality of education: although many countries have made recommendable progress towards achieving the goal of Education for All, this has come through sacrificing the quality. This is not a particular challenge to adopting more inclusive approaches ... Not all barriers to learning are, or can be, the responsibility of education alone…Some exclusionary practice is related to access, such as high school fees that only the well-off people can afford or various indirect costs for education; schools being open to children from only one specific ethnic or religious group; etc. In addition to problems in access, factors such as poor quality of the teaching, weak school management or curriculum irrelevance may lead to marginalization and exclusion …"* (p. 13).

The suggestions emerging from the extract thus, is that barriers to realising inclusive learning can be both predictable and sometimes unpredictable, and overcoming those demands approaches that are tailored to the prevailing local challenges and conditions. It is apparently a process of change or adoption of inclusive ways that entails thinking about and working with factors of the general and specific 'change resistance' (Ainscow, 1999; UNESCO, 2000). It is purported for example that in certain societies, if the pursuit towards inclusion is not connected with the mission of learning, or the education system in a larger sense, the stakeholders such as teachers and parents might not be willing to devote their time to the process (See the case study 3 below, according to Stubbs, 2002). There might also be difficulties in soliciting the support of all groups concerned if the inclusion process is seen to be benefiting only certain groups, such as learners with selected disabilities or a certain ethnic minority. This study adds that in the case of the Rwandan education, the legacy of ethnic conflicts, the dominance of certain religious groups in services concerning the disabled and the inherent resource constraints, can as well be envisaged as potentially change resistance in its covert and overt forms. Thus, the successful adoption process of inclusion will also depend on how well these are understood and subsequently addressed.

As a matter of facts, the study shares Stubbs' (2002: 37) understanding of deprived communities for example, asserting that '*barriers which exclude disabled children are by no means unique to disabled children alone for they are linked with most of the vulnerabilities;*

however, there are issues which are specific to the inclusion of disabled children'. In other words, in the case of Rwanda, the inclusion plan should also be able to encompass the wider social environment as well as the disabled children within them. The study being focused on the environment context in which Fougeyrollas' (2002) model was found relevant for its suggestion on improved access to education for the disabled children (See Fig. 20), equally important is Ainscow's (1999) and Hopkins' (2001) strategy termed as *Improving the Quality of Education for All* (IQEA), providing a general working orientation. It emphasises:

- Creation of conditions within schools for managing changes successfully;
- Focusing on areas that are seen to be matters of priority in school improvement;
- Collecting and engaging with evidence in order to move thinking and practice forward, and to evaluate progress; and
- Collaboration within partners and schools, so that a wider range of local expertise and resources is developed to support the improvements.

These appear to suggest the necessary conditions that would guide the general framework for inclusion development, within which the implementation process in each individual school, and the overall expected outcome of the general education system will take their shapes. This study associates the ideas with the UNESCO (2005: 27) framework termed as '*looking at education through an inclusive lens*'. It is basically based on the principles of shifting the earlier perceptions of the sources of difficulties in learning from within the learner, to seeing problems within the education or the general environment that influences education. In other words, the study is now strongly advocating for reorganizing ordinary school systems, with a focus on both access and quality of learning for all children including those perceived by the local culture as disabled. Taking heed of Sue Stubbs' (2002: 34-39) inspiring examples of inclusive innovations in a number of developing countries, ranging from the most deprived and difficult environment of Douentza district in Mali and Karamoja in Uganda (See case study 3 below), to those that are merely concerned with quality delivery and racial harmony of the Czech Republic, this study learns that the Rwandan inclusion can as well be addressed within a wholistic perspective that involve a range of community-based barriers, and community-based initiatives and resources.

It is in light of this view that this study turns its consideration to the model below (Fig. 22). It does not only propose a shift from addressing the educational barriers within the child, but also suggests possible ways of removing the school-based barriers to learning. Accordingly, this study is in line with Stubbs' (2002: 64) suggestion of solutions, in which she shares a wide range of experience in underprivileged communities, and is also in agreement with the Index for Inclusion (Ainscow et al., 2000), about school improvement strategies that suggests to:

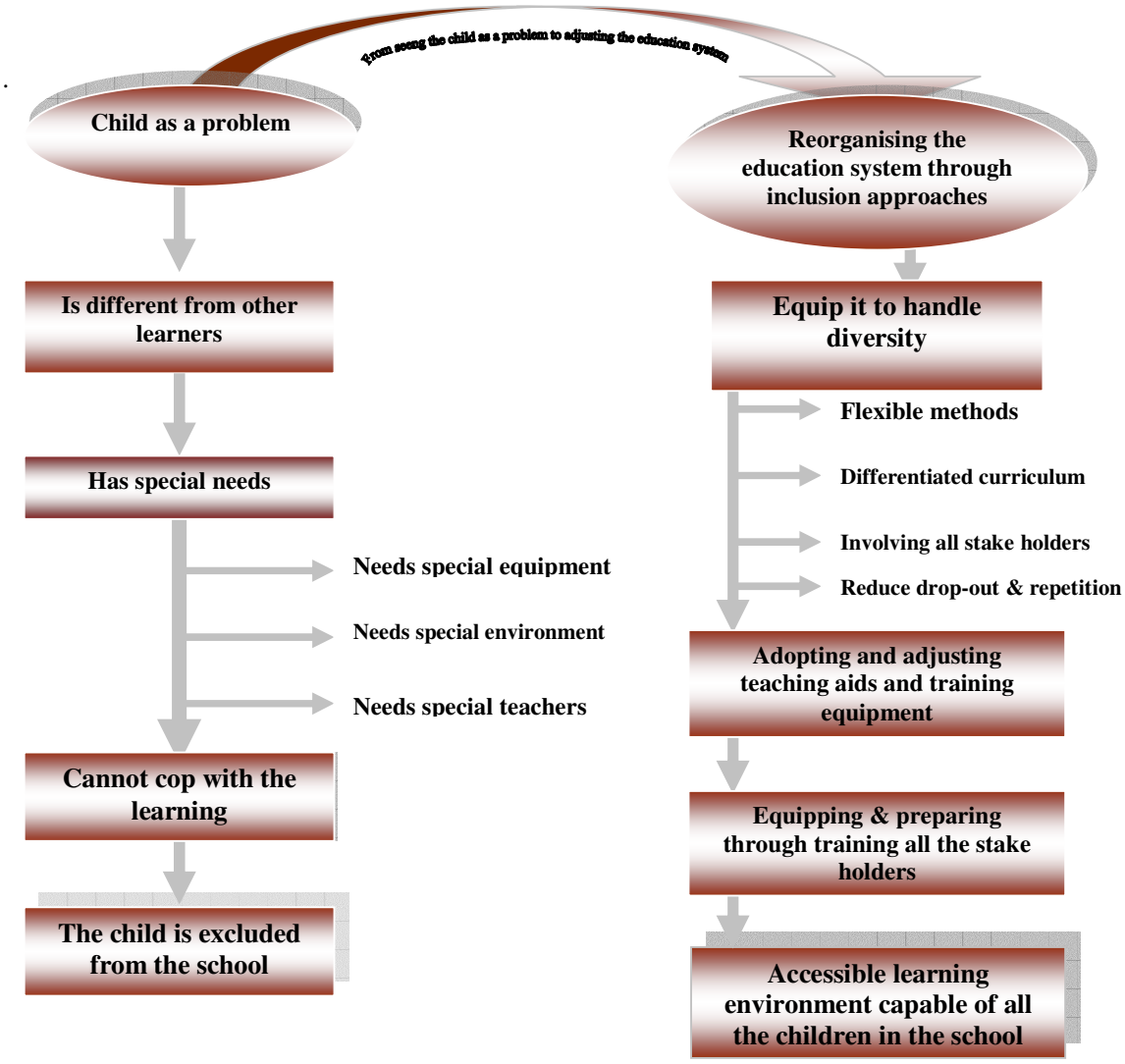
- Develop a whole school approach,

- Identify, un-lock and use resources in the community,
- Produce aids and equipment from local low-cost materials,
- Use resources allocated to support the learning of all students,
- Listen to teachers, offer support, promote team work and relevant practice,
- Make environments accessible and welcoming,
- Develop and implement policy to respond to diversity and reduce discrimination,
- Develop Child-to-Child and peer tutoring strategies,
- Create links with community organizations and programs, including parents, associations, DPOs and CBR programs.
-

Figure 22 below thus, is a general school-based framework suggested by Stubbs' (2002: 64-5) in her perception of inclusion '*where there are few resources'*, which was also adopted by the UNESCO (2005: 27) guidelines for inclusion:

Figure 22 Education through the inclusion lens

Seeing education through the inclusion lens implies a shift from seeing the child as a problem to seeing the education system as the problem that can be solved through inclusive approaches



By education through an inclusion lens, it is being suggested that improvement strategy ought to begin by preparing, motivating and allowing the local stake holders such as teachers, parents and local leaders to take responsibilities. In this way, physical barriers such as long distance, bumpy roads rendering regular schools inaccessible for learners with mobility difficulties are likely to be addressed through *'umuganda'* or community work for instance. The issue being raised thus is that, inclusive education ought to be largely framed, implemented, sustained and supported within the local context (addressing local values, beliefs and principles). According to Stubbs (2002: 28), in planning for inclusive education, it is not enough to be clear about the concepts alone, planning also needs to be realistic and appropriate, functioning in a range of challenges. Bringing together a wide range of successful inclusive education experiences in very difficult conditions, she provides three key ingredients for the development of a successful and sustainable inclusive education model: A strong framework or *'the skeleton'*; a local-context of implementation or '*the flesh'*; and a continuous critical self-reflection or '*life blood'* as highlighted below:

Three key ingredients for a successful and sustainable inclusive education model



With the 3 key factors, the study also notes with interest that the inclusive education will necessarily require to be modelled around the local initiatives, resources and contexts, and it is these that will provide its strongest skeletal framework, its flesh and life blood. It is with these basic ingredients that specific factors influencing the learning environment, such as social attitudes, design of the buildings, the availability of water, electricity and toilet facilities and others which can either enable or constrain the students' participation and access to a wide range of learning activities, are taken care of. In the same way, the study also notes that though there are factors which are specific to inclusion of disabled children in the school

environment, barriers which exclude them in Rwanda are by no means specific to them. For example, schools may cause exclusion when they are not able to deal with discriminatory attitudes such as violence, bullying and abusive labelling within the school and the surrounding environment. Some parents are not likely to send their children to schools which they do not perceive as being safe, or learners and teachers are likely to resent such an environment. Therefore, the argument being raised is that there are no standards on which inclusion is modelled; rather, the inclusive education model may emerge out of the existing standard and demands (See case study 3 according to Sue Stubbs, 2002: 37-8 below).

11.7 The emergent inclusion model

Though the study findings prove as a surprising phenomenon that all the schools surveyed exhibited some forms of '*casual integration'* (Stone, 1999), or '*natural inclusion'* (Ingstad, 1997) as explained previously, it was also made evidently clear that the schools and communities still face enormous challenges and the following are some of the eminent factors:

Major challenges:

- Rwandan teachers often find themselves face to face with challenges that they are unprepared for in their daily attempt to respond to the needs of all the students,
- Among the biggest challenges that feature prominently, are the inadequate provisions in terms of educational materials and curriculum, untrained and inadequate personnel, the discriminating attitudes and environment, and others,
- Among the many children discriminated by the educational systems are mainly those with challenging disabilities, and those from disadvantaged family background.

Responses to the challenges:

- Some of the teachers have developed some mechanisms through their own initiatives, using the means at their disposal with which they are able to respond to some of the educational needs,
- A growing number of NGOs have developed services around the country with which different disabilities are addressed.

The emerging phenomenon that is of inspiration to the study therefore, is the already existing initiatives within schools and NGOs around the country, all of which are attempting to respond to the needs of different categories of children that are discriminated against. There are currently over 15 registered centres for children with disabilities with varying objectives and missions. The study was most especially interested in Humura centre of Ndera near Kigali city (Karangwa, 2004) and Komera centre in the Eastern province (Egon Bruin report, 2005), for their community-based characteristics, as well as their educational mission. They are generally centrally planned with outreach programs, combining rehabilitation, care, and educational services for the disabled children discarded by the local mainstream education system. However, it was also noted that, though there is an evident attempt of the centres to

collaborate with the children's parents, they all function in quasi-independence of both each other, of the schools around them and of the key local educators and leaders' participation.

Conversely, the emerging proposal by the study is that of combining the community-based educational centres for disabled children with their resources, and the neighbourhoods' educational premises in regular schools and their scanty initiatives, as potentials and resources that need to be merged (See also Fig. 19). It suggests a means of getting closest to overcoming barriers to inclusion of the disabled children, by bridging the resource and skill gaps. It is argued therefore that such community-based centres could be developed within reach of regular school services. Alternatively, the regular school facilities and services could also be shared with the centres for the disabled. In this way, the educational and rehabilitation materials would be part of the same setting, both teaching and therapeutic skills would be used interactively within the same system, and the disabled and able-bodied children from the same families and communities would be able to share the same educational support available in their natural interactions, as a ways of attempting to make a step towards developing a community-based inclusive plan.

In this respect, the study advances the argument that young people in special centres and those in neighbouring regular schools should not be totally separated from each other, since they actually interact in their homes and know each other well. Thus, by extending this interaction within the school premises, they are able to support each other even better if this interaction is supported adequately by appropriate school regulations and policies. It suggests that it would be less wasteful in terms of resources and space because these are easily shared and most of them are locally available. The teachers and rehabilitation personnel would be able to share their experiences and expertise for example, in terms of resources and planning.

As one of the feasible strategies therefore, the study suggests an inclusive education plan for the children with disabilities in communities that are endowed with specialized centres within the regular local school, or the regular school facilities should be brought closest to the centre. This model suggests a mixture of unit-based inclusion approach, or an orientation towards a mixed or a complete integration approach. A similar model had earlier been considered by Warnock (1981) as '*social, functional and locational' integration*, or '*a three in one strategy'*. It also addresses the environment rather than the individual child, combining community-based services and the institution-based services (Thomas and Thomas, 1998). It should in a way be able to focus at changing the environment and all the education stake holders that influence the disabled children's development (the school and its teachers, the community and all its members), rather than the disabled children.

Alternatively, the experiences in the case study 3 below (Stubbs, 2002: 37-8) presents yet another perspective of more widely encompassing models applicable in some of the disadvantaged environments with challenges similar to those found in the Rwandan situation. They present a wide spectrum of varied approaches, ranging from micro interventions such as classroom and community-based education and provisions of social services, to macro interventions that address issues such as policy, advocacy or disability rights frameworks. It is being suggested through the experiences thus, that effective models in Rwanda might as well consider community-based strategies, which shift interventions from the traditional structured, organized, and systematic environment of educational institutions, to the unstructured and unfamiliar settings within the communities, with or without the back up of the familiar educational systems or professionals in the process. The key questions to answer being: what is the problem? and how to respond to it? Apparently such are the key questions being addressed by the Malian and Ugandan cases below:

Case study 3 Inclusive reform models in disadvantaged African environments

A. MALI

Inclusion in conditions of extreme poverty

The Douentza district in Mali is one of the poorest areas in the world. 90% of the population lives below the established poverty line. Only 8% of children attend school, and 87% of 7 year old children have work responsibilities occupying around 6 hours per day. Only 6% of villages have a school and teachers are poorly trained and overstretched. In this context, a pilot education program was developed that also had inclusion as a core component:

- The pilot program began with a thorough feasibility study that involved all stakeholders in the community in sharing their perspectives on education and schooling.
- The community prioritized education and school committees were formed that included one woman who was responsible for girls' and disabled children's enrolment.
- The decision to include disabled children is rarely spontaneously prioritized by poor communities, as they have no positive role models that show that the child can learn and be productive. An outside catalyst (in this case an NGO) is often necessary to encourage a focus on disability (Sue Stubbs, 2002: 37).

B. UGANDA

Inclusion in disadvantaged communities

The Karimojong people in Uganda are semi-nomadic, depending on their livestock for survival. Only 11.5% are literate. The children's domestic duties are essential to their family's survival. The ABEK (Alternative Basic Education for Karamoja) program is strongly community-based and has promoted inclusion in education as follows:

- The program was initiated by the community and facilitators are selected from the community.
- Learning areas are totally relevant to the community and their survival, they include livestock education, crop production, peace, security and health.
- The facilitators have lessons before they go to the fields, and again in the evening when work is finished.
- Girls are able to bring younger children whom they have to care for.
- Boys are able to bring their herds to graze and still take part in learning to read and write. Parents and elders are welcome to attend.
- Instruction is in their own language.
- Teaching methods are active involving music and dance.
- The elders themselves are specialist facilitators in subjects such as indigenous history and knowledge of survival.
- The District Education Office has a key role to play - in administration of ABEK and ensuring a strong link with the formal system and the disabled children are able to participate (Sue Stubbs, 2002: 38).

However, the study is already cautioned that much of the case experiences such as those mentioned above, might be the popular NGOs reports, glamorizing self image through

accounts of great success stories, which often cover much of the shortcomings and weaknesses in the programs (Karangwa et al., 2005: 14). Thus, the study finds it equally important to heed Thomas & Thomas' (1998: 3) experiences in community-based rehabilitation, suggesting that such interventions might as well lead to unpredicted controversies and challenges. The central lesson to the study is that it is the requirement of all stakeholders to be creative, innovative and continuously problem solving. Innovative use of local resources, whether it is in the form of personnel, materials or technology, is the key to the concept. By innovative use of local resources, interventions can be made more appropriate, more effective and more acceptable, beside having the advantage of building on what may already exist in the community by way of traditional forms of rehabilitation (Thomas & Thomas, 1998: 7).

In a way, the study suggests a model that deliberately and cautiously revisits ideas raised earlier by educational thinkers such as Dewey (1929), Freire (1972) and Nyerere (1998), insisting on an education that liberates individuals and their societies, involving a constant '*dialogue*' between the society and educator, or an education that addresses the needs of the society (See also chapter 3, section 3.4). In other words, the study underlines that at the heart of inclusive education processes where a change in practice does occur, is the need for the development of a common language that all stake holders within the same undertaking can use to communicate to one another, and indeed to themselves about detailed aspects, ranging from practice to policy, because in reality, limits of the extent to which any of the models would be realized are likely to emerge (Ainscow, 2005). Without such a language, educators like all stakeholders, would find it very difficult to experiment with new possibilities. It is argued in this respect thus, that any concepts of inclusive education models suggested above still remain just one of the many possible, on which other innovative ideas could be developed.

Conclusion

It is admitted that the journey through this study and its outcomes has been considerably shaped by the field. The earlier *'déjà-vu'* attitudes about the Rwandan society and its socio-cultural context that the researcher had always been part of, was sensitively changed through the exposure to a number of intervention instances in the field and experiences within the communities surveyed. It is along this journey that new outlooks on the communities of the disabled Rwandan children in general, and on approaches required to meet their educational challenges and needs in particular, kept emerging. Our stance now, is in line with the search for innovative educational approaches that are able to alter the traditional strategies and deliver more access to inclusive learning opportunities for disabled children, in the face of a wide range of challenges.

The case studies highlighting achievements in circumstances that are approximately similar to those in Rwanda have been deliberately discussed, presenting a wide spectrum of approaches and strategies, ranging from micro to macro frameworks of interventions. We learn from these that to be effective, the approaches of a program that is promoting inclusive education of disabled children need to be both flexible and widely encompassing. For example, some of the emerging lessons on ways to include disabled children through community-based programs are likely to involve:

- Enlisting and enhancing the community members' support, beginning with the most effectively involved family and community members, by empowering them with the means to understand better the needs of their disabled children.
- Developing an enabling environment in which disability concerns would be mainstreamed into development frameworks.
- To ensure sustainability, it is also important that an organisational support framework comprising of the local government, civil society organisations and the private sector or NGOs, as well as disabled people themselves, be developed.
- All the stakeholders in the inclusion program should be equipped in terms of relevant awareness, capacities and resources.
- The inclusion project for disabled children can be accomplished in situations of extreme poverty of the Rwandan communities if a *'vulnerability perspective'* is integrated in all aspects of community-based development programs. Hence, disability issues much like gender being socially cross-cutting, ought to be incorporated in all stages of the project (design and appraisal, implementation, reviews, monitoring and evaluation).
- Finally, owing to historical, systemic and physical barriers, disabled children, especially the severely disabled, can only be part of the inclusion process if they are considered within the mainstream education reform process. In this way, the inclusion processes will be empowered with provisions, not only to cater for educational needs, but also involving a safety net system that ensures sustainable education within the wider spectrum of other needs.

In other words, this study does not recommend any defined model of inclusive education program for the Rwandan children with disabilities; rather, through highlighted cases and

discussed experiences, it proposes a number of considerations and principles for both practitioners and policy makers.

The emerging position of the study thus, suggests a dialogue between the communities (or beneficiaries) and various actors contributing to inclusive activities. Engagement into a dialogue entails both the community and practitioners taking a position where they are able to evaluate each other's challenges and inputs to inclusive initiatives, and a constructive feedback from either side be shared. By privileging a dialogue therefore, the community-based inclusion undertaking would allow support from both experts and local community, whose initiatives would be assured. It is under such a conversation that despite the numerous economic and social limitations and challenges in the remote Karamoja in Uganda and Douenza in Mali (See case study 3), the local people, respective governments and NGOs were able to develop successful educational projects with inclusion perspective. The people's inputs included the promotion of their cultural values, fostering their nomadic way of life, and when these were adopted in the curriculum, they felt part of the educational project to which they owed the obligation of support, thus, the engagement in a dialogue with supportive NGOs and the Government became part of the initiative. In this way, the level of literacy and numeracy was raised considerably, social and basic technological skills found their place in the local curriculum, and appropriate ways of including the most marginalised groups such as girls and disabled children were proposed and developed with the support and means of the local communities.

Our understanding from this study is that every human society is endowed with inherent potential and power to support its own disadvantaged people. These powers are identifiable within the cultural way of life at every grassroots community level. Thus, the study suggests that an inclusive education model building on such potentials is the most sustainable because it draws from the local means and know-how, and is able to understand more accurately the needs of the community. It is on such notions that Fugayerollas' (2000) model of intervention (See Fig. 20 & 21), and proven experiences in remote African villages shared by Ingstad (1997), Vanneste (1997) and Stubbs (2002) above, jointly suggest a revisit to potentials available within families and local communities of disabled children, because they are inherently endowed with cultural mechanisms with which disadvantaged groups find support. The idea being emphasised does not rule out the existence of limitations, rather, it warns that poverty and politically motivated challenges are enormous, and these cannot be overcome without mobilising enhancing and enlisting the support of those who have the first hand experience.

We have pointed out for example hat the government commitment is practically unknown at the Rwandan grassroots community levels (See Fig. 17). Because of this phenomenon, we expressed scepticism about the possible success of the national policy on Inclusive Education and Special Needs Education (SNE/IE), scheduled for this September 2006. We argued that the fact that for such an important policy to appear 17 years after the Child's Right's declaration, 16 years after the Jomtien declarations on Universal Primary Education, and 12 years after the Salamanca statement on inclusion, are all testimonies of a culture of procrastination of fundamental issues in Rwanda. Therefore, given this cultural trend, and the poor channel of communication available among Rwandans as demonstrated by the study, there are no evidences that the due inclusion policy will be correctly translated and quickly transmitted to the grassroots communities. In a way, we underlined the wide gap between the policy making level (organs) and the grassroots community level on issues related to disability and inclusion, or an urgent need for putting in place an effective implementation program able to mediate between the two levels, capable of drawing and maintaining support from both.

In the study, we also stressed policy frameworks and programs that are supportive of inclusive education of disabled children in the neighbourhood schools. The central point however is not about what works best, but rather, about what is socially and functionally capable of generating opportunities, or what imposes barriers and therefore how can the former be useful in counteracting the latter in order to achieve the best possible access (or inclusion) for the disabled children in their neighbourhood school. It has been proposed in the emerging inclusion model in section 11.1 above for example, that rehabilitation centres and schools in the same communities should be able to open doors to each other, in order to foster an integrated education system that is supportive of both the disabled and the non-disabled children in the same setting. However, we argue that the success of such a setting is also dependent on the extent to which both the people in the community and the means available to them are mobilised for the cause. In Rwanda, it may mean how religious organisations are supportive and coordinated for example, how the local leaders and educators are able to understand and support the educational needs of the children with disabilities, how peer groups are enabled to function with disabled youths in mutual support of each other.

We have thus stressed and demonstrated that for ideas about inclusion to gain a foothold within the Rwandan grassroots communities, sensitisation is very crucial. We suggested an approach that responds to questions such as, *who needs to be sensitised about inclusion most? Who can most effectively alter the community's negative ways and impart the positive thinking? How can the community be reached best?* The guiding principle is the need for

transmission of adequate awareness about disabilities and inclusion, and reaching as many people as possible. Accounts on the plausible techniques to reach and change the dominant attitudes in the communities were apparent in a number of previous instances discussed above:

- When the influential old lady who was popular in the community for her skills in local medicine changed her attitude about disability for example, the results sent phenomenal sensitising messages to the whole community, and the local people drastically changed from negative perceptions to total support of the social worker's proposal of appropriate services. The latter's work in sensitisation was made easier (See also the extract in section 7.2.4).

- In the same way, the criteria set (in the study) for the selection of the informants among the social workers, are also examples of channels to be used for sensitisation. They stressed selecting those who are most effective and capable of reaching, understanding and changing the community (See the roles of Innoc & Mama ARU in section 6.1.1). Being religious for example (See sections 7.1-7.3), being disabled or being an aware mother of a disabled child were some of the determinant factors on which criteria to chose effective informants or social workers were based, because these were also means by which the community was reached and understood.

- The link between disability and some dominant religious beliefs in some communities were also found to be influential factors in determining what decisions are taken for disabled children by parents (See section 7.2 & Fig. 12). This phenomenon suggests that sensitisation programs can also be effective if they are integrated within the local religious practices and programs (See the role of ISAK's clergy father in section 7.1).

These and a few other examples in the study, all emphasise the idea that the problem of perception about disability is fundamental and unique in Rwanda, depending on the circumstances and communities, and if the issue of inclusion of the disabled children has to be successful, then an appropriately fitting method of sensitisation has to be devised.

It has to be admitted however, that all the theories and claims discussed above, do not necessarily present the precise scale of the problems that the children with disabilities face, nor any feasible response to their needs, rather, it emphasises the process and procedures that might guide inclusive action within the limits and means of the Rwandan society. In other words, it will be understood that this study reflects strongly on the normative research paradigm, representing an investigative journey through complexities of the Rwandan communities in search of pointers to inclusive phenomena. In a way, we concur with Cohen et al.'s (2003: 22) view that human behaviours in any society are often associated with normative paradigms because they are rule governed, thus, research approaches used in the study were devised in response to the rules that govern the Rwandan society as affirmed by Cohen et al.(2003):

> *"… normative researchers try to devise general theory of human behaviour and to validate them through the use of increasingly complex research methodologies …To them, the basic reality is the collectivity; it is external to the actor and manifest in*

> *society, its institutions and its organisations…the researcher's ultimate aim is to establish a comprehensive 'rational edifice', a universal theory, to account for human and social behaviour"* (p. 23).

It will thus be understood that our study approach has underlined the complex problems that surround a substantial number of children who are excluded from the mainstream Rwandan education and consequently from meaningful participation in the economic, social, political and cultural life of their society, pointing to feasible paths to explore towards their inclusion. We share the argument apparent in the Dakar World Education Forum of April 2000 in its paragraph 19, that the need to address the vulnerabilities of learners who are marginalised and excluded from educational opportunities is urgent (UNESCO, 2000), in its assertion that:

> "*… In order to attract and retain children from marginalized and excluded groups, education systems should respond flexibly… must be inclusive, actively seeking out children who are not enrolled, and responding flexibly to the circumstances and needs of all learners …"* (UNESCO World Education Forum on Education For All, Para. 33).

The idea raised by the extract also calls for studies that are tailored to different environments and situations. However, we recognise that this study has not been able to address the many specific issues related to inclusive developments in Rwandan education. In fact it was established by the present study that the understanding of children's disabilities and related issues are a function of social, cultural and economic factors, and therefore the study does not address many of these. We are aware that an educated mother is likely to be conversant with primary health care (including awareness about disabilities and reproductive health) for example, while non-educated mothers are more likely to be influenced by the traditionally established perceptions about disability. In other words, the assumption that the parents' level of education has a role to play in influencing the kind of services chosen for their disabled children is also founded, and demands to be investigated further (See Appendix B & table 7). Likewise, issues related to specific methods and adapted materials were not looked into. We thus suggest that future studies will have to take care of some of these and the influences they have on disabled children's lives and their subsequent inclusion into the neighbourhood schools.

Our position in this study thus, is in line with the view that 'inclusive education' is a transverse issue which regards all marginalised groups of learners, and in the Rwandan situation, it cuts across all education programs, ranging from early childhood education to adult education, teacher education and curriculum development, as well as in spheres related to culture and social development.

References

Adams, M.D., & Hamm, E.M. (1994). *Co-operative learning: Critical thinking and Collaboration across the curriculum.* Springfield: Charles C. Thomas.

Adler, P.A., & Adler, P. (1994). Observational techniques. In N.K. Denzin & Y.S. Lincoln (Eds.), *Handbook of Qualitative Research,* (pp. 377-92). London: Sage Publications.

Ainscow, M. (1999). *Understanding the development of inclusive schools*. London: Falmer Press.

Ainscow, M. (2000). Reaching out to all learners: Some lessons from international experience. *School Effectiveness and School Improvement* 11(1), 1-9.

Ainscow, M. (2005). From special education to effective schools for all. *Keynote Presentation at ISEC 2005,* Glasgow: ISEC.

Alasuutari, P. (1995). *Researching culture: Qualitative method and cultural studies,* London: Sage.

Allen, V.L. (1976). *Children as teachers*. London: Academic Press.

Allen, V. L. & Feldman, S. R. (1976). Studies on the role of tutors: In Allen, V. (ed.), *Children as Teachers*. London: Academic Press.

Alton, S. (1998). Differentiation not discrimination. *The British Journal of Learning Support*. 13(4), p.167-173.

Anderson, T. W. (1998) .The Changing nature of global change: In D. Hicks, & R. Slaughter (eds.), *World Year Book of Education,* (pp. 37-49). London: Kogan Page.

Anghion, A. (2002). *Living together again in Rwanda? Gacaca tribunal.* http://www.frif.com/new2002/gac.html. (Retrieved June 4, 2004).

Arber, S. (1993). 'The research process', in N. Gilbert (ed.), *Researching social life*, (pp. 32-50). London: Sage.

Arnove, R. F. & Torres, C. A. (1999*). Comparative education 'the dialectic of the global and the local'*. Oxford: Rowman & Little field Publishers.

Asikainen, T. & Coutts, G. (2005). *Brief encounters – Kohtaamisia animation project at Meri-Rastila primary school.* Glasgow: ISEC.

Astuto, A. T. & Clarke, L. (1986). Achieving effective schools. In E. Hoyle & A. McMahon, (eds.), *World Year Book of Educational Management,* (pp. 57-72). London: Kogan Page.

Atkinson, P. A. (1990). *The ethnographic imagination: textual construction of reality.* London: Routledge.

Atkinson, P. A. (1992). 'The ethnography of a medical setting: Reading, writing and rhetoric', *Qualitative Health Research*, 2(4) 451-74.

Baez, M. (1999). Developing inclusive education in Chile. In H. Daniels & P. Garner (eds.),

World Year Book of Education, (pp. 148-159). London: Kogan Page.

Baine, D. (1993). Special education in developing countries: In P. Mittler, R., Brouillette, D. Harris (eds.), *World Year Book of Education* (pp. 57-75). London: Kogan Page.

Banks, J. (1997) *Educating citizens in a multicultural society.* New York: Teachers College Press.

Barnes, C. (1991). *Disabled people in Britain and discrimination*. London: Hurst & Co.

Barnes, C. & Mercer, G. (2001). The politics of disability and the struggle for change. *In* , L. Barton, (Ed.). *Disability, Politics and the struggle for change* (pp. 67-99). London: David Fulton.

Barton, L. (1999). Market ideologies, education and challenges for inclusion. In H. Daniels & P. Garner (eds.), *World Year Book of Education* (pp. 54-62). London: Kogan Page

Barton, L. (2001) (Ed.). *Disability, politics and the struggle for change*. London: David Fulton.

Barton, L. & Slee, R. (1999). Competition, selection and inclusive education. *International Journal of Inclusive Education*. 3(1), p.3-12.

Bazivamo, C. (2002). *Protection des sols et de l'environnent au Rwanda. Approaches Socio-Economiques*. Kigali: Select Graph.

Beck, S.E. (1995). Cooperative learning and feminist pedagogy: A model for classroom instruction in nursing education. *Journal of nursing education*. 84(5), 222-227.

Beiner, R. (ed.) (1995). Theorizing citizenship. Albany: State University of New York Press.

Best, T. & McCall, C. (1993). Planning mainstream education services for children: In P. Mitler, R. Brouillette & D. Harris (eds.), *World Year Book of Education* (pp. 65-75). London: Kogan Page.

Biott, C. & Easen, P. (1994). *Collaborative learning in staffrooms and classrooms*. London: David Fulton.

Bishop, G. (1986). *Innovation in education*. London: MacMillan.

Bell, W. (1998). Understanding the future fields: in D. Hicks & R. Slauter (eds.), *World Book of Education* (pp.15-26). London: Kogan Page.

Bogdan, R. G. & Biklen, S.K. (1992). *Qualitative research for education* (2nd edition). Boston, MA: Allyn & Bacon.

Bramston, P.; Bruggerman, K. & Pretty, G. (2002). Community perspectives and subjective quality of life. *International Journal of Disability, Development and Education,* 49 (4), 385 – 397.

Bruin, E. (2005). *Report of Komera centre for the disabled children*. (Unpub.). Kigali: MINEDUC.

Bryman, A. (1988). *Quantity and quantity in social research*. London: Unwin Hymn.

Buber, M. (1947). *Between man and man,* London: Kegan Paul.

Burgess, R.G. (1984). *In the field. An introduction to field research*. London: Unwin Hyman.

Carey, K. (2000), (Editorial). *The British Journal of Visual Impairment*. 18(1).

Charlton, J.I. (2000). *Nothing about us without us. Disability oppression and empowerment*. Los Angeles: University of California Press.

Christie, P. (1999). Inclusive education in South Africa. In H. Daniels & P. Garner (eds.), *World Year Book of Education* (160-166). London: Kogan Page.

Ciabattari, L. (2000). Rwanda gambles on renewal, not revenge. *Women's e News.* http://www.womenenews.org/article.cfm/dyn/aid/301/context.archive. (Retrieved January 27, 2005).

Cicourel, A. (1964). *Methods and measurement in sociology.* New York: Free Press.

Cohen, L., Manion, L. & Morrison, K. (2003). *Research Methods in Education.* London: Routledge falmer.

Coles, R. (1989). *The call of stories: Teaching and the moral imagination.* Boston: Houghton Muffin.

CSIE, (2002). *Index for inclusion*: *What is inclusion*. Bristol: CSIE. http://inclusion.uwe.ac.uk/csie/csiefaqs.htm (Retrieved, 19/04/04).

Daly, E. (2002). Between punitive and reconstructive justice: The gacaca courts in Rwanda. *International law and politics,* 34, 355 -396.

Daniels, H. & Garner, P. (Eds.) (1999). *World Year Book of Education*. *Inclusive Education*. London: Kogan Page.

Denzin, N.K. (1989). *Interpretive interactionism.* New-bury Park, CA: Sage.

Denzin, N.K. & Loncoln, Y.S. (Eds.) (2000). *Handbook of qualitative research*. London: Sage.

Denzin.N.K. & Lincoln,Y. (Eds.) (2000). *Discipline and practice of qualitative research. Handbook of Qualitative Research*. London: Sage.

Daunt, P. (1993). The new democracy of Central and Eastern Europe: In P. Mitler, R. Brouillette & D. Harris (eds.*), World Year Book of Education* (pp. 89-100). London: Kogan Page.

Davies, L.K. (1981). *Instructional techniques*. New York: McGraw-Hill Book Company.

Davies, L. (1999). Comparing definitions of democracy in education. *Compare.* 29(2)

Devlieger, P. (2001). *Surviving with a disability: Strategies of production and reproduction in South and North.* http://www.phos.be/Engels/basisframe_engels.htm. (Retrieved April 17, 2004).

Dewey, J. (1897). My pedagogic creed. *The school journal,* LIV(3), pp. 77-80.

Dewey, J. (1929). *Experience and Nature*, New York: Dover.

Donnelly, J. (2000).Why do people choose to go into teaching? *Managing Schools Today*.

9(5), 37-39.

Douglas, J.D. (1985). *Creative interviewing*. Beverley Hill CA: Sage.

D f I D. (2000). *Disability, poverty and development.* London: DfID.

Donnelly, J. (2000).Why do people choose to into teaching? *Managing Schools Today*. 9(5) 37-39.

Drumbl, M. (2000). Punishment, post-genocide: From Guilt to Shame to Civic in Rwanda. *New York University Law Review* (75), 1221-1323.

Dyson, A. (1999). Inclusions and Inclusion: Theories and Discourses. In H. Daniels & P. Garner. *World Year Book of Education* (pp. 36-53). London: Kogan Page.

Dyson, A. (2004). Inclusive education: A global agenda? *Japanese Journal of Special Education.* 41(6), 613-625.

EENET, (2003). *Challenging the exclusion of blind students Rwanda. Manchester (www), (2003)* http://www.eenet.org.uk/newsletters/news7/page4.shtml (Retrieved 17/Oct./2004).

Egelund, N. (1997). The use of qualitative methods. In *UNISE Bulletin.* Kampala: Uganda. 23(7), 8-14.

Eisenhart, M.A. and Howe, K.R. (1992). Validity in educational research. In M.D. LeCompte, W. L. Millroy & J. Preisle (eds.), *The Handbook of Qualitative Studies in Education* (pp. 643-80). New York: Academy Press.

ESCR, (1976). *International covenant on economic, social and cultural rights.* Geneva: ESCR.

Farrell, M. (2000). Educational inclusion and raising standards. *Journal for National Association for Special Educational Needs*. 27(1), 5-11.

FAWE, (2002). *Gender disparities in Rwandan education.* (Unpub. Techn. report). Kigali: Ministry of Education.

Feiler, A. & Howard, G. (1999). Threats to inclusive movement. *British Journal of Special Education*. 26(3) 147-151.

Feldman, G.R., Sheehan, D.L. & H. Allen (1976). Children tutoring children: in C. Biltt & D. Easen (eds.). *Collaborative Learning in Staffrooms and Classrooms* (pp. 27-35), London: David Fulton.

Finkenflügel, H. (2004). *Empowerment to differ. Stakeholders' influences in Community-Based Rehabilitationon.* Amsterdam: Vrije Universiteit.

Fitzgibbon, R. E. (1981). *Making educational decisions.* New York: Harcourt Brace Jovanovitch.

Flicks, U. (1992). Triangulation revisited: Strategy of validation or alternative? *Journal for social behaviour*, 22, 175-195.

Fontana, A. (1977). *The last frontier: The social meaning of growing old.* Beverly Hills, CA:

Sage.

Fougeyrollas, P. (2002). L'évolution conceptuelle internationale dans le champ du handicap: Enjeux socio-politiques et contributions québécoises, *Pistes,* 4(2), 147-160.

Freire, P. (1972). *Pedagogy of the oppressed*. Harmondsworth: Penguin.

Freire, P. (1995). *Pedagogy of hope. Reliving pedagogy of the oppressed*. New York: Continuum.

Fullan, M. (1986). The management of change. In E. Hoyle & A. McMahon, (eds.), *World Year Book of Educational Management* (pp 73-86). London: Kogan Page. Gabriel, Y. (1998). The use of stories. In G. Symon, & C, Cassell (eds.). *Qualitative Methods And Analysis in Organizational Research,* (pp. 135-160). London: Sage.

Gall, M. D., Borg, W. R. & Gall, J. P. (1996). *Educational research: An introduction.* London: Longman.

Galton, M. & Williamson, J. (1994). *Group work in primary classrooms*. New York: Routledge.

Geertz, C. (ed.) (1973). *The interpretation of cultures.* New York: Basic Books.

Gill. C. (1999). Invisible ubiquity: The Surprising relevance of disability issues in evaluation. *American Journal of Evaluation*, 20(2), 279-287.

Glaser, B.G., & Straus, A.L. (1967). *The discovery of grounded theory*. Chicago: Aldine.

Glover, A., Miller, D., Gambling, M., Gough, G. & Johnson, M. (1999). Effectiveness of subject leadership in secondary schools. *School Leadership and Management*. 11(3), 7-13.

Goodlad, S. & Hirst, B. (1989). *Peer tutoring*. London: Kogan.

Goetz, J. P. & LeCompte, M.P. (1984). *Ethnography and qualitative design in educational research*. London: academy.

Goffman, E. (1974). *Frame Analysis.* New York: Harper & Row.

Gronn, P. (1986). Politics, power & management of schools. In E. Hoyle & A. McMahon (eds.), *World Year Book of Educational Management* (pp. 21-34). London: Kogan Page.

Guba, E.G. (1981). Criteria for assessing the trustworthiness of naturalistic inquiries. *Educational Communication and Technology Journal,* 29(8), 75-91.

Guba, E.G. & Lincoln, Y.S. (1994). Competing paradigms in qualitative research. In N.K. Denzin & Y.S. Loncoln (Eds.). *Handbook of Qualitative Research (*pp. 105-117). Thousands Oaks. CA: Sage.

Gubrium, J. (1997). *Living and dying in Murray Manor*, Charlottesville, VA: University Press of Virginia.

Gundara, J. (1997). Religion, secularism and values of education: In D. Courby, J. Gundara, & C. Jones (eds.). *World Year Book of Education,* (pp. 18-25). London: Kogan Page.

Gundara, J. (1999). The way forward: in M. Freeman (ed.), *International Journal of Children's Rights, 3(8), 5-9*. London: Kluwer Law International.

Hammad, S. (1999). Words on paper or reality for children: in M. Freeman *International Journal of Children's Rights*. London: Kluwer Law International. 7(3), 215-219.

Hammersley, M. (1990). *Reading ethnographic research: A critical guide*. London: Longmans.

Hammersley, M. (1992). *What's wrong with ethnography? Methodological explanations,* London: Sage.

Harber, C. & Davies, L. (1997). *School management and effectiveness in developing countries*. London: Cassell.

Harris, S. & Beyerlein, M.M. (2003). Navigating the team - based organisation journey. In M.M. Beyerlein, D.A. Johnson ; S.T. Beyerlein, (eds*). Team – Based Organisations (*pp.55-61). London: Jai an Imprint of Elsevier science.

Harris, A., Day, C. & Hadfield, M. (2000). *Effective leadership, challenging the orthodoxy*. 14(1), 9-10.

Henkin, B. A., Cistone, J.P. & Dee, R. J. (1999). Conflict management strategies of principals in site managed schools. *Journal of Educational Administratio,.38(2), 7-11*.

Heinman, T. (2000). Friendship quality among children. *Journal of Intellectual and Developmental Disability,* 25(1), 1-12.

Hegarty, S. (1993). Education of children with disabilities. In: P. Mitler; R. Brouillette, & D. Harries (eds.*), World Year Book of Education: Special Needs Education*. (pp. 16-27). London: Kogan Page.

Helander, E. (1993). *Prejudice and dignity: An introduction to Community-Based Rehabilitation.* New York: UNDP.

Helander, E.; Wiman, R. & Westland, J. (2002). *Meeting the needs of people with disabilities—New approaches in the health sector.* New York: World Bank.

Henderson, H. D., Hicks & R. Slaughter (Eds.) (1998). *Future education. World Year Book of Education* (pp.5-14). London: Kogan pages.

Hertz-Lazarowitz, R. & Miller, N. (ed.). (1992). *Interaction in co-operative groups. New York*: Cambridge University.

Hills, F.W. (1994). *Learning through discussion*. London: Sage Publication.

Hitchcock, G. & Hughes, D. (1989). *Research and the teacher*. London: Routledge.

Holst, J. (1999). The Welfare state and individual freedoms. In H. Daniels & P. Garner (Eds.). *World Year Book of Education* (pp. 180-193). London: Kogan Page.

Holstein, J. & Gubrium, J. (1995). *The active interview,* Thousand Oak, CA: Sage.

Hoyle, E. (1986). Management of schools. In E. Hoyle & A. McMahon.(eds.), *World Year*

Book of Educational Management (pp. 87-113). London: Kogan Page.

Hopkins, D. (2001). *School improvement for real*. Lewes: Falmer Press.

Hopkins, D., Ainscow, M. & West, M. (1994*). School improvement in an era of change.* London: Cassell.

Hoyle, E.(1986). *Politics of school management.* London: Hodder & Slaughton.

Howells, K. & Piggott, P. (1992). Modified Keller system. In G. Gibbs & A. Jenkins (eds.), *Teaching large classes* (pp. 13-19). London: Kogan Page.

Hust, P. & Rodwell, S. (1986). Training for school management in the third world: In Hoyle, E. & McMahon, A. (eds.). *World Year Book of Education,* (pp. 68-79). *The Management Of Education*: London: Kogan Page.

ILO (1995). *The framework of ILO action against poverty*: *The policy agenda and ILO*. Geneva: International Institute of Labour Studies.

Ingstad, B. (1997). *Community Based Rehabilitation in Botswana. The myth of the hidden children.* Queenston: The Edwin Mellen Press.

Jackings, L.; Morris, L. & Fitz-Gibbon, T.C. (1997). *Planning for data collection.* London: Sage.

Jackson, D. S. (2000). School improvement journey. *School Leadership & Management,* 20(1), 61-70.

Johnson, J. (1975). *Doing field research*. New York: Free Press.

Johnson, W.D. & Johnson, R.T. (1989). *Cooperation and competition*: *Theory and research.* Edna, Mn: International Book.

Johnson, W.D. & Johnson, R.T. & Smith, K. (1991). *Cooperative learning: Increasing college faculty instructional productivity*. Washington DC: The George Washington University.

Johnson, W.D. & Johnson, R.T. (1992). Positive interdependence: In R. Hertz - Lazarowitz. & N. Miller (eds.), *Interaction in co operative groups* (pp. 23-45). New York: Cambridge University.

Jones, P. & Vetmeyer, H. (2002). *Globalisation unmasked: Imperialism in the 21st Century*. London: Zed Books.

Jones, C. (1997). Issues in intercultural education: In D. Courby, J. Gundara, & C. Jones, (eds.). *World Year Book of Education* (pp. 1-6. London: Kogan page.

Kagame, A. (1954). *Les Organisations socio-familiales de l'ancien Rwanda*. Bruxelles: Institut Royale Colonial Belge. Gembloux. J. Duculot.

Karangwa, E. (2000). *Report on education of disabled children in Rwanda*. (Unpub.Tec. Rep.). Kigali: Ministry of Education.

Karangwa, E. (2001). Mental disability – A special education challenge. *The New Times, Bi Weekly,* (247), p. 22.

Karangwa, E. (2004). *Developments in the situation of the people with disabilities in Rwanda. PHOS-Newsletter inclusive* of 2004-10-15. http://www.phos.be/Engels/basisframe_engels.htm (Retrieved November 30, 2004)

Karangwa, E., Ghesquière, P. & Devlieger, P. (2005). *The Grassroots community in the vanguard of inclusion: The post-genocide Rwandan perspective*. *Reconsidering prospects for young people with disabilities.* (ISEC Paper). Glasgow: University of Strathclyde.

Kassam, Y. (1995). 'Julius Nyerere' in Z. Morsy (ed.). *Thinkers on education*, Paris: UNESCO.

Kerig, K.P. (2001). Conceptual issues in family observational research. In K. P. Kerig & M.K. Lindahl, *Family Observational Coding Systems* (pp. 1-21). London: Lawrence Erlbaum Associates.

Kerzner, D. L. & Gartner, A., (1999). Inclusive Education: A requirement of Democratic Society: in H. Daniels & P. Garner (eds.), *World Year Book of Education* (pp. 55-71). London: Kogan Page.

Kirk, J. & Miller, M. (1986). *Reliability and validity in qualitative research*. London: Sage.

Kisanji, J. (1993). Special education in Africa: In P. Mitler, R. Brouillette, D. Harris (eds.), *World Year Book of Education* (pp. 158-171). London: Kogan Page.

Kisanji, J. (1995). Growing up disabled. In P. Zinkin & H. McConachie (eds.), *Disabled Children and Developing Countries* (pp. 183 -199). London: Mac Keith & Press Cambridge University Press.

Klug, F. (2000). *Values for godless age.* Harmondsworth: Peguin.

Kristensen, K. (1995) (Ed.). Standard rules and equalisation of opportunities. *UNISE Bulletin*, 8(8), 1-2.

Kristensen, K. (1999). *Report for special needs education and related services in Rwanda.* (Unpub. Techn. report) Kigali: Ministry of Education.

Kristensen, K. (2000). *Report for special needs education and related services in Rwanda.* (Unpublished technical report) Kigali: Ministry of Education.

Kvale, S. (1996). *Interviews*. London: Sage Publications.

Lancaster, C. (1999). *Aid to Africa. So much to do, so little done*. Chicago: University of Chicago Press.

LeCompte, M. & Preissle, J. (1993). *Ethnography and Qualitative Design in Educational Research* (2nd Edition). London: Academy Press Ltd.

Lewis, I. (2004). Seven years of conversations: An analysis of EENET's correspondence records 1997-2004. *Enabling Education Network*. EENET Special Edition. Manchester: Manchester University.

Lincoln, Y. S. & Guba, E. G. (1985). *Naturalistic inquiry*. Bevery Hills: Sage

Publications.

Lindsey, R. B., Robins, K. N., & Terrell, R. D. (2003). *Cultural proficiency: A manual for school leaders* (2nd ed.). Thousand Oaks, CA: Corwin Press.

Little, A., Hoppers, W. & Gardener, R. (1994). *Beyond Jomtien*. London: MacMillan.

Lloyd, C. (1999). Excellence for all children: In Freeman, M. (ed.) *International Journal of Children's Rights*. London: Kluwer Law International.

Lofland, J. (1971). *Analysing social settings.* Belmont, CA: Wadsworth.

Lysack, C, & Kaufert, J. (1994). Comparing the origins and ideologies of the independent movement and community based rehabilitation. *International Journal of Rehabilitation Research*. 17(3), 231-240.

Markee, N. (1997). *Managing curricular innovation*. Cambridge: Cambridge University Press.

Marquet, C. (1954). *Aide – Mémoire d' éthnologie Africaine*. Bruxelles: Institut Royale Colonial Belge. Gembloux. J. Duculot.

Marshall, T. (1950). *Citizenship and social class*. Cambridge: Cambridge University Press.

Martin, M. & Willower, D.J. (1998). Is your 'Head' managing? *A.T.L Report*. 21(3), 3-23.

Maruyama M. G. Knechel, S. & Petersen,R. (1992). The impact of role reversal: in R. Hertz-Lazarowitz & N. Miller (eds.). *Interaction in co operative groups* (pp.55-63). London: Cambridge University.

Mason, J. (1996). *Qualitative researching.* London: Sage.

McCarthey, M. & McMahon, S. (1992). From convention to invention. In R. Hertz-Lazarowitz & N. Miller (eds.), *Interaction in cooperative groups,* (pp. 71- 89). London: Cambridge University.

McMahon, A. (1986). *School self review.* In E. Hoyle, & A. McMahon (eds.), *World Year Book of Educational Management* (pp.100-111). London: Kogan Page.

Mead, M. (1984). Neighbourhood and human needs. Children's environment. *Education Research Quaterley,* 1(4), 3-5.

Melby, J.N. & Conger, R.D. (2001). The Iowa family interaction rating scale. In K. P. Kerig & M.K. Lindahl, *Family Observational Coding Systems* (pp. 33-58). London: Lawrence Erlbaum Associates.

Merriam, S.B. (1998). *Case study research and case study applications in education*. San Francisco: Jassey -Bass.

Mertens, M.D. (2003). Mixed methods and the politics of human research: The transformative – emancipatory perspective. In A. Tashkkori & C. Teddle (Eds.), *Handbook of Mixed Methods and Social Behavioural Research* (pp. 133-188). London: Sage Publications.

Miles, M. & Huberman, A. (1984). *Qualitative data analysis*, London: Sage.

Millis, J.B. (1990). Enhancing cooperative learning through cooperative small groups. *Continuing Higher Education Review*, 55(3), 470-75.

Mills, J. B. & Cottel, C. (1998). *Co-operative learning for high education*. Phoenix: Oryx Press.

Mittler, P. (1993). Childhood disability: A global challenge. In: P. Mitler, R. Brouillette & D. Harries. (eds.*), World Year Book of Education: Special Needs Education*. (pp. 1-15) London: Kogan Page.

Morgan, D. (1988). *Focus groups as qualitative research*. Newbury Park, CA: Sage.

Morrison, K.R.B. (1993). *Planning and accomplishing school-centred evaluation*. Norfolk: Peter Francis Publishers.

Mugarura, K.V. (2002). Gacaca should be permanent. *The New Times Bi- Weekly*. 348, 1 - 4.

Munyatwari, E. (1988). *Enseignement et dévelopement au Rwanda. Une interdependence à planifier.* Leuven: KU Leuven.

Nagar, J.P. (1998). Towards the 21st century: challenges for community based rehabilitation in Asia and the pacific region. Asia pacific disability rehabilitation journal, (9), 1.

Nieto, S. (2004). *Affirming diversity: The socio-political context of multicultural education* (4th ed.). Boston: Allyn & Bacon.

Niyibizi, P. (2006), *Echoes of Time*. *The New Times*. *http://www.newtimes.co.rw/index.php?option=com_content&task=view&id=4028&Itemid=3*5. (Retrieved on Friday, 07 April 2006).

Nothomb, D.P.B. (1965). *Un humanisme Africain. Valeurs et pierres d'Atteinte*. Bruxelles: Lumen Vitae.

Nyerere, J. (1998). *Lifelong learning and informal education.* Oxford: Mark K. Smith

Nyerere, J. (1978). "Development is for man, by man, and of man": The Declaration of Dar Es Salaam' in B. Hall & J. R. Kidd (eds.). *Adult Learning: A design for action*, (pp. 33-56). Oxford: Pergamon Press.

Nyerere, J. (1968). *Freedom and Socialism. A Selection from Writings and Speeches, 1965-1967*, Dar Es Salaam: Oxford University Press.

Obidegwu, C. (2003). *Rwanda: The search for post-conflict socio-economic change, 1995-2001*. Africa Region Working Paper Series No. 27678. New York: World Bank.

Obura, A. (2005). *Planning a systemic education response to the needs of orphans and other vulnerable children (OVC) in Rwanda,* (Unpub. Techn. report). Kigali: MINEDUC.

Oppenheim, A.N. (1992). *Questionnaire design, interviewing and attitude measurement.* London: Printer Publishers Ltd.

Osler, A. & Starkey, H. (2005). *Changing citizenship democracy and inclusion in education.*

New York: Open University press.

O'Toole, B. (1993). Community-Based Rehabilitation. In: P. Mittler, R. Brouillette & D. Harries. (eds.*), World Year Book of Education: Special Needs Education*, (pp. 1-15). London: Kogan Page.

Patton, M.Q. (1980). *Qualitative evaluation methods.* Beverly Hills: Sage Publications.

Preece, J. (1999). Difference and discourse of inclusion. *The Journal of the Institute for Access Studies.* 1(3), 16-23.

Republic of Rwanda (1995). Economy (www.), http://www.rwandanet/economy. (Retrieved 12, March, 2006).

Republic of Rwanda (1998). *Educational sector strategic policy plan* (ESSP*) 1998-200).* Kigali: MINEDUC.

Republic of Rwanda (2001a). *Community development policy.* KIGALI: Ministry of Local Government and Social Affairs.

Republic of Rwanda (2001b). *Organic law setting up Gacaca jurisdictions and organizing prosecutions for offences constituting the crime of Genocide, or crimes against humanity*. Official Gazette. KIGALI: Prime Minister's Office.

Republic of Rwanda (2002a). *The national policy for orphans and other vulnerable children in Rwanda*. Kigali: Ministry of Local Government and Social Affairs.

Republic of Rwanda (2002b). *The national program of poverty reduction*. KIGALI: Ministry of Finance and Economic Planning.

Republic of Rwanda (2002c). *Plan of action for education in Rwanda. With the support of UNESCO & UNDP.* Kigali: Ministry of Education.

Republic of Rwanda (2003a). *Education For All (EFA): Plan of Action.* KIGALI: Ministry of Education.

Republic of Rwanda (2003b). *The national constitution of the Republic of Rwanda. Official Gazette*. KIGALI: Prime Minister's Office.

Republic of Rwanda (2003c). *National population policy for sustainable development of Rwanda.* Kigali: Ministry of Health.

Republic of Rwanda (2004a). *3rd Census 2002 of the population and housing of Rwanda*. Kigali: Ministry of Finances and Economic Planning.

Republic of Rwanda (2004b). *Indicators of the Rwandan education system.* http://www.mineduc.gov.rw/minenglish.htm (Retrieved on 12th March, 2006).

Republic of Rwanda (2006). *Educational Sector Strategic Policy Plan* (ESSP*) 2006-2010*

(Draft). Kigali: MINEDUC.

Rogers, E. M. (1983). *The diffusion of innovations*. London: Macmillan.

Rutter, M. & Rutter, M. (1992). *Developing minds. challenge and continuity across the life span*. London: Penguin.

RzoSka, A. (2000). Attitudes, beliefs and behaviours: Tomorrow's schools. *Journal of Educational Administration,* 38(2), 7-14.

Sacks, H. (1992). *Lectures on conversation,* Oxford: Blackwell.

Salmon, P. & Claire, H. (1984). *Classroom collaboration*. London: Routledge.

Samoff, J. (1990). Modernising a socialist vision: Education in Tanzania, in M. Carnoy & J. Samoff (eds.). *Education and social transition in the third world*, (pp. 3-12). Princeton NJ: Princeton University Press.

Sangano, K., Nsanzabaganwa, S. & Mpyisi, E. (2003). *Rwanda, country position paper*. Regional workshop on ageing and poverty in Dar Es Salaam. Kigali: UNDP.

Saran, R. & Taylor, P. (1999). The leadership and governance of schools. *Management in education*, 13(1), 9-10.

Sarason, R. L. (1974). *The Psychological sense of community: Perspectives for community psychology.* San Francisco: Jossy-Bass.

Saunders, L. (1999). Who or what is school self-evaluation for: *School Leadership & Management,* 19(4), 5-10.

Schostak, J. (2002). *Understanding, designing and conducting qualitative research in education. Framing the project*. Buckingham: Open University Press.

Shann, H. M. (1999). *Academics and a culture of caring. School effectiveness and school improvement .10(4), 390-413*.

Silverman, D. (1993). *Interpreting qualitative data: Methods for analysing talk, text and interactions*, London: Sage.

Silverman, D. (2000). *Doing qualitative research: Handbook.* London: Sage Publications.

Simbotta, S. (1997). *An investigation into the teaching practices in large classes in Malawi*. (M A Thesis). Birmingham: University of Birmingham.

Singleton, R., Straits, B., Straits, M. & McAllister, R. (1988). *Approaches to social research*, Oxford: Oxford University Press.

Skjørten, M. D. (2001). Towards inclusion and enrichment. In B. H. Johnsen & M. D. Skjørten (Eds.), *Education – special needs education: An introduction.* Oslo: Unpublished.

Slavin, R.E. (1995). *Cooperative learning: Theory, research and practice* (2nd ed.). Boston: Allyn & Bacon.

Slee, R. (1999). Inclusive education and its effects on schooling: in H Daniels. & P.

Garner (eds.), *World Year Book of Education* (pp. 194-206). London: Kogan Page.

Spradley, J.P. (1979). *Ethnographic interview*. New York: Holt, Rienhart & Winston.

Spiro, R.J.; Schmitz, W.P.; Samarapungavan, J.G. & Boerger, A.E. (1987). Knowledge acquisition for application: Cognitive flexibility and transfer in complex content domain. In B.C. Britton (Ed.), *Executive control processes* (pp. 177-199). Hillsdale, NJ: Lawrence Erlbaum.

Stake, R. E. (1994). Case studies. In N.K. Denzin & Y.S. Loncoln (Eds.). *Handbook of Qualitative Research* (pp. 236-247). London: Sage Publications.

Stake, R. E. (1988). Case study method in educational research. In R.M. Jaeger (Ed.). *Complementary methods for research in education* (pp. 253- 278). Washington D.C: American Research Association.

Stiglitz, J.E. (2002). *Globalisation and its discontents*. London: Penguin Press.

Stone, E. (ed.) (1999). *Disability and development in the majority world*. Leeds: The Disability Press.

Stone, E. (2001). A complicated struggle: Disability, survival and social change in the majority world. In M. Priestely (ed.), *Disability and the life course: Global Perspectives* (pp. 60-76). *Cambridge*: Cambridge University Press.

Stratford, B. & Hannah N. (2000). People with disabilities in China: Changing outlook—New solutions-growing problems. *International Journal of Disability, Development and Education,* 47(1), 7-13.

Strauss, L. A. (1988). *Qualitative analysis for social scientists*. Cambridge, N.Y. Cambridge University.

Strauss, A. L. & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques.* Newbury Park CA: Sage.

Stubbs, S. (1994). *Critical review of the literature relating to the education of disabled children in developing countries*. London: SCF.

Stubbs, S. (2002). *Inclusive education where there are few resources*. London: Atlas Alliance.

Suubi, P. S. (2003). *Towards inclusive schools in Rwanda: The Experiences of Gahini High School (Unpublished MA Thesis).* Oslo: University of Oslo.

Swain, J., Gillman, M. & French, S. (1998). *Confronting disabling barriers: Towards Making organisations accessible.* Birmingham: Venture Press.

Swets & Zeitlinger (1999). School effectiveness and school improvement: in P. M. Bert & Creemers & D. Reynolds (eds.). *School Effectiveness & School Improvement.* 10(4), 52-70.Taylor, P. (1993). *The texts of Paulo Freire.* Buckingham: Open University Press.

Taylor, P. (1993). *The texts of Paulo Freire*. Buckingham: Open University Press.

Thomas, A. & Allen, T. (Eds.). (2000). *Poverty and development*: *Into the 21st Century*. Oxford: Oxford University Press.

Thomson, R.G. (1997). *Extraordinary bodies: Figuring physical disability in American culture and literature.* New York*: Columbia University Press.*

Thomas, P. (2005). *Mainstreaming disability in development; Rwanda Country Report*. London: KaR.

Thomas, M.J. & Thomas, M. (1998). Controversies on some conceptual issues in community-based rehabilitation. *Asia pacific disability rehabilitation journal*, (9) 1.

Thomas, M. & Thomas, M. J. (2000). Enhancing community participation in programmes in developing countries. *Asia pacific disability rehabilitation journal*, (10) 1. Bangalore: National Printing Press.

Tony, J. (2005). 'Citizenship, youth work and democratic renewal', *The encyclopaedia of informal education*. www.infed.org/association/citizenship_youth_work_democratic_renewal. (Retrieved on 7 July 2005).

Turmusani, M. (2003). *Disabled people and economic needs in developing world. A Political perspective from Jordan.* Hampshire: Ashgate.

UN (1993). *Standard rules on the equalization of opportunities for people with disabilities.* New York: UN.

UNESCO (1994). *The Salamanca statement and the framework for action on special needs education.* France (www), 1994 http://www.ovids.ac.uk/ovidweb.ovidwed.cg.i, (Retrieved 27/April/2000).

UNESCO (2001). *The open file on inclusive education*. Paris: UNESCO.

UNESCO (2003). *Overcoming exclusion through inclusive approaches in education.* Paris: UNESCO.

UNICEF (2003). *At a glance: Rwanda real lives. http://www.unicef.org/infobycountry/rwanda_20343.html.* (Retrieved April 17, 2004).

UNISE Bulletin (1995). *Education. A right for all*. Kampala: UNISE

UPIAS (1976). *Fundamental principles of disability.* London: Sage.

Van de Grift, W. & Houtveen, A. A. M. (1999). Educational leadership and pupil achievement in primary education. *School Effectiveness and School Improvement*. 10(4), 373-387.

Van de Walle, N. (2001). *African economies and the politics of permanent crisis 1979 - 1999*. London: Cambridge University Press.

Vanneste, G. (1997). CBR in Africa: A critical review of the emerging scene. *Asia Pacific*

Disability Rehabilitation Journal, 8(2), 34-37.

Veale, A.; Quigley, P.; Ndibeshye, T. & Nyirimihigo, C. (2001). *Struggling to survive: Orphan and community dependent children in Rwanda.* Kigali: MINALOC.

Vogt, P.W. (1999) *Dictionary of statistics and methodology*. London: Sage Publications.

Wagner, L. (1982). *Peer teaching, historical perspective*. London: Greenwood Press.

Watts, M. & Ebbutt, D. (1987). More than the sum of a part: research methods in group interviewing. *British Educational Research Journal*, 13(1), 25-34.

Warnock, H. M. (1981). *Report of the committee of inquiry into education of handicapped children and young people*. London: HMSO.

Weightman, J. (1998). Effecting change in schools - Whole school approach. In *A*. Feiler, & G. Thomas (eds.). *Planning Special Needs* (pp. 5-11). Hemel Hempstead: Simon & Schuster.

Willower, J. D. (1986). *Organisation theory & management of school.* In E. Hoyle & A. McMahon (eds.). *World year book of education. The management of education* (pp. 29-44), London: Kogan Page.

Wilson, N. & McLean, S. (1994). *Questionnaire design: A practical introduction*. Newton Abbey: University of Ulster Press.

Wiman, R., Helander, E. & Westland, J. (2002). *Meeting the needs of people with Disabilities. New approaches in the health sector.* Washington, D.C.: World Bank.

Whittaker, J. & Kenworthy, J. (1995). *The struggle for inclusive education – A struggle against educational apartheid.* Bolton: Bolton Institute of Higher Education.

Woods, P. (1986). Inside schools: Ethnography in educational research. London: Routledge.

World Bank (2003a). *A CDF approach to conflict-affected countries lessons from a roundtable discussion*. New York: World Bank.

World Bank (2003b). *Rebalancing resources to accelerate post-conflict development and poverty reduction*. *Education in Rwanda report No. 26038-RW*. New York: World Bank.

World Bank (2004a). *Rwanda poverty reduction strategy paper*. *Annual progress and joint staff assessment report No. 28350*. New York: World Bank.

World Bank (2004b). *Rwanda: Country assistance evaluation report No. 27568-Rwanda*. Africa Region Working Paper Series New York: World Bank.

World Bank (2004c). *Rwanda: The Impact of conflicts on growth and poverty*. *Conflict prevention and reconstruction.* New York: World Bank.

World Bank (2005). Examining inclusion: Disability and community driven development. *World Bank, Disability and Development Website,* (100). *http://siteresources.worldbank.org/DISABILITY/Resources/Community-Based-Rehabilitation/Examining_Inclusion.pdf.* (Retrieved on 27 March 2006).

Yin, R. K. (1994). *Case study research: Design and methods.* California: Sage Publishers Inc.

Zachariah, M. (1985). Lumps of clay and growing plants: Dominant metaphors of the role of education in the world, 1950-1980. *Comparative Education Review*, 29(1), 1-21.

Appendices

Appendix A

PHOS
PLATFORM HANDICAP & ONTWIKKELINGSSAMENWERKING

PHOS-NIEUWSBRIEF INCLUSIEF (2004-10-15)

PERSONEN MET EEN HANDICAP IN RWANDA: EEN SITUATIESCHETS



Inleiding

Ik heb relatief veel ervaring op het gebied van onderwijs, verenigingen en lobbying rond thema's die personen met een handicap in Rwanda aanbelangen. Daarom werd ik gevraagd gedurende de voorbije twee maanden informatie te verzamelen over de situatie van personen met een handicap in Rwanda, zowel op het platteland als in de steden. In dit artikel ga ik ook in op het werk van een aantal NGO's en van verschillende verenigingen van mensen met een handicap.

Socio-economische achtergrond

Rwanda wordt nog steeds omschreven als een arm ruraal land waar 70% van de bevolking aan landbouw doet, hoofdzakelijk met de bedoeling te voorzien in het eigen levensonderhoud (1). Het is één van de dichtst bevolkte landen in Afrika met weinig natuurlijke energiebronnen. De genocide van 1994 decimeerde de fragiele economische basis, verarmde de bevolking sterk en ondermijnde de capaciteit van het land om buitenlandse privé-investeringen aan te trekken. Niettemin realiseerde Rwanda een opmerkelijke vooruitgang om te komen tot een stabilisatie en herstel van de economie op het niveau van vóór 1994.
Deze economische karakteristieken lijken het voorkomen van handicap in Rwanda te verklaren. Meer dan 54% van de huishoudens (gemiddeld 5,8 kinderen per vrouw) overleeft op minder dan een halve hectare en 64% van de huishoudens leeft onder de armoedegrens. Dit leidt tot grote gezondheidsrisico's en is een belangrijke oorzaak van handicap, hoge sterfte- en ziektecijfers en een lage levensverwachting (48,5 jaar). De derde volkstelling van augustus 2002 bracht het aandeel van mensen met een handicap in de Rwanda op 4,7% in totaal en specifiek voor fysieke handicap, op 2,2%. Ziekte (37,5%) en ongelukken (oorlog inbegrepen) (12,5%) werden geordend als belangrijkste oorzaken van handicap.

Handicap als nationale prioriteit

De ontwikkeling van kwetsbare groepen in Rwanda waaronder personen met een handicap vraagt nationaal aandacht en dient te worden opgenomen als prioriteit bij het uittekenen van een beleidsstrategie. Dit werd duidelijk gesteld in recent uitgewerkte nationale beleidsdocumenten (Nationale Constitutie (2003), nationaal beleid rond weduwen en kwetsbare groepen (2002), de Nationale Strategie voor Armoedebestrijding (2002) e.a. Elementen die een hoge prioriteit krijgen op de Rwandese ontwikkelingsagenda zijn: gender, gelijke kansen en toegang tot onderwijs voor iedereen alsook HIV/AIDS. Het is onnodig te zeggen dat handicap niet noodzakelijk op deze lijst staat; maar niettemin belangrijk blijft voor NGO's, in het bijzonder voor die NGO's verbonden aan religieuze organisaties.
Onder hen de Belgische NGO CARAES verbonden met de Broeders van Liefde die instaat voor onderwijs en rehabilitatie van volwassenen met een neurologische, sensoriële of mentale aandoening. CBM verbonden met de Inkurunziza Kerk is een ander voorbeeld.en heeft de laatste jaren zijn gemeenschapsgeoriënteerde dienstverlening uitgebreid in grote delen van het land. Handicap is vaak een excuus om bepaalde prioritaire doelgroepen uit te sluiten van

overheidsdiensten en hen over te laten aan de goedwil van NGO's, tenminste als ze al het geluk hebben steun te ontvangen van NGO's.

Verenigingen van mensen met een handicap
Alle verenigingen van personen met een handicap en de bijbehorende centra zijn verenigd in FACHER (Fédération des Associations et Centres pour Handicapés au Rwanda). Personen met een handicap worden via hetzelfde kanaal en via individuele leden en groepen vertegenwoordigd door één verkozen Nationaal parlementslid. Deze ontwikkelingen zijn echter zeer recent en betekenen een grote stap voorwaarts, in het bijzonder omdat de vertegenwoordiging ook is erkend door de nieuwe Nationale Grondwet in 2003. Dit heeft duidelijk een politieke impuls gegeven aan groepen en individuele leden van verenigingen van personen met een handicap. Dit werd duidelijk door reorganisaties bij FACHER en andere verenigingen alsook door een toenemend aantal rehabilitatie- en onderwijscentra op amper 1 jaar tijd. Het is waarschijnlijk te vroeg om te kunnen spreken van een waardevolle bijdrage van gehandicaptenorganisaties omdat hun activiteiten worden gekenmerkt door aanzienlijke valkuilen op het gebied van management en organisatieopbouw. Maar toch is het niet overdreven te stellen dat er een stevige basis is gelegd voor de toekomstige ontwikkeling van diensten en activiteiten voor personen met een handicap in Rwanda.

Gemeenschapsgerichte diensten en NGO's
Er is felle kritiek die stelt dat het fundamenteel recht op rehabilitatie, onderwijs en opleiding, gelijke kansen op werk duidelijk nog niet gerealiseerd worden in overheidsorganen, zoals scholen. Daarenboven past dit niet noodzakelijk onmiddellijk in de agenda van FACHER en andere organisaties. Deze stand van zaken heeft ertoe geleid dat een aantal verenigingen en NGO's ijveren voor gelijkaardige diensten en op die manier nogal ongecoördineerd tewerk gaan. Twee kritische bedenkingen komen daarbij duidelijk naar voren:

1. Ten minste vijf rehabilitatiecentra voor jongeren met een mentale handicap ontstonden de voorbije acht maanden waarvan vier in dezelfde regio. De kwaliteit van de geboden dienstverlening laat in de meerderheid van de gevallen veel te wensen over. Als gevolg hiervan moet men de keuze tussen kwaliteit of kwantiteit van diensten herbekijken in functie van een betere kwaliteit. Ironisch genoeg vindt dit alles plaats onder de neus van de verantwoordelijke lokale autoriteiten. Ontelbare organisaties van personen met een handicap met een betwistbaar ledenaantal blijven als paddestoelen uit de grond rijzen en lopen elkaar voor de voeten in de gangen van.ministeries en NGO's waar ze steun verwachten voor hun overleving.

2. Bij deze centra staan rehabilitatie en vaardigheden voor zelfstandig leven hoog op het prioriteitenlijstje. Ze zijn echter niet in staat te antwoorden op andere gevoeligheden voortvloeiend uit de handicap van hun cliënten en maatschappelijke factoren zoals marginalisatie en uitbuiting die kunnen uitmonden in dodelijke bedreigingen zoals een HIV/AIDS-besmetting en zijn gevolgen. Vele van deze voorzieningen erkennen dat hun bijdrage beperkt is want ze werken in gemeenschappen die nog sterk beïnvloed worden door taboes en een brede waaier van andere traditionele geloofsovertuigingen en attitudes. Het thema handicap ontbreekt ook nog steeds op de agenda van de lokale raad. Nochtans wordt er een lovenswaardige dienstverlening aangeboden door sommige NGO's, zoals al eerder vermeld.

Ondanks de zware verantwoordelijkheid was het voor mij een eer betrokken te zijn in de kwaliteitsevaluatie van het CBR-centrum in Ndera, opgezet door Caraes. Het eindrapport geeft duidelijk het gevoel weer van vele lokale experts dat het centrum, ondanks zijn korte bestaan, al heeft aangetoond over de juiste visie op de gemeenschap te beschikken die vele andere nieuwe centra in het land zouden moeten evenaren. Persoonlijk ben ik van mening dat een gecoördineerde samenwerking moet worden opgezet tussen alle centra gericht op onderlinge uitwisseling en het leveren van een gemeenschappelijke bijdrage ten behoeve van personen met een handicap in Rwanda.

De rol van de overheid
Zoals al eerder aangegeven kan de rol van de overheid bij activiteiten die personen met een handicap aanbelangen nog niet gesitueerd worden in concrete acties maar eerder in de

ontwikkeling van een politiek kader waarbinnen verenigingen zoals FACHER zich konden ontwikkelen en waarbinnen NGO's kunnen worden geplaatst. Het departement Buitengewoon Onderwijs binnen het Ministerie van onderwijs heeft de taak het onderwijs van kwetsbare groepen te plannen en te voorzien. Het beschikt echter over relatief weinig middelen terwijl het Ministerie van Sociale Zaken de enige coördinerende instantie is voor lokale verenigingen en NGO's. Dit betekent dat de zware verantwoordelijkheid voor de coördinatie en opvolging van alle activiteiten en diensten voor personen met een handicap tot de bevoegdheden van dit ministerie wordt gerekend. Het is van belang op te merken dat deze verantwoordelijkheid niet gedeeld wordt door andere ministeries in sociale aangelegenheden meer bepaald, gezondheid, gender en familie, onderwijs, openbare diensten enz. Dit verklaart mogelijk waarom het niet is gelukt belangrijke prioriteiten rond handicap op de internationale agenda te plaatsen. Daarbij denken we aan de normen van de ILO inzake gelijke tewerkstellingskansen voor personen met een handicap, gezondheidsprogramma's, specifiek voor personen met een handicap, rond onder meer HIV/AIDS, inclusie en gelijke kansen in het onderwijs en op de arbeidsmarkt, gendergevoelige thema's zoals ongewenste intimiteiten en uitbuiting van personen met een handicap naast nog andere factoren.

Besluit

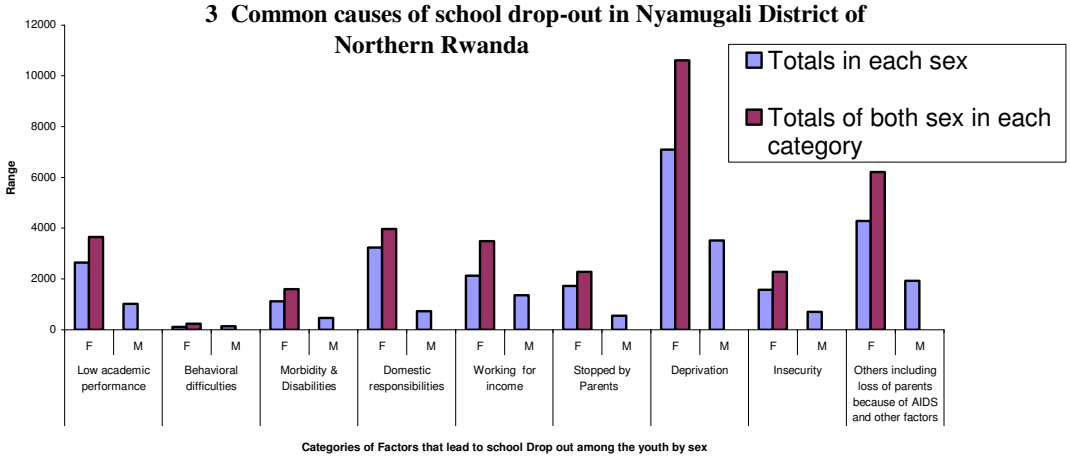
Uitgaande van de gemaakte evaluatie kunnen we er niet onderuit dat diensten voor personen met een handicap in Rwanda in hun kinderschoenen staan, zowel op beleidsniveau als in de praktijk. Een gezamenlijke inspanning van de gehandicaptenorganisaties, lokale en buitenlandse NGO's en de overheid blijft een belangrijke voorwaarde voor het bereiken van een duurzame voedingsbodem die zal leiden tot een verregaande en aanvaardbare standaard wat betreft diensten voor personen met een handicap.

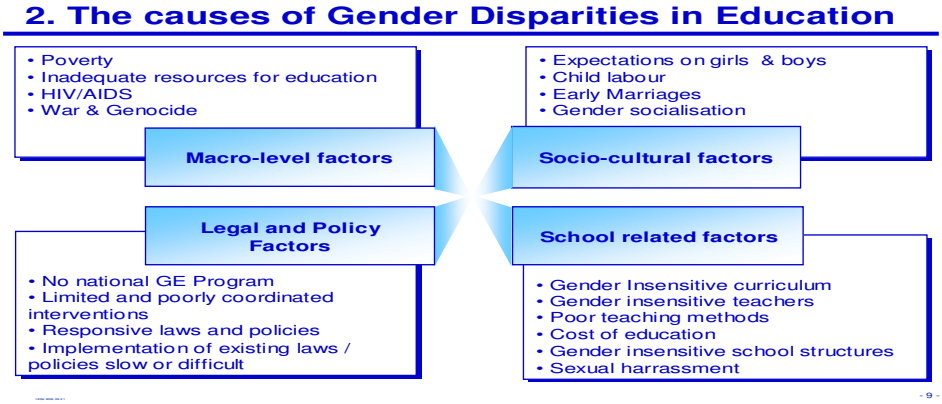
Evariste Karangwa

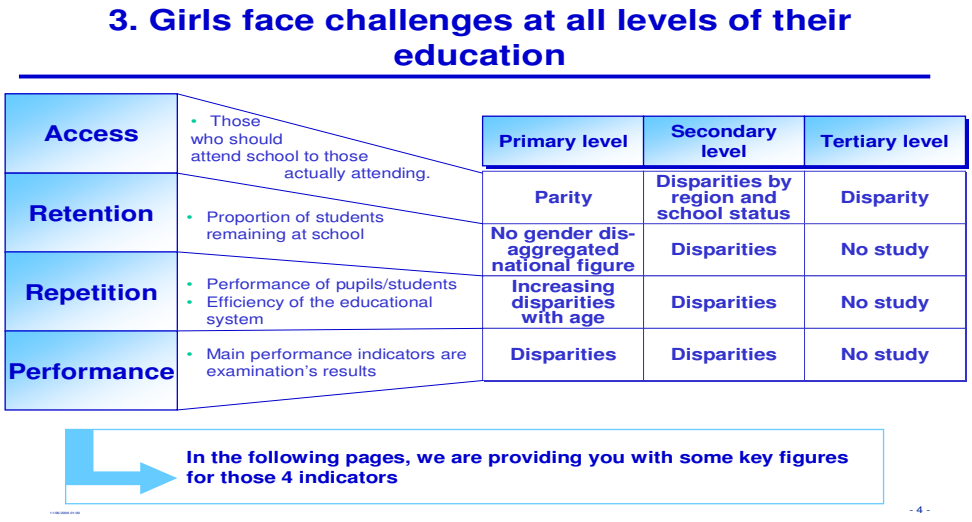
Evariste Karangwa doctoreert momenteel aan de KU Leuven rond inclusief onderwijs in Rwanda.

Appendix B[15]

Disparities in access and retention in education







[15] Source: Fig 1: Karangwa, E. for CARE International 'Child project'. Fig 2 & 3: FAWE Rwanda Presentation 2003.

Appendix C

1 Rural Rwandan communities[16]



A post-Genocide rural family: *Olivi (2nd Right) was born prematurely because his mother was a victim of a bomb (in the1994 war) which left both impaired Thev now live with his grand-mother (Centre).*



Communal support in Northern Rwanda known as 'Ubudehe or umusanzu'. Beneficial to less capable community members

2. Community Justice



Typical consultation meeting of community elders, known as, '*Inyangamugayo*', before & after 'gacaca' court proceedings.



Public hearing of genocide suspects in the initial phasee of community '*gacaca*' court proceeses

3 Struggling to harness inclusive education



A team of visually impaired students play against the sited ones in the national stadium. To raise awareness about inclusive practice.



Charity walk organised by P.T. A in G. S. Gahini for the newly included blind youth. To raise both funds & awareness for inclusion.

[16] Sources: Photos 1 & 3 are part of Karangwa E. Photo archives. Photos 2 are from Anghion's internet document (2002).

Appendix D

Developments in Primary Education in Rwanda from 1994 to 2002[17]

Year	1994/95	1995/96	1996/97	1997/98	1998/99	1999/2000	2000/01	2001/02
Schools	1882	1845	1918	1990	2021	2093	2142	2172
Students	942.729	1.039.657	1.154.768	1.270.733	1.286.617	1.431.692	1.476.272	1.534.510
Teachers	17705	18394	20232	22435	23436	26187	28698	26024

Developments in Secondary Education in Rwanda from 94 to 2002

Year	1994/95	1995/96	1996/97	1997/98	1998/99	1999/2000	2000/01	2001/02
Total : Pu + L.S+Pr.	85	228	252	362	322	363	376	393
Pu + L.S.	85	111	124	176	167	176	186	185
Private		117	128	187	155	187	190	208
Students	50100	55641	82224	90840	105292	125124	141163	157210
Teachers	-	1800	3886	2399	4679	5557	5453	6329

Developments in Higher Education in Rwanda from 94 to 2002

Year	1994/95	1995/96	1996/97	1997/98	1998/99	1999/2000	2000/01	2001/02
Schools	1	1	6	6	7	10	10	10
Students	3..518	3.948	4.687	5.620	3.135	9.820	12.674	15.353
Teachers		160	271	442	335	810	920	

[17] Source: http://www.mineduc.gov.rw/minenglish.htm

Appendix E
Rwandan Education Projections 2006-2010[18]

Student & teacher projections	2006	2007	2008	2009	2010
Primary					
total enrolment	1,941,738	2,000,921	2,051,151	2,096,183	2,076,706
repetition rate	15%	13%	11%	10%	9%
drop-out rate	12%	10%	8%	5%	5%
gross enrolment ratio	140%	141%	142%	142%	137%
completion rate (std method)	65%	75%	85%	109%	122%
cohort survival rate to reach grade 6				75%	
number of teachers	32,785	34,668	36,467	38,242	39,949
number of new teachers needed	2,866	2,839	2,869	2,854	2,228
student teacher ratio	59	58	56	55	52
class size	51	51	51	51	50
% double shifting teachers				15%	

[18]Source: Education Sector Strategic Plan (ESSP), 2006 -2010, p. 71-73.

tronc commun	**2006**	**2007**	**2008**	**2009**	**2010**
transition rate (primary to TC)	47%	46%	48%	42%	43%
total enrolment (including private)	170,028	187,142	209,385	240,103	278,107
repetition rate	8%	8%	7%	6%	6%
gross enrolment ratio	26%	28%	32%	36%	41%
completion rate (std method)	21%	23%	25%	28%	32%
% private	38%	36%	34%	31%	28%
% boarding in public schools	41%	35%	30%	25%	21%
number of teachers	5,637	6,186	6,899	7,883	9,063
number of new teachers needed	831	1,022	1,329	1,574	1,773
student teacher ratio	30	30	30	30	31

Upper secondary	**2006**	**2007**	**2008**	**2009**	**2010**
transition rate (primary to TC)	83%	67%	63%	60%	57%
total enrolment (including private)	83,977	86,887	89,813	93,008	96,602
repetition rate	5%	5%	5%	5%	4%
gross enrolment ratio	13%	13%	14%	14%	15%
completion rate (std method)	11%	12%	12%	13%	13%
% private	53%	52%	51%	50%	48%
% boarding in public schools	69%	66%	63%	60%	55%
number of teachers	3,278	3,348	3,415	3,487	3,615
number of new teachers needed	234	234	243	302	326
student teacher ratio	26	26	26	27	27
class size (public schools)	40	40	40	40	40

Teacher education (primary & tronc commun)	**2006**	**2007**	**2008**	**2009**	**2010**
total enrolment in pre-service	5,605	6,196	6,675	6,045	7,549
number of teacher educators	216	240	260	237	296
Higher education					
total public enrolment (home)	12,519	12,720	12,949	13,207	13,419
total private enrolment (home)	8,263	8,345	8,429	8,513	8,683
total overseas enrolment	587	569	547	519	493

[19] Source: http://www.mineduc.gov.rw/minenglish.htm

Appendix F

INDICATEURS DU SYSTEME D'EDUCATION / INDICATORS IN EDUCATION SYSTEM[19]

ENSEIGNEMENT PRIMAIRE / PRIMARY EDUCATION

	1996/97	1997/98	1998/99	99/2000	2000/2001	2001/02	2002/2003	
1.0. ELEVES								**1.0. STUDENTS**
1.1. Nombre d'Elèves	**1154768**	**1270733**	**1288617**	**1431692**	**1476272**	**1534510**	**1636563**	1.1. Number of Students
1.2. Nombre des Garçons	574642	635765	644430	721881	738439	763277	810585	1.2. Number of Boys
1.3. % des Garçons	49,8%	50,0%	50,0%	50,4%	50,0%	49,8%	49,5%	1.3. % of Boys
1.4. Nombre de filles	580126	634187	644187	709811	737833	771233	825978	1.4. Number of Girls
1.5. % des Filles	50,2%	49,9%	50,0%	49,6%	50,0%	50,2%	50,5%	1.5. % of Girls
1.6. Enfants scolarisés (7-12 ans)	-	970161	1025190	1062435	1081358	1101861	1162955	1.6. Students of school age
1.7. Population d'âge scolarisable	-	-	1466086	1472244	1475940	1479940	1485462	1.7. Children of school age
1.8.Taux brut de scolaris.	-	-	**87,9%**	**97,2%**	**99,9%**	**103,7%**	**110,2%**	1.8. Gross Enrolment Rate
1.9. Garçons	-	-	89.5%	99.6%	101,9%	105,8%	109,9%	1.9. GER Boys
1.10. Filles	-	-	86.4%	99.5%	98,2%	102,3%	108,0%	1.10. GRE Girls
1.11. Taux net de scolaris.	-	-	**69,9%**	**72,2%**	**73,3%**	**74,5%**	**78,3%**	1.11. Net Enrolment Rate
1.12. Garçons	-	-	70.2%	72.5%	72,9%	74,0%	77,7%	1.12. NER Boys
1.13. Filles	-	-	69.7%	71.8%	74,9%	74,9%	78,9%	1.13. NER Girls
1.14. Taux de survie	28%	22%	.....					1.14. Completion Rate
1.15. Taux de transition Primaire/Secondaire	18,0%	21,0%	38,0%	42,0%	37,0%			1.15. Transition Rate to secondary
1.16. Taux de promotion	66,6%	56,2%	50,5%	49,6%	54,0%	66,2%		1.16.Promotion rate
1.17. Taux de redoublement	28,0%	32.1%	38,1%	37,6%	31,8%	17,2%		1.16. Repetition Rate
1.18. Taux d'abandon	5.5%	11.7%	11.4%	12.6%	14,2%	16,6%		1.17. Drop out Rate
2.0. ENSEIGNANTS								**2.0. TEACHERS**

2.1. Nombre d'enseignants	**20.322**	**22435**	**23436**	**26187**	**28698**	**26024**	**27012**	2.1. Number of Teachers
2.2. Nombre d'hommes		10002	10546	12274	14034	12975	13450	2.2. Number of Male
2.3. % des hommes		44,6%	45,0%	46,9%	48,9%	49,9%	49,8%	2.3. % of Male
2.4. Nombre de femmes		12433	12890	13917	14664	13049	13562	2.4. Number of Female
2.5. % des femmes		55,4%	55,0%	53,1%	51,1%	50,1%	50,2%	2.5. % of Female
2.6. Nbre d'enseig qualifiés		**10463**	**11541**	**13934**	**17995**	**21123**	**22997**	2.6. Number of Qualified teachers
2.7. % d'enseignants qualifiés		46,6%	49,2%	53,2%	62,7%	81,2%	85,1%	2.7. % of Qualified Teacher
2.8. Hommes qualifiés			5583	6650	8712	10481	11347	2.8. Male Qualified
2.9. % hommes qualifiés			52,9%	54,2%	62,1%	80,8%	84,4%	2.9. % of qualified Male
Femmes qualifiées			5958	7284	9283	10642	11650	2.10. Female Qualified
2.11. % femmes qualifiées			46,2%	52,3%	63,3%	81,6%	85,9%	2.11.% Qualified Female
3.0. Elèves / Enseignant								**3.0. Teachers / Student**
3.1. Elèves/Enseignant		57	55	54	51	58,9	59,9	3.1. Teacher Student Ratio
3.2. Elèves/enseig.qualifié		121	112	102	82	72,6	70,3	3.2. Qualified Teacher
4.0. Ecoles								**4.0.Schools**
4.1 Ecoles	**1918**	**1940**	**2021**	**2093**	**2142**	**2172**	**2177**	4.1. Schools
4.2.Salles de classe			23.395	24844	27339	27735	28503	4.2. Classroom
4.3 Classes			30866	36534	39045	33771	32841	4.3. Number of streams
4.4. Salles construites			89	114	214			4.4. Number of classroom

Appendix G

Field Contact Form

Type of contact:
Survey site code: ..... Address: ……
Specification: ..... Contact date: …….

1. The salient issues that were striking in the field contacts
    1.
    2.
    3.
    4.
    5.
    6.
    7.

2. Information received or failed to receive on the target questions
    1.
    2.
    3.
    4.
    5.
    6.

3. Other salient issues that arose during the field contacts
    a. Interesting
        1.
        2.
        3.

    b. Relevant
        i.
        ii.
        iii.

    c. Illuminating
        i.
        ii.
        iii.
4. The arising questions in relation to the next or previous contact
    a.
    b.
    c.

5. Other comments and concerns

Appendix H

Field Contact Summary Form

Contact types: …..	**Place: ……...**		**Dates: …….**
1.	1. …….	From ….	To…
2.	2. …….	From ….	To…
3.	3. ……..	From ….	To…
4.	4. ……..	From ….	To…
5.	5. …….	From ….	To…

Field Contact Form Code	**Salient point**	**Theme Code**
1. ..	…….	..
2. ..	……	..
3. ..	……	..
4. ..	……	..
5. ..	……	..
6. ..	……	..
7. ..	.....	..
8. ..	…….	..

Appendix I

An example of questionnaire with guiding questions for group interviews administered

UMUGEREKA 1
IBIBAZO BIGENEWE ABANYESHURI BAFITE ABAVANDIWE NA BAGENZI BABO BATURANYE BATABASHA KWIGANA NABO

Intara:
Akarere:
Umurenge:
Ishuli rili hafi
Itariki

Imbonerahamwe 1

Mwaba mufite abavandimwe na bagenzi banyu muturanye batiga?

☐ Benshi ☐ Bake

Niba ari yego, baterwa n' iki kutiga?
1.
2.
3.
4.
5.

Niba ari oya ni iki kibashishikariza kwiga?
1.
2.
3.
4.
5.

Imbonerahamwe 2

Abana bafite ibibazo bituma batiga	**Imyaka**	**'Kobwa**	**'Hungu**	**Bose**
1. Ni bangahe babitewe no kutabona neza (difficultés visuelles)?	< 7 7 - 9 9 - 11 11–15 15 <			
2. Ni bangahe babitewe no kutumva neza (difficultés auditives)?	< 7 7 - 9 9 - 11 11–15 15 <			
3. Ni bangahe babitewe n' ingorane zo kutabasha kugenda neza cyangwa ubundi bumuga bw' izindi ngingo (dificultés motrices)?	< 7 7 - 9 9 - 11 11–15			

	15 <			
4. Ni bangahe babitewe n' ingorane zo gukulikira hamwe n' abandi (difficultés d'apprentissage)?	< 7 7 - 9 9 - 11 11–15 15 <			
5. Ni bangahe babitewe no kutagira gifasha (imphubyi)?	< 7 7 - 9 9 - 11 11–15 15 <			
6. Ni bangahe babitewe n' ubukene?	< 7 7 - 9 9 - 11 11–15 15 <			
7. Ni bangahe babitewe n' ingorane z' imyifatire (troubles d'ordre comportemental ou émotionnel)?	< 7 7 - 9 9 - 11 11–15 15 <			
8. Ni bangahe babitewe no kugira ubwenge burenze kamere (Surdoués)?	< 7 7 - 9 9 - 11 11–15 15 <			
9. Ni bangahe babitewe n' ibibazo by' ubuzima (Problèmes de santé)? Twavuga nka Asima, Umutima, Igicuri, SIDA, guhahamuka, … Sobanura:	< 7 7 - 9 9 - 11 11–15 15 <			
10. Ni bangahe babitewe n' ibindi bibazo? Sobanura:	< 7 7 - 9 9 - 11 11–15 15 <			
Bose hamwe				

Ku bana bafite ingorane zirenze imwe bashobora kwandikwa aho bibareba hose.

Appendix J

An example of a questionnaire administered to educators in their vernacular

IBIBAZO K‘ UBUREZI BUDAHEZA (*INCLUSIVE EDUCATION*)
BIGENEWE ABAYOBOZI B´ UBUREZI

Intara:
Akarere:
Ibyo ushinzwe:
Italiki:

Imbonerahamwe 1

Ukulikije ubumenyi n´uburambe bwawe mu burezi, ubona byashoboka ko abana bose bafite ibibazo byo gukurikira bakwigana n´bandi? ☐ Yego ☐ Oya

Ni abanyeshuli bahe batera ibibazo kurusha abandi baramutse bavanzwe n´ abandi mw´ ishuli?

Tanga impamvu:

Ni abanyeshuli bahe banyashuli batatera ibibazo kurusha abandi baramutse bavanzwe n´ abandi mw´ ishuli?

Tanga impamvu:

Imbonerahamwe 2

Mwaba muzi amashuri arimo abana bafite ingorane mu myigire yabo (Besoins pédagogiques spéciaux) bigana n’ abandi mu mashuri asanzwe?

☐ Yego ☐ Oya

Bafite uzihe ngorane?

Bangahe

1.
2.
3.
4.

Ni ayahe mashuri?

1. 2. 3. 4.

Ni bande babatera inkunga?

Imbonerahamwe 3

Ubona ubu Urwanda rugikneye amashuli yihariye (Ecoles speciales)?

Tanga impamvu niba aliko ubyumva:

Tanga impamvu niba ataliko ubyumva:

Imbonerahamwe 4

Abanyeshuli bafite ubumuga n' abatabufite biganye wumva byabagilira akamaro bose?

Tanga impamvu niba aliko ubyumva:

Tanga impamvu niba ataliko ubyumva:

Imbonerahamwe 5

Tanga bimwe mu bitekerezo byagira akamaro mu gutegura uburezi budaheza abana bafite ingorane zo gukulikira mu mashuri asanzwe. Tanga bimwe mu bitekerezo byakubakirwaho n' abakulikira:

Abayobozi b´ uburezi mu turere:

Abayobozi b´ amashuli:

Abarimu:

Ababyeyi:

Abanyeshuli:

Abayobozi b' ibanze: