

Children with Dis/abilities in Namibia, Africa:

*Uncovering Complexities of Exclusion*

by

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## ABSTRACT

Children with dis/abilities the world over are widely required to sacrifice their human rights to education, equity, community, and inclusion. Fewer than 10% of children with dis/abilities in developing countries attend school. Namibia, Africa, where this study took place, is no different. Despite Namibia's adoption of international covenants and educational policy initiatives, children with dis/abilities continue to be overwhelmingly excluded from school. The body of literature on exclusion in sub-Saharan Africa is laden with the voices of teachers, principals, government education officials, development organizations, and scholars. This study attempted to foreground the voices of rural Namibian families of children with dis/abilities as they described their lived experiences via phenomenological interviews. Their stories uncovered deeply held assumptions, or cultural models, about dis/abilities.

Furthermore, the study examined how policy was appropriated by local actors as mediated by their shared cultural models. Ideas that had been so deeply internalized about dis/abilities emerged from the data that served to illustrate how othering, familial obligation, child protection, supernatural forces, and notions of dis/ability intersect to continue to deny children with dis/abilities full access to educational opportunities. Additionally, the study describes how these cultural models influenced cognition and actions of parents as they appropriated local educational policy vis-à-vis creation and implementation; thereby, leaving authorized education policy for children with dis/abilities essentially obsolete. The top down ways of researching by international organizations and local

agencies plus the authorized policy implementation continued to contribute to the perpetuation of exclusion. This study uncovered a need to apply bottom up methods of understanding what parents and children with dis/abilities desire and find reasonable for education, as well as understanding the power parents wield in local policy appropriation.

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To my dear family: Libby, Mom & Don, Papa & Michele

To my dearest Michele; and on we grow

To the people that have guided, supported, and challenged me:

Beth, Dr. Artiles, Larisa, and John

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## CHAPTER 1

### Introduction

Between 90% to 98% of children with disabilities in developing countries are denied school access (UNESCO, 2006; Laurin-Bowie, 2005, p. 53). While precise statistical data on children with dis/abilities are unavailable, we know Namibia, in southern Africa, is home to children with dis/abilities who are excluded, segregated, and/or discriminated against in the educational system and by nondisabled peers (UNESCO, 2006; Abosi, 2007, p. 197). Children with dis/abilities are widely required to sacrifice their human right to education, equity, community, and inclusion the world over. This study will draw from a cohesive framework of theoretical perspectives to explore why children with dis/abilities in rural northern Namibia are overwhelmingly denied full educational opportunities.

This dissertation attempted to investigate the dynamics of exclusion of children with dis/abilities from educational opportunities in rural northern Namibia, drawing from voices not readily found in literature. Most of the work that has attempted to answer this question situates discourse among teachers, non-governmental organizations (NGO) representatives, international organizations, and Ministry of Education officials (Abosi, 2007; Chimedza, 2008; Levers, 2002; Zeichner & Ndimande, 2008; Zimba, Mowes, & Naanda, 2007). This study includes some of those views, but instead foregrounds the perspective of the family of person with dis/abilities. This study explored the deeply held

assumptions of the families are unpacked and then juxtaposed against Namibia's educational policy.

*Background: Namibian Context*

Namibia is a post-Apartheid country that won its independence in 1990 from their southern neighbor, South Africa. From the first contact with Portuguese explorers in 1488 to 1990, when Namibia became independent, it was wrought with oppression and murder of its people, international treaties, and armed struggles that finally led to UN-supervised elections. See table 1 for the timeline of the struggle to independence.

Table 1  
Namibian Timeline (The Embassy of Namibia, 2010)

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1488	The Portuguese explorer, Bartolomeu Dias, visits Namibia.
1886-1890	Present international borders established by German treaties with Portugal and Britain. Germany annexes the territory as South West Africa.
1892-1905	Herero and Nama uprisings suppressed. 80 % (or 60.000) of the Herero population were exterminated. The 15.000 Herero survivors became refugees.
1915	South Africa takes over territory during WWI.
1920	League of Nations grants South Africa mandate to govern South West Africa.
1946	United Nations refuses to allow South Africa to annex South West Africa. South Africa refuses to place SWA under UN trusteeship.
1958	Contract workers create the pressure group Ovamboland People's Organisation (OPO), which is to become the South West Africa People's Organisation (SWAPO) in 1960.
1961	UN General Assembly demands South Africa to terminate the mandate and sets SWA's independence as an objective.
1966	SWAPO launches armed struggle against South African occupation.
1968	South West Africa officially renamed Namibia by UN General Assembly.
1972	UN General Assembly recognises SWAPO as "the sole legitimate representative" of the people of Namibia.
1988	South Africa agrees to Namibian independence in exchange for the withdrawal of Cuban troops from Angola.
1989	UN-supervised elections for a Namibian Constituent Assembly. SWAPO wins.
1990	March - Namibia becomes independent, with Sam Nujoma as the first President.

During colonial rule, Europeans infused Namibia with their languages, religions, and education. As one might assume, the apartheid rule insured the country of separateness and strict regulations. This was attributed to what was taught and learned in schools. When Namibia became independent in 1990, education had some of the following features (Mbumba, 2010, Introduction section):

1. fragmentation of education along racial and ethnic lines;
2. unequal access to education and training at all levels of the education system;
3. inefficiency in terms of low progression and achievement rates, and high wastage rates;
4. irrelevance of the curriculum and teacher education programs to the needs and aspirations of individuals and the nation; and
5. lack of democratic participation within the education and training system.

In addition to these main features, during the apartheid era, teachers, parents, and administrators were excluded from the decision-making process in education (Mbumba, 2010). The two-tiered educational system arranged for Indigenous peoples to have separate curriculum, schools, and educational systems that aimed to, “focus on conversation and then on preparing Africans for semi-skilled employment” (O’Callaghan, 1977, p. 96).

Currently, education is a leading commitment of the Namibian government. The United States Agency on International Development (USAID) claims, “Namibia allocates more than 20% of its national budget to education. This figure represents six to seven percent of Namibia’s total GDP (gross domestic product)” (2008). Relatively speaking, it is one of the top three countries in the world, in terms of its percentages, funding for education. Furthermore, many goals have been attained and strides made toward improving education efficacy in Namibia. On February 20, 2002 in *The Namibian*, Mutorwa initiated the Education for All (EFA) National Forum. He stated that Namibia had achieved some of the EFA goals set forth by the World Education Forum in Dakar, Senegal in 2000. According to Mutorwa, the goals that were met are: implementing a National Early Childhood Development Policy; favorable overall enrolment statistics for boys and girls in the different school phases, with only a small difference between the enrollment of males and females; making efforts to meet the learning needs of young people and adults through the Namibian College of Open Learning (NAMCOL) (Angula, 2002). He added that Government has also achieved the target of an 80 percent adult literacy rate by 2000.

More recently, policies have been legislated or reformed to improve education for all learners. Newer policy mandates are a National Gender Policy, HIV/AIDS Policy, and School Health Policy (United Nations Educational Scientific and Cultural Organization (UNESCO), 2004, p.17). Other improvement include a 95% enrollment rate for learners ages 6-16, up 4 percent

since 2001; increased equity in education in terms of resources and a breadth of subjects; and the quality of education has been upgraded by curriculum development (ICE, 2004, p. 14). See Appendix A for detailed background information on present day Namibia.

### *Education Policy*

Policies created by the international community have been emulated by the Namibia government to guide country specific education policies. The documents that have shaped international policy for education and children with disabilities include: the Universal Declaration of Human Rights (1948), World Declaration on Education for All (Jomtien 1990), the Salamanca Statement and Framework for Action on Special Needs Education (1994), Dakar Framework for Action, Education for All (2000), and the Millennium Development Goals (2000).

Using these doctrines as templates, the architects of the Namibia constitution took the first step towards special needs education policy at the dawn of their republic in 1990. In the Namibian constitution, it states in Article 20:

- (1) All persons shall have the right to education.
- (2) Primary education shall be compulsory and the State shall provide reasonable facilities to render effective this right for every resident within Namibia, by establishing and maintaining State schools at which primary education will be provided free of charge.



(3) Children shall not be allowed to leave school until they have completed their primary education or have obtained the age of sixteen (16) years...

The constitution, in addition to the World Declaration on Education for All and a Framework for Action, molded Namibia's policy document on education. The government policy document, Towards Education for All (1993) provides the foundation of the Namibian education system. This document discusses the four major goals of education as access, equity, quality, and democracy (p. 32).

The policy foundation of Towards Education for All (1993) was followed by Namibia's disability policy. The Ministry of Land Resettlement and Rehabilitation (MLRR), in collaboration with other ministry offices and nongovernmental organizations, in May 1995 initiated the formulation of a Namibian National Policy on Disability. The National Policy on Disability was published in March 1997.

Within this policy document, it affirms that "The Government shall ensure that children and youths with disabilities have the same right to education as non-disabled children" (National Policy on Disability, 1997, section 3.5.1). Moreover, the paper declares, "Assessment, active intervention and specialised services will be provided for those with special needs within the regular education system. Parents of these children shall be actively involved at all levels of the educational system" (National Policy on Disability, 1997, section 3.5.1).

The National Policy on Disability (1997, section 3.5.1) further states that educating learners with disabilities should be based on the principals of inclusive education. The schools should be able to, “respond to the diverse needs of their students by accommodating the different styles and rates of learning; and ensuring quality education to all through appropriate curricula, organisational arrangements, teaching strategies, resources use and partnership with parents and communities” (MLRR, 1997, section 3.5.1).

In addition, this policy addresses the needs of parents of children with disabilities. “Parents of children with disabilities shall be provided with information about services available so that they can make informed decisions about the needs of their children...early intervention shall be provided to children to prevent developmental disabilities” (MLRR, 1997, section 2.5.2).

Since the turn of the century Namibia has been prolific in creating and adopting policies and conventions that continue to shape rights and education for people with dis/abilities. In 2004 Parliament established a National Disability Council to “monitor the implementations of the National Policy on Disability” (MoE, 2008). The policy at the center of the council’s responsibility is The National Policy on Inclusive Education. This document is the most recent policy document; it is in draft form and is still forthcoming (MoE, 2008).

For more specific direction in implementation of inclusive education, the special education policies for the entire country are established by the Special Education Programs under the Directorate of Education Programmes

Implementation. The program's objective is to determine policies and develop programs to establish and maintain opportunities for children with special needs.

The Ministry of Education, as directed by the government of Namibia, has created documents to provide guidelines and teaching tools for the education of children with disabilities. Some of these documents are: Supplement to the Pilot Curriculum Guide for Formal Basic Education: Special Education (1998), Guide for Identification of Problems and Compensatory Methods, Mathematics-grades 1-4 (1999), The Total Child Perspective Child Development and causes for problems Categories of Learning Needs (2001), General Problems & Directives for Referral (2001), Reading Compensatory Programme Lower Primary (2001), and Guide for Identification of Problems and Compensatory Methods, English version, Reading-grades 1-4 (1997).

The Ministry of Education is committed to education for all children including those with disabilities, "ten years of Basic Education is for all, i.e. that Basic Education is inclusive education" (NIED, 1998, p. 3). Specifically, in this dissertation, the policies of the Namibian Constitution, National Policy on Disability, Education Act 16 of 2001, and the National Disability Council Act No. 26 of 2004 will be analyzed using the Policy as Practice framework (Levinson, Sutton, & Winstead, 2009).

### *Problem Statement*

"The right to education, the right to take part in cultural life, and the right to enjoy the benefits of scientific progress and its applications," are just a few

tenants of the Universal Declaration of Human Rights that people with dis/abilities in northern rural Namibia have not yet fully realized (1948, Articles 26 & 27). Educational opportunity, health, teacher training, budget allocations, stigmatization, inaccessible facilities, and communication are just a few of the salient and dire obstacles people with dis/abilities face. The issue of Human Rights, including access to education for Namibian people with dis/abilities, is an extremely complex issue to unpack; yet it is a vital piece in the progress toward realizing full inherent dignity. To complicate this struggle are broader historical, cultural, political, social, and economic concerns.

I contend the educational exclusion of children with dis/abilities has become so deeply embedded in people's belief systems and actions that it goes unnoticed and unquestioned despite national policies that advocate inclusionary education for all children. Due to the inherent nature of this line of cognition, people with dis/abilities regularly face limited opportunities. Fewer than 10% of children with dis/abilities attend school, of which the Namibia government acknowledged, "There is a serious concern about access to education for children with disabilities..." (MoE, 2008, p.10). If a child with a dis/ability is able to access education, "the quality of teachers' training/pre-service remains a concern with special reference to Inclusive Education and Special Education" (MoE, 2008, p. 14). After the immediate concern of access and quality of education are considered, it is essential conceptualize some daily lived experiences that people with dis/abilities face despite educational opportunities: poverty, mortality, more

likely victim of violence or rape, unemployment, poor health care, dangerous living conditions, and forced child labor (ILO, 2010, p. 60; UN, n.d., fact sheet, The World Bank, 2009)

Layered upon the problems of access and teacher training are challenges of economic, political, social, physical, and communication barriers (MoE, 2008, p. 19). These micro level issues are compounded when broader challenges are acknowledged. Namibia lives with the after effects of apartheid, the push and pull of international aid organizations, forced choices by international financial organizations, and the impact of globalization. While there have been strides for individuals with dis/abilities toward full human rights, economic and social inclusion, the intersection of local and global issues continue to arrange for most children with dis/ability being denied full access to education.

### *Research Questions*

This dissertation attempts to answer two questions:

1. What are the dynamics of exclusion from full educational opportunities for children with dis/abilities in rural northern Namibia?

This question seeks to understand what forces, or dynamics, contribute to children with dis/abilities not fully accessing educational opportunities.

Specifically, it seeks to understand the social, intellectual, and moral forces that influence the families of persons with dis/abilities in this process.

2. How do shared cultural models of dis/ability influence the appropriation of policy?

In this question, the term “shared cultural model” describes deeply held assumptions, usually so embedded in cognition that people do not recognize their existence or force in their actions (Strauss, 2005, p. 203). Vis-à-vis shared cultural models, this question analyzed how policy was locally created and implemented (Levinson, Sutton, & Winstead, 2009).

### *Purpose & Significance*

The purpose and significance of this dissertation is three fold. First and foremost, it is a vehicle for children with dis/abilities, vis-à-vis their families, to share their stories about the dynamics of living with dis/ability and its bearing on their child’s life trajectory. This is vital to creating an inclusive society and educational system as these voices have been silenced and are not included in the literature. Secondly, it uncovers cultural models, or deeply held assumptions, about dis/abilities and the influence those beliefs have on people’s actions. Finally, the insights gained about the cognition of families with children with dis/abilities can guide experts, advocates, and policy makers in the creation of communication strategies and models that encourage the realization of education and human rights for people with dis/abilities.

Without this foundational knowledge, the system can train teachers, create accessible buildings, flex the curriculum, and continue to make strides toward inclusionary methods, but if the children are not physically coming to school and being supported by their family and community, little will change. Thus, understanding reasons for exclusion is a critical step to interrogating and the

breakdown of barriers to educational opportunities and human rights for all learners.

### *Overview of Theoretical Framework and Research Design*

This study used ethnographically informed qualitative field research to uncover the cultural complexities of educational exclusion. The theoretical framework compliments the methodical structure to allow for a complex analysis of the phenomenon.

The lenses used to interrogate these phenomena were grounded in human learning, critical theories, and a policy analysis framework. Human learning, as seen through a Vygotskian and sociocultural perspective, and critical theories, as informed by postcolonial and dis/abilities studies scholars inform this framework. The other components of the framework draw from African ways of knowing and the juxtaposition of policy as it is appropriated by local actors. Combined, these theories provide multiple layers to view the data.

The research design of this study utilized several analysis methods to mine the breadth of data. First, it began with uncovering phenomenological themes, moved to discovering deeply held cultural models vis-à-vis non keyword analysis, and punctuated with examination of the local discourse that appropriate education policy for children with dis/abilities (Seidman, 2006; Strauss, 2005, Sutton & Levinson, 2001). The process incorporated interviews, participant observation, and field notes to gain an understanding of the interplay among

cultural models, human motivation, and appropriation of policy that arranged for children with dis/abilities to lack access to educational opportunities.

Data gathering was informed by the interview methods of Seidman; the process focused on a “phenomenological approach in-depth interviewing” (2006, p. ix). The three part interview session/s engaged the participants in telling the stories of their child with dis/abilities. The participants discussed the child’s life story, daily lived experiences, and their meaning of those lived experiences.

### *Language*

As a contributor to the discourse on dis/ability and schooling, I attempted to use language that ascribed to the emancipatory process. As Sapon-Shevin aptly says, “the language we use-and the labels-are profoundly important in shaping our understanding and others’ perceptions” (2007, p. 24). Language choice is of the utmost importance in my scholarship because as Smith argues, “how academics frame or construct disability informs the way they conduct and apply research, with implication for policy and practice” (2001, p.56). It was my aim to write this dissertation while considering how labels and descriptions “reify, reinforce, and reproduce the hierarchical social arrangements of the larger society (Mutua & Smith, 2006, p. 125). Therefore, the term “dis/ability” will be used in place of “disability” throughout this study. “Dis/ability” interrogates the normative meanings of “ability” and “abled.” By viewing the term “ability” with and without “dis” preceding it, the reader is opened up to the idea of “multiple relative abilities” Rogers & Swadener (2001, p. 268). However, as a previous special



educator that relied on the medical/deficit model of dis/abilities, I at times revert to that genre of thinking. Therefore, I have given great consideration to a goal of creating work that values human difference, privileges voices of children with dis/abilities and their caregivers, and minimizes my participation in the construction of deficit thinking. With that said I concede there may be unintentional deficit language usage and apologize for that in advance.

### *Organization*

The organization of the remainder of this dissertation is based on five distinct chapters. Chapter 2 reviews the literature on dis/ability as it relates to exclusion and challenges in Africa and specifically Namibia. Chapter 3 unpacks the theoretical lenses I use to view this work which incorporate notions from Critical Theories, Sociocultural Theories, and African Epistemologies. In this fourth chapter, the research design and methods are explained. Data findings are discussed and illustrated vis-à-vis the rich dialogue between research and participant. Within the fifth and final chapter, the data is used to draw cultural models of dis/ability, as viewed it within the conceptual framework.

## CHAPTER 2

### Literature Review And Conceptual Framework

The corpus of literature on children with dis/abilities and their school going status paints similar pictures. Children with dis/abilities in sub-Saharan Africa, and more specifically, Namibia, are not accessing education, services, and resources (Levers, 2002; Kabzems & Chimedza, 2002; Evans, n.d). The literature from the region consistently cited barriers of beliefs, lack of value of education, lack of services, inability of teachers to meet differing needs, and gender as possible reasons for exclusion (Levers, 2002; Zimba, et al., 2007).

As the educational movement of inclusion diffuses, Namibia's Ministry of Education has adopted the ideologies. Multiple policies have been legislated to provide education for children with disabilities; teachers are being trained in inclusionary pedagogy; but the question remains, why spend enormous resources, financial and human, when the children with dis/abilities that need these services are not attending school? As Portaus, et al says, "Until the reasons for educational exclusion are understood, the problems cannot be remediate" (2000). Furthermore, the research focuses on teachers, policy, and financial constraints. It seems counter-intuitive to focus on teacher training, financial constraints, and policy unless it is done in tandem with programs that lessen barriers to access educational opportunities. If children with dis/abilities are not in school, the other factors are a moot point.

This literature review attempted to traverse access to educational opportunities as mediated by dis/ability in sub-Saharan African and more specifically, Namibia. It is followed by the theoretical framework that grounded this study. First, I discussed the methodology that was employed to collect the literature and claim how the literature applies to the Namibian context. Then, I looked at the literature focusing on southern African regions and then Namibia. In each group of literature I examined the data that illustrates the barriers that children with dis/abilities face to access primary basic education. Finally, it was punctuated by the theoretical underpinnings.

This literature review argues the corpus of work excludes voices from the subaltern, and thereby cannot provide a complex tapestry of perspectives needed to address exclusion. The authentic perspectives of family/caregivers and children with dis/abilities are rarely heard in the literature; instead, policy makers and practitioners are foregrounded. In some cases, the literature claims to be espousing a familial perspective, but with further investigation, the teachers, Ministry of Education, and/or policy makers are speaking from their perspective about how the parents may be thinking and acting.

Adding to this monolithic view, children with dis/abilities living in Namibia, as in many developing countries, are not a quantifiable population and not easily accessible; reliable statistics simply do not exist. The World Bank also suggests there are some estimates, but the terminology and data collection process is problematic. UNESCO estimates that 115 million primary-aged children are

excluded from education (2007, p.17). 47% of these children reside in an African country (UNESCO, p. 17, 2007). Locating, dialoguing, and tapping into people with dis/abilities and their family/caregivers' perspectives provides a challenge to this genre of work.

### *Literature Review*

#### *Approach*

The approach used to identify literature began with electronic searches of research databases and then appeals to academics working in the field of education for children with disabilities in South Africa and Namibia.

The following research databases were searched: Academic Search Premier (EBSCOhost), Dissertation & Theses: Full text, ERIC (via CSA Illumina), JSTOR, LexisNexis Academic, PsycINFO, Web of Science, and Google Scholar. To ensure a comprehensive search, I included multiple search terms. The search terms were based on words: Namibia, Namibia and disability, Namibia and education, Namibia and handicap, South Africa, South African and disability, South Africa and education, South Africa and handicap, and so forth. In addition to search engines accessed from Arizona State University, the search engine from the University of Namibia was also searched using the same terms. While this search did return some seemingly valuable results, it has not possible to access the documents via electronic sources and/or inter library loan. Therefore, I will attempt to access these sources upon arrival in Namibia.

It is my decision in this literature review to include information from the some southern African countries, especially South African and Namibian, while excluding writings about other Sub-Saharan contexts. The reasons for including South Africa is due in part to similar histories, shared ethnic groups, shared and/or similar languages and language policy, and strong economic ties. These factors support my reasons for transferring some of the literature from South Africa to the context of Namibia. In contrast, some of the excluded literature was written in the context of “sub-Saharan Africa,” “Africa,” and in terms of “developing country.” In many cases, this information was found to be too general for this study. Factors related to accessing education are too contextual to use literature that speaks of inclusively of Africa or sub-Saharan Africa. Thus, literature from Namibia and South Africa was utilized in this review.

Exclusion of some articles was necessary based on multiple factors such as published date, population, and regional focus. Most articles were excluded if they were published prior to 1995, the population was not directly related to dis/ability, and if the region was not similar to Namibia.

#### *South African Context*

In comparison to Namibia, South Africa (RSA) has a larger body of literature and research that explicitly lays out the possible barriers to children with disabilities to access education. In general, the literature identified attitudes, notions of educational benefits, poverty, HIV/AIDS, multiple parental and school factors, and various barriers that prevent learners with disabilities from accessing

education (Department of Education, Republic of South Africa (RSA), 2001).

RSA, however, has a conceptual difference in defining the needs of children with disabilities. There has been a shift in terminology and ideology of the education of children with disabilities. The change has been from “special education needs” to “barriers to learning and development” (Muthukrishna & Schoeman, 2000, p. 315).

More specifically, the Department of National Education (2001) in South Africa attributes barriers to learning and development for all children (not just those with disabilities) to:

socio-economic deprivation; negative attitudes to and stereotyping of difference; an inflexible curriculum; inappropriate languages or language of learning and teaching; inappropriate communication; inaccessible and unsafe built environments; inappropriate and inadequate support services; inadequate policies and legislation; the non-recognition and non-involvement of parents; and inadequately and inappropriately trained leaders and teachers in education (Engelbrecht et al., 2006, p. 121).

These barriers are from a study published by the Department of Education in 2001 and form the backbone of most subsequent research in this arena (Engelbrecht et al., 2006, Muthukrishna & Schoeman, 2000) Additionally, Muthukrishana & Schoeman describe RSA’s framework for looking at the barriers. These same authors purport barriers “may be located in the learner, within the centre of

learning, within the education system, and within the broader social, economic and political context (2000, p. 324).

More specifically, much like Namibia, attitudes and beliefs of society are a factor (Engelbrecht et. al 1997, Engelbrecht et. al 2003, Engelbrecht et. al 2006, Harty et al. 2006, Maart et. al 2007, Muthukrishna & Schoeman 2000). These attitudes and beliefs may be about teachers' negative notions of disability, traditional beliefs systems that may equate disability to supernatural causes, beliefs of parents/caregivers toward the child and/or educational benefits. Liang et al. and Saloojee et al., (2006) suggests that some caregivers do not buy into the benefits of education for children with disabilities. According to Liang, et al., when children, especially young children, live in a disadvantaged community school going may not be seen as a benefit to child and/or family (2006, p. 259). Saloojee et al. corroborates this view noting that 53% of study participants noted that school was "not suitable for a child with disability" (p. 233) Moreover, one caregiver shared, "The child can't do anything-she is just a 'thing'" (p. 233).

Poverty and socioeconomic influences, pervasive in sub-Saharan Africa, contributes to children's inability to access education. Slightly over 40% of the population in Namibia lives below the poverty line (GRN, 2008). Liang et al., 2002, Muthukrishana & Engelbrecht et al., 2006, agree that many factors, like poverty, arrange for the need for children to stay home which obviously decreased access to basic services (Department of Education RSA, 2001). Saloojee, et al. (2006) concurs and claims some additional barriers to learning and development

to lack of money, limited knowledge of and use of available services and resources, and bureaucratic obstacles (Saloojee, et. al, 2006, p. 230). Other factors mentioned in the South African body of literature are: treatment of mental illness, finds barriers of healthcare, social services, and policy in rural Tsonga-speaking South Africans notes urban barriers such as health, age, violence, and insufficient food (Christianson, et al. 2002; Liang, et al., 2002, p. 259; Mzimkulu & Simbayi, 2006). Liang et al. goes further and notes non-barriers such as sex (p. 259).

In addition to poverty, HIV/AIDS is debilitating this region of the world. In South Africa it is estimate that about 16% of the adult sexually active population lives with HIV/AIDS (AVERT, downloaded 10/2010). The effects HIV/AIDS in regards to children with disabilities is studied by Wazakili, et al, (2006). The authors found that children with disabilities express having a greater need for love and acceptance than for practicing safe sex (2006, p. 86).

Furthermore, the authors noted that due to the lack of sexual knowledge and experience by child and parents, female children with disabilities are more vulnerable to contracting HIV/AIDS from unprotected sexual acts (2006, p. 84).

In addition to children with disabilities being affected, the education system is being paralyzed by teachers' absences and deaths due to this disease (UNESCO, 2007).

#### *Namibian Context*

The most germane literature on the topic of children with dis/abilities in Namibia, Africa, comes from an edited book by Engelbrecht and Green (2007)



and a National Report of Namibia by the Ministry of Education (November 2008). These two documents provide the most recent and detailed literature on barriers to education in Namibia, a policy overview, and critique.

Zimba, et. al begins the chapter by discussing conceptual, policy, and legislative challenges (2007, p. 39). UNESCO's definition, which mirrors Namibia's, of inclusive education is explained as concept that all learners should have access to quality education. The main claim is that barriers should be removed to allow all children access to education. The point is made that the National Policy on Disability is essentially a reiteration of the Salamanca principles which are based on inclusionary ideals that work towards "schools for all" (UNESCO, 2004, p. iii). The authors critique the Namibia policy because it does not provide "...clear legislative power and a comprehensive policy mandate on how inclusive education should be conceptualised, contextualized and implemented and its impact monitored and evaluated" (2007, p.41).

A task force was then developed to interrogate matters that created barriers to education. One major change that was made by this group was a definitional change of "children with special needs" (p. 41). The task force broadened the policy's definition to include "children with disabilities, children of commercial and communal farm workers, children who belong to indigenous minority groups, orphans and vulnerable children, street children, working children and children who reside in informal settlements/resettlement camps" (2007, p. 41). Via multiple policy and legislative frameworks, Namibia has taken

steps to begin the process of inclusive education. Zimba et al. claims that though steps have been taken, they may be misguided. He argues that other initiatives must be in place, such as adaptation of curricula by teachers, specially trained staff, modified physical structures, diagnostic testing, and clear legislative policies to mandate inclusive education (2007, p. 42).

The authors then illustrate barriers to education for children with disabilities. Barriers discussed are similar with other literature from the region including teachers' and society attitudes, teacher training, perceptions of education, curriculum, financial resources, and materials (2007, p. 43, 46-47). This data seem to be garnished from a survey, with no mention of sample size, methods, and limited explanation of results. While that does not invalidate the results that are discussed as barriers to inclusive education for children with disabilities, it does raise questions. Moreover, the barriers that are presented are from the teachers' perspectives and were seemingly uncovered during the proceedings of a conference in Namibia (2007, p. 50).

Obstacles for children with dis/abilities to access primary education were presented from narrow vantage points throughout the corpus of literature reviewed. Teachers, researchers, and ministry officials weighed in on the barriers. Parents and children with dis/abilities have had no voice in the literature.

The Development of Education: The National Report of Namibia by the Ministry of Education was a report written and submitted for the 48<sup>th</sup> Session of International Conference on Education, held 25-28 November, 2008. This

conference was sponsored by International Bureau of Education (IBE) and invited Ministers of Education and other stakeholders to participate in an international forum assisting Member States to “achieve quality Education for All” (MoE, 2008). This document traversed many educational topics from early childhood education to post secondary education; however, the conference was focused on “Inclusive Education: the Way of the Future” and therefore much of the report foregrounded education for children with dis/abilities.

This report highlighted the many strides education has taken since independence. According to this report by the Ministry of Education (2008), Namibian Sign Language is the official medium of instruction of Deaf learners, drafting of a National Policy on Inclusive Education is in progress, media programs have been created for the “sensitization...on the right to education,” increased enrollment at special schools, increased capacity at the existing special schools, the curriculum required teacher embed compensatory teaching at all levels and subjects, better qualified teachers, increase in public’s awareness on the right to education for learners with disabilities, training materials distributed to inspectors and advisory teachers about Inclusive Education, regional trainings on inclusive education, research and training to promote Namibian Sign Language, the annual census for education began collecting data in 2007 on the number of learners with specific disabilities, accommodations were put in place for national examinations for learners with disabilities, and increase in secondary learners being included in vocational training (p. 20).

The progress is great as reported by the Ministry of Education, but so are the barriers: long distances between learner's home and school, physical school facilities are not conducive to learners with dis/abilities-not physically assessable, sometimes no water, electricity, toilets, not enough space at special schools for learners with disabilities-long wait list, teachers are under qualified to implement compensatory teaching methods, and quality and quantity of pre-service teacher training for working with learners with disabilities is a "concern." On page 18, the authors claim that Inclusive Education ideology and dis/ability issues are not "embedded in pre-service teachers training at the colleges of education," "budgetary constraints remain a barrier to inclusion, families' economic hardship, HIV/AIDS, low parent involvement, negative attitudes molded from traditional and medical model beliefs, "lack of willpower from the public side to also ensure that the existing regulating legal frameworks are enforced by the government" (2008).

The report then explicitly spelled out the main barriers to inclusive education (p. 19): as economic barriers, political barriers: after effects of apartheid, social barriers, teacher's education, physical barriers, and communication barriers. Moreover, the literature provided repeated claims that budgetary needs are the most pressing issues that are impeding Inclusive Education (p. 17, 18, 19). While these are definably barriers to the implementation of inclusive education in the Namibian education system, I

suggest it is a much more deeply embedded issue within humans and solving the above problems would not ensure quality education for children with dis/abilities.

### *Conceptual Framework*

Conceptually, this study used a rich tapestry of concepts to inform the research questions. Understanding how humans learn, viewing mainstream ideas with a critical lens, realizing the views of Namibia, and interrogating the policies that regulate education were all vital to situate this research. Sociocultural theory, dis/ability perspectives, postcolonial theory, and the Policy as Practice framework guided my dissertation and will be discussed in turn (see Appendix E). Each section will describe the concept then explain how I applied it to my work.

### *Sociocultural Theory*

Sociocultural theory anchors my way of viewing human learning. This theory explains how learning and development occur as a mutually constituted relationship during participation in sociocultural activities, using tools or artifacts, within developmental history (Cole, 1998; Rogoff, 2003). These three notions are the main tenets of this theory and are taken in turn.

First, theories related to participation in sociocultural activities asserts that growth occurs simultaneously while the individual participates in activities. Rogoff claims that “cognitive, social, perceptual, motivational, physical, emotional, and other processes are regarded as aspects of sociocultural activity rather than separate” (p. 237, 2003). Therefore, individuals develop during activities and share learning across many domains. Essentially, learning is,

learning to participate. In regards to my research, the cognition behind the actions of parents determined child's level of inclusion within educational settings. Understanding how the parents have learned ways to participate in the community with regards to their child with dis/abilities has guided their actions and understanding.

During the activities that co-construct meaning, the participants are using cultural tools (artifacts). Conceptual and material artifacts are "an aspect of the material world that has been modified over the history of its incorporation into goal-directed human action" (Cole, p 117, 1996). Furthermore, Cole says that these artifacts regulate activities and can even change the individual (1993). Some examples are language, literacy, mathematics, maps, art, body language, sounds, diagrams, etc. These tools or artifacts are concurrently ideal and material and historical in nature (Cole, 1996). While Rogoff does not provide further detail about artifacts, Cole describes them in levels of primary, secondary, and tertiary (Cole, 1996). Primary tools are "directly used in production," such as a policy documents or language (Cole, 1996, p.121); secondary tools are representations of primary tools like a traditional belief (Cole, 1996, 121); and tertiary artifacts; included imagined worlds that can mold the way one sees reality (Cole, 1996, 121). Cultural tools have been used to directly create policy, facilitate the formation of traditional understandings of dis/ability, and thus impacting the way dis/ability is constructed and constituted.

The final tenet is that development and learning goes beyond participation in that exact time in space. Historical development, according to Cole, means using artifacts that have been “accumulated by the group in the course of its historical experience” (p. 110, 1996). It is about thinking about the past and knowing it has an impact on how we are learning now. For example, when I speak of Namibia and children with dis/abilities, I must look at the development over time (history) of the notion of dis/ability, not just what it looks like today. Furthermore, the history of Namibia has profound implications for the ways people understand their daily lived experiences. The profound repeated oppression that most of the Indigenous people of Namibia have experienced in their life significantly contributed to their ways of making sense of the world.

#### *Dis/ability Perspectives*

There are multiple ways to view disabilities within the field and also across cultural contexts. First, I will discuss my framing of dis/ability as guided by disability studies’ ideology. Then I will discuss a lens that will foreground African ways of knowing and understanding dis/ability.

Disability studies and the interaction of dis/ability and culture (or culture as disability in terms of McDermott & Varenne (1995)) heavily shape how I view the notion of dis/ability. One common thread is the resistance to hegemonic narratives and cultures for people with dis/abilities and creation of counter narratives that challenge deficit ideologies.

Disability Studies was born and guided by other social movements such as the Civil Rights movement. Scholars position the field to:

“Examine social, political, cultural, and economic factors that define disability and help determine personal and collective responses to difference. At the same time, Disability Studies should work to de-stigmatize disease, illness, and impairment, including those that cannot be measured or explained by biological science”

(Society for Disabilities Studies, 2004).

Furthermore, this field of study claims that dis/ability is part of our human experience however ascribes to the social model of dis/ability which highlights the environment as disabling (Gabel & Peters, 2004). Scholars in this field also aim to facilitate awareness of the experiences of people with disabilities while advocating for social change.

While I agree with much of this work, I question that dis/ability is solely a cultural construct. According to Gabel and Peters, in the field of Disability Studies there is an on-going debate about the social model of dis/ability and its shortcomings (2004, p. 585). An eclectic model, as suggested by Gabel and Peters, seems more viable. This model embraces diverse paradigms to explain dis/ability (2004, p. 586).

The ways that culture and/as dis/ability relate and inform each other also inform my scholarship. Culture as dis/ability, as McDermott and Varenne apply to a student named Adam, allows me to interrogate dis/ability and how we “are



involved at various times in recognizing, identifying, displaying, mitigating, and even hiding” differences (1995, p. 340). The effect of our actions as it contributes to the disabling of people is vital to my work. The interrogation of our roles in marginalization of humans will allow progress toward the neutralization of difference.

For the purpose of this study the “definition” of dis/ability is fluid, flexible, and contextually mediated. As Ingstad and Whyte say, “We are interested in people’s own experiences of what is disabling in their world rather than in some universal definition” (2007, p. 11). Therefore, in the study, all participants self-identified their family member as living with a dis/ability, thereby acknowledging societal barriers to full participation.

### *Critical Perspectives*

In addition to other aspects of my scholarship, one continuous strand throughout all my teaching and scholarship is the interrogation of oppression and marginalization of humans. Using this critical lens, I look for power differentials and social regulations in educational settings. This stance allows me to move beyond explanations of phenomena to a place that questions and advocates for social change. As an allied other, as described by Rogers & Swadener (2001), I attempt to stand with people as we advocate for change toward equality for all and as we interrogate the sociocultural activity that is often embedded in power relationships.

### *African Scholarship*

As this study is situated in Namibia, Africa, it is imperative that the work foregrounded African scholars. Scholars, educators, families, children with dis/abilities, and other stakeholders that live and work within the African context have much to offer and are best situated to provide insider knowledge. Therefore, I have sought scholars' work that live and/or work in the African context. Problematically, efforts to locate and/or receive such resources are often unsuccessful. It is unknown if I do not have access through the electronic sources offered to that or me the body of literature is simply small. Therefore, the three germane authors that inform my learning, in addition to related articles, are Ali A. Abdi, and R.F.imba, A.D. Mowes, and A.N. Naanda from Namibia.

Abdi has co-edited two major works in 2005 and 2006 on educational issues in Africa. His work views education through a critical, postcolonial lens. In addition to this general work on Africa, Petra Engelbrecht edited a book in 2007, which contains a chapter byimba, Mowes, and Naanda, that speaks specifically to sub-Saharan African countries. Combined, these three works, with supplemental peer reviewed research in the region, informed my scholarship on Namibia.

### *Postcolonial Analysis*

This work is guided by postcolonial framings that demand the considerations and the implications of the political and economic power forces that have regulated people, cultures, languages, indigenous ways of being to the

margins. This work is heavily based on the works of Ngugi Wa Thiong'o, Leela Gandhi, Linda Tuhiwai Smith, Edward Said, and Joel Spring.

In my work, I place primacy in the essential need for people (indigenous and/or people with dis/abilities) to claim their rightful place in society while their choices, histories, cultures, and languages are viewed as equally important to other forms of world views. In addition, to question how to create a schooling model for children with dis/abilities that is not dominated by western schooling that has been imposed via imperialism and Christian missionaries (Spring, 2008, p. 332).

The central postcolonial notions that guided this work are ideas of the hybridity, othering, and subalterns. The multiple layers of these terms allowed me to view notions of dis/ability and its intersection with history and current state of imperialism in Namibia.

Hybridity, as described by Bhabha, speaks about the complex, mutually constructed ways of being that were inherent when colonization occurred, and continue to be lived vis-à-vis imperialism and diffusion of western thought (1994). This space of intersection produces a tangle of thoughts, beliefs, behaviors, policies, languages, and ways of schooling, which are negotiated by local actors. In this study, a tension between indigenous ways of knowing and being with western ways illustrated this hybridity of existence. Trying to reconcile education and dis/ability became quite contested.

Othering of people with dis/abilities permeated the findings of this study, which thereby illustrated how they function in the subaltern. Both of these terms are critiques and embedded in the work of Gayati Spivak. Othering, within the postcolonial discourse, is understood as a binary that produces subjects. Either able bodied, or disabled body; either able minded, or disabled; these binaries are disempowering to people viewed in contrast to "normal" people. The "othering" of people with dis/abilities arranges for them to be assigned "inferior rank," or in the subaltern, and thus denied access to full educational opportunities (Gramsci, 1971; Spivak, 1988).

Weaving sociocultural theory with critical stances from dis/ability studies, African scholars, and postcolonial perspectives allowed me to view phenomena in a complex and multidimensional way. Sociocultural theory is the foundation to see how changes can occur in the social and educational lives of indigenous people and/or people with disabilities. The other layers allowed a critical view of the phenomena that investigates the historical context, the current place of ways of being and thinking, and how can we advance the case to become more open and accepting to multiple ways of being human.

### *Policy as Practice*

Policy as Practice is the final layer incorporated into my theoretical framework. This framework was born from anthropology, sociology, feminist, and critical perspective, thus fits well with the other components of my theoretical framework (Levinson & Sutton, 2001, p. 1). These authors argue that policy is

much more than text in a policy document; it is a dynamic and negotiated “interrelated process over time” (Levinson & Sutton, 2001, p. 2). These normative guidelines or authorized policy is then appropriated by local actors utilizing their agency in “a form of creative interpretive practice...in effect often making new policy in situated locales and communities of practice” (Levinson, Sutton, & Winstead, 2009, p. 767).

A critical component of this framework is policy as a social practice that is built on the notion that appropriation of policy is an act of power (Levinson, Sutton, & Winstead, 2009). It further allows unpacking of policy to view resistance, forms of domination, exercise of power, and how policy is locally being implemented for social transformation or reification of oppression.

Incorporating a policy framework is essential to my work to explore the connection between daily lived education experiences for children with dis/abilities and the official policy. Uncovering the consonance and dissonance between policy and practice informs the research and further allows a view of the complexities and interconnectedness of issues.

## CHAPTER 3

### Research Design and Methodology

This study used ethnographically informed qualitative field research that acknowledged the dynamic nature of the study and its design. The multiple method study incorporated interviews, participant observation, and field notes to gain an understanding of why children with dis/abilities in rural northern Namibia are not fully accessing educational opportunities. Additionally, a qualitative policy analysis framework was utilized to understand the intricacies of cultural expressions and human motivation to make sense of how policy is appropriated through practice. This chapter begins with the sample, moves to methods, then turns to how data was analyzed; it is punctuated with considerations of trustworthiness and ethical issues.

#### *Setting and Sample*

This fieldwork was conducted in rural northern Namibia (see Appendix B). As a U.S. Peace Corps Volunteer from 1997 to 1999, I worked in a rural community in this region and resided with a local family. This family became, and continues to be, an adoptive family to me and an integral part of my life. The infrastructure of many of these rural communities consisted of spread out areas of traditional homesteads, “roads” that consisted of paths in the deep sand marketed by trees and homes, collection of cuca shops, and local village schools (See Appendix C). While some communities had access to water and electricity, those

amenities are not the norm. Most rural communities do have cellular phone access, albeit at times people must stand on high ground to receive a signal.

The sample for this study was located via purposive and snowball sampling. Random sampling was not viable therefore, as Seidman (2006) suggests, the researcher should utilize purposive sampling (p. 52). As this is a very specific population, not easily accessible, purposive and snowball sampling was the most practical option. In fact, the when I discussed my study with the Regional Director of Education, she asked, “how will you find these children?” (personal journal, January 9, 2009). I relied heavily on my Namibia family for purposive sampling and secondarily for snowball sampling to secure the participants.

The actual number of participants was an important decision that hinged on multiple factors such as study trustworthiness and ability to find willing participants. Seidman (2006) hesitates to establish a number that indicate “enough” participants (p. 55). With that said, a gauge can be if others outside the pool can connect with the experiences of the participants and there is repetition of information provided by participants (p. 55). Via purposive and snowball sampling, I secured five participant families, which included seven people with dis/abilities, for this study. Each participant provided unique perspectives on people with dis/abilities and education.

The first method of locating subjects was purposive sampling vis-a-vis Namibian contacts which garnished two participants. The first participant was a

cousin of a teacher that I used to work with in the local school. She was able to contact her mother, who lived in the village, who cared for him and arrange access and permission. The second permission was granted by a local teacher, and mother of child with a dis/ability. She was a teacher at a local school that was headed my “adopted Namibian mother.”

The other three participants were found using snowball sampling. I was discussing my work with a ministry official and she suggested I contact a local nonprofit organization that works with children with dis/abilities and their families. This organization does community outreach and provides services for children and families at their center; therefore the director has many contacts in the rural areas. He was able to contact a regional councilor who then contacted two families within his rural consistency. These parents agreed to meet me and the director for an interview. One interview was held at the organization’s headquarters. The other two were held in a village about a 2 hour drive from the town. These were fruitful interviews that offered a complex understanding of children with dis/abilities and school going. Unfortunately, this research took place during rainy season and that limited the amount of time and contacts made with this geographical location. The first and only interview conducted with these participants involved the vehicle getting stuck multiple times in deep mud to and from the interview site.



### *Gaining Access*

Gaining access was the most vital concern in conducting this research. There were two layers of access that I had to acquire to ensure the success of the study. The top layer was acquiring permission to conduct research in Namibia. Locally and personally, I also secured permission to conduct research with the people of interest.

In my previous experience, the institutional level of permission was granted by the National Institute of Education Development (NIED) located in Okahandja, Namibia. This institute is the epicenter for educational research, policy development, curriculum development, and other technical issues. Upon further inquiry, it came to my attention that source was no longer where I should obtain consent. Thus, upon arrival in Ondangwa, Oshana Region, I contacted the Regional Director of Education to seek permission. On January 9, 2009, I walked into the Ministry of Education's regional office and once I found the receptionist, asked to speak with the director. As the director was out of town, she directed me to the School Counselor of Special Education who was able to discuss the study with me. She seemed excited about the work and said, "this is very important work" (personal journal, January 9, 2009). She asked me to contact the Regional Director via email but did not have her email address; she then tried to call someone to get it, but the phone was not dialing out. When I came back later in the day she was not there and I met with acting director. She was able to give the Regional Director's email and phone number so I could attempt to make an

appointment with her upon her return from the capital city (personal journal, January 9, 2009).

A few days later on January 12, 2009, I met the Regional Director at her office to discuss my study and obtain permission. She had already discussed it with her colleagues and even had some suggestions about ways to locate children with dis/abilities. The letter of permission was written, signed, and stamped, and approval was granted.

The second layer of approval came from the participants. All participants granted verbal permission. In all the interviews except one, the interpreter elucidated consent from each participant orally as to not assume literacy in Oshiwambo or English. In one case I read the consent in English as per the request of the participant (See Appendix E for informed consent form). As I used purposive and snowball sampling, the permission was first discussed by an ally that was assisting me in locating participants. Armas's mother was first approached by my Namibian mother; three of the participants were approached by the director of a nonprofit that works with children with dis/abilities; and the oldest participant was approached by my former colleague, which was her mother. These contacts greatly increased my access and willingness of participants to take part in this study.

### *Research Methods*

The methods of this study range from securing permission to data analysis. It began with participants providing consent to allow me to interview, observe,

and take field notes. After data was collected, I analyzed the discourse looking for shared cultural models and a supporting method for analyzing policy was incorporated utilizing Policy in Practice as per the framework of Sutton & Levinson (2001). Each method complemented the other to increase trustworthiness, dependability, and triangulation. Following are the methods for the fieldwork trailed by the policy methodology.

### *Fieldwork Methods*

The central method of this interview process was based on the framework developed by Irving Seidman that, “centers on a phenomenological approach to in-depth interviewing” (2006, p. ix). The method utilizes a storytelling approach by the participant that enables us to understand their way of knowing about their lived experiences and how they interpret it (Seidman, 2006, p. 9). As Seidman (2006) says, “individuals’ consciousness gives access to the most complicated social and educational issues, because social and educational issues are abstractions based on the concrete experience of people” (p. 7).

The optimal interview process consisted of three separate interview sessions lasting approximately 90 minutes each. The first interview was a focused life history of the family member and the person with dis/abilities. To begin the session, I asked the parent to tell as much about their life and experiences with dis/ability in relation to their family member (Seidman, 2006, p. 17). The discussions flowed through a myriad of issues from participants’ educational background, discovery/identification of dis/ability, experiences in community,

their belief system, and other issues that flowed from the conversation. At times I provide prompts that asked for them to reconstruct events about childrearing, school going decisions, and family beliefs in the context of their life (Seidman, 2006, p. 17).

Seidman's (2006) framework requires the second session to, "concentrate on the concrete details of the participants' present lived experience," as it relates to their child with dis/abilities (p. 18). This included asking the participant to provide a detailed description of what a typical day (waking until sleeping) looked like for the person with dis/abilities and description of their daily lived experiences (p. 18).

The third and final interview centered on participants' reflections of the meaning of these experiences (Seidman, 2006, p. 18). The author explains, "making sense or making meaning requires that the participants look at how the factors in their lives interacted to bring them to their present situation. It also requires that they look at their present experience in detail and within the context in which occurs" (2006, p. 18). As each interview was unique, I looked back over the previous two interviews and constructed questions or prompts based on their stories. Many of my questions started something like, "considering what you said about" and then I filled in the blank with an experience they shared, and finish with "what does that mean." The third interview also included two questions about the person with dis/abilities' future. The first question was about where they may be in five years and then followed by where they may be in 10 years.

The integrity of the interviewing process demanded three sessions, at 90 minutes per sitting, spaced about 3 to 7 days apart (Seidman, 2006, p. 21). Not surprisingly, due to uncertainties in the field, there were many departures from this structure. Factors that caused deviation included needing additional time due to the interpretation process and an inability to meet with participants multiple times. Logistically, transportation was the biggest obstacle to multiple meetings; either the parent had to work and/or did not have access to transportation or my transportation was not equipped to traverse the deep mud. Therefore, some interviews were condensed into one longer session; the integrity of all components of the interview process was not compromised.

Although Seidman (2006) suggests that interviewing could solely be an adequate method investigation for understanding a phenomenon, I incorporated participant observation and field notes. My intention for observations was to study the routines and interactions of the family throughout a day as detailed by Bailey's participation framework (2007, p. 80). The field notes, the third method, were an imperative part of this process. Bailey claims, "If you are not writing field notes, then you are not conducting field research" (p. 113).

Observation allowed me to view with my own eyes some of what the participants had recounted during interviews. The observations included researcher as participant and were unstructured in nature. Both of these decisions were made with consideration given to the impact of the researcher in the setting. Given my experience in this setting, I knew it would be impossible for me to

function solely as an observer. The family and children were quite interested in me, even in cases where I went to the homestead multiple times and for lengthy periods. Secondly, the observations were unstructured, yet I preplanned for observations. For example, I explicitly observed for apprenticeship learning of life skills and contributions to the functioning of the home (as valued by African epistemology). During the unstructured observations, in general, I looked for use of space, physical objects present, the people involved and their actions, the related acts people do, related events people carry out, sequencing of events, goals actors are working towards, and emotions that are felt and/or expressed (Bailey, 2007, p. 84).

The final component of this triad of methods was field notes. This method allowed me to record, “detailed descriptions, paraphrased quotations, self-reflections, and profound thoughts” (Bailey, 2007, p.113). Furthermore, Bailey suggests that field notes assist in the direction of the study, methodological decisions, analysis, and the creation of data (2007, p.113). As Bailey (2007) names it, field notes are the backbone of field research; therefore, much consideration was given to its organization. The notes were classified into six groups of data of detailed description, things previously forgotten, analytic ideas and inferences, personal feelings, things to think about and do, and reflexive thoughts (Bailey, 2007, p. 15).

Detailed descriptions included observations and interactions in the field (Bailey, 2007, p. 115). These events were recorded in chronological order and

with a description of the observable behavior, sans my interpretations (p. 114).

Bailey (2007) suggests differentiating field notes using double quotations around verbatim quotes, single quotations around paraphrasing, and no quotation marks when noting the general idea of someone's statement (p. 116).

The second types of notes were documenting things previously forgotten. If at some point I remembered an action, statement, or conversation that I was unable to jot down at the time of its occurrence. In that case, I returned to the day it occurred and document it. In a case that I could not remember the chronological order of its occurrence, I recounted the event in the notes on the day I remembered it and indicated it is a previously forgotten note (Bailey, 2007, p. 117).

Bailey's (2007) next type of material to record is analytic ideas and inferences (p. 117). This section of notes included social meanings of events, patterns, my interpretations, theoretical implications of interactions, and general ideas (p. 118). Bailey notes, it is also acceptable to write down all my thoughts and ideas without judging at the time if they are trivial, valuable, or implausible (p. 118). As Bailey cites from Lofland (1971), "the more analysis that occurs in conjunction with the creation of field notes, the easier the project will be to complete" (2007, p. 118).

The fourth and fifth element of field notes was recording my personal feelings and things that I needed to think about and do. Journaling my personal feelings and impressions seemed a bit counter-intuitive in research, but as Bailey explains, feelings have roots in social events and thus are significant to record (p.

118). My feelings had implications for interactions and emotional reactions of people and events. By recording this, it enabled me to better analyze the data (Bailey, 2007, p. 118). The next element was much like a “to do list” of sorts. It was writing down “things to think about and do” I will record what needs to be followed up on, questions I want to ask, things to do the next day, and items that must be completed (Bailey, 2007, p. 118).

The sixth and final facet of field notes is the researcher’s reflexive thoughts. Bailey (2007) defines this as the researcher’s, “active consideration of his or her place in the research” (p. 119). The struggle with one’s decisions, interactions, and direction of the research was vital to this process. Grappling with how the researcher was part of the research, impacted the data collection, and was an instrument of the process included in the final manuscript, adding depth to evaluating the research (Bailey, 2007, p. 118). More about reflexivity and ethics will be discussed later in this chapter.

Bailey (2007) offers some final considerations on field notes and closure of the field research process: limit observations/interactions to three hour blocks, record observations as soon after each observational session, 1 hour of observation can generate 13 pages of field notes, and type field notes soon after observation (p. 120). The final step was closure of the field experience and to begin the analysis. The operative question however, was when and how to do so. As suggested by Bailey and Seidman, many factors determined when the researcher left the field. For me, this was determined by time and financial



constraints. While in the field, the researcher did extend the trip by two weeks. During the process of leaving, I considered how to provide closure to the relationship between myself and the participants (Bailey, 2007, p. 122). Things also considered were how to end our face-to-face relationship, discuss what future contact we may have, and the opportunity for “member checking” (Bailey, 2007, p. 122). This was done with all participants but in varying ways. Each participant was given a small token of my thanks, such as a t-shirt, bag, or hat and we exchanged contact information. Some participants and families came to my homestead cuca shop for sodas at the end of our time working together; some participants and I provided closure at the end of our interview. Due to communication constraints (no access to computer/email, limited cell phone access, timeliness of international mail), participants were not asked to member check; others had been charged with that duty.

Member checking occurred in this study to enhance its trustworthiness and has occurred periodically throughout the manuscript writing process. Member checking, as described by Bailey (2007), happened with people from the region and experts in the field (p. 185). Within these groups, I solicited assistance from a community member that I met during my Peace Corps experience that was born and raised in Namibia. During the time I asked him to “member check,” he lived and worked Nebraska. In addition, I sought guidance from an academic that works in special needs education field.

These methods facilitate making explicit the complex influences that affected children with dis/abilities and full access to formal education. This attempt to uncover the family/caregivers' was of knowing and understanding why their children with dis/abilities do not/should not fully access formal education is the backbone of the interview process.

### *Policy as Practice Method*

This field study, in addition to working with families, attempts to address implications of education policy. The Policy as Practice framework by Sutton and Levinson (2001) and subsequently Levinson, Sutton, and, Winstead (2009), guided my understanding of locally appropriated education policy for children with dis/abilities. This newer method seeks to understand policy in “cultural, contextual, and political dimensions” (p. 2).

More specifically, Policy as Practice seeks to “reconceptualize the notion of policy itself as a complex social practice, an on-going process of normative cultural production constituted by diverse actors across diverse social and institutional contexts” (p. 1). Therefore there is a notion of “authorized policy” and an “appropriation” of the policy that ground this analysis (p. 2). First, authorized policy is indicative of an “official state policy” serving as a type of “operating manual” for the institution (p. 2). Appropriation of the policy incorporates the authorized policy with “other moments of the policy process, when the formulated charter, temporarily reified as text, is circulated across the

various institutional contexts, where it may be applied, interpreted, and/or contested by a multiplicity of local actors” (p. 2).

This study makes explicit the official policy while investigating how it has been appropriated in rural northern Namibia by locally unauthorized actors. In conjunction with support from interviewing, observation, and field notes, I sought to unmask the “cultural meaning used to interpret their experience and generate social behavior” (p. 3). The layering of appropriated policy and authorized policy will foreground “values, beliefs, and identities in the policy process,” and allow us to gain an understanding of the complex nature of children with dis/abilities and their school-going status (p. 3).

The focal point of the data analysis was to make visible how participants shared cultural models of dis/ability motivate their local creation and appropriation of education policy. The method towards understanding was the generation of “case studies,” in the terms of Sutton & Levinson (2001). In lieu of a case study, I used the same interview format as prescribed by Seidman (2006).

### *Data Analysis*

Data collected from interviews and policy documents were analyzed with methods selected for their ability to expose cultural understanding and policy appropriation of authorized policy. According to Strauss (2005), there are multiple ways that cultural understandings and ideologies exert force on human thought and action (p. 203). To address the first research question, vis-à-vis non keyword analysis, I attempted to understand how people internalize and

understand shared cultural models of dis/ability and education opportunities. To answer the second research question focused on policy analysis, I utilized the specific analysis methods spelled out Sutton & Levinson (2005). This section considers each method for interviewing and policy analysis in turn.

### *Discourse Analysis*

To uncover the intricate workings of culture that are embedded in talk and influence policy, I utilized Strauss' method to understand, "ways in which ideologies and cultural understanding have power over thought and expression (2005, p. 201). Cultural models exert power on how people think about children with dis/abilities, their school going abilities, and how those beliefs manifest as participation in society.

The main analysis attempted to uncover assumptions, specifically shared meanings among the community. Shared cultural assumptions were investigated using keyword analysis and discourse analysis without keywords (Strauss, 2006, p. 205). A belief that is so deeply internalized is a cultural model; these assumptions are so engrained that one is not even aware of holding the belief and do not consider there to be any alternatives (Strauss, 2005, p. 201). To bare the shared cultural assumptions among a community, I analyzed cultural models with and without keywords. When keyword analysis was employed, the researcher sought in the discourse for repeated nouns, verbs, adjectives, and/or adverbs that convey important meanings (Strauss, 2005, p. 205). Beyond the keyword, the researcher also looked for words associated with the keyword that carry similar

meaning that will support the analysis. After some discussion and contemplation, the use of keyword analysis was discontinued for multiple reasons. As the interviews did not have a consistent interpreter and English was not first language, the concern was words were not consistently used to discuss the same phenomena.

### *Policy as Practice Analysis*

The Policy as Practice framework allowed me to mine for ways local agents, “‘take in’ elements of policy, thereby incorporating these discursive and institutional resources into their own schemes of interest, motivation, and action” (Sutton & Levinson, 2001, p. 3). Furthermore, the use of this critical framework facilitated a way to unpack policy and view it “as a kind of social practice, specifically, a practice of power” (Levinson, Sutton, & Winstead, 2009, p. 767).

Vis-à-vis the data gleaned from interviews in conjunction with document analysis of current policy documents, I sought an understanding of the local actors’ appropriation of inclusive education policy. To do this, I looked for ways the participants in the study resisted the policy, used their own agency to create and appropriate local education policy, sought social transformation, sought social order in practical contexts, and ultimately “how local actors and dynamics shaped policy outcomes” (Levinson, Sutton, & Winstead, 2009, p. 772).

### *Trustworthiness, dependability, and generalizability*

Qualitative researchers must address trustworthiness, credibility, reliability, and generalizability to enhance the research. These components also form the foundation that allows research to stand up to critical evaluations.

Trustworthiness indicates that a researcher has provided enough information to enable the reader to examine the research and determine that the results are believable and valuable (Bailey, 2007, p. 181). Some researchers frame trustworthiness in terms of validity; Seidman (2006) claims that inherent in the three part interview process is a structure that augment validity of the research (p. 24). For this study, I will frame the believable and worthy in terms of trustworthiness.

Bailey (2007) indicates that the second component used to evaluate research is credibility. Credibility “implies believability, authenticity, and plausibility of results (Bailey, 2007, p. 182). Next component is dependability, which “requires internal consistency among the core elements of the research project-research questions, data collection, analysis, and conceptual understandings-its presence helps ensure trustworthiness (Bailey, 2007, p. 184). It is not to confuse dependability as reliability; as this project is not necessarily orientated toward finding reliability or consistency within the data from participant to participant, it is vital to note that my methods are consistent to ensure the data collection was trustworthy. The final component is generalizability. This research did not utilize a random sample, therefore does not

purport to have external validity and generalizability. In contrast, I substitute the notion of transferability or the ability to apply the findings outside of this specific research context. This can be done by naturalistic generalizability (Bailey, 2007, p. 183). This specifies that an experienced researcher can read a study and determine, based on explicit details of the setting, if the findings can be extrapolated to other contexts (Bailey, 2007, p. 183).

#### *Parameters & Limitations*

This field study was constrained by factors that limited some aspects of the translations, sample size, and the sampling process. While the study is sound methodologically, facets of the work were limited by an inability for thoroughness in certain situations.

The use of language was a contributing factor to the parameters of this study. For the interviews, English and Oshiwambo were both options for the medium of discussion. All but one interviewee wanted the interview conducted in their first language of Oshiwambo, therefore a translator was utilized to facilitate the interviews and discussions. Two different translators were used in the sessions; in all instances the translation was done in a manner that was not word for word translation. The translator would listen to the speaker and convey the meaning of the dialogue to the listener. This step may have unintentionally caused a change in the words, meaning, and ideas that the interviewee and interviewer were attempting to convey.

The sampling process and number of participants also contributed to the limitations of this study in multiple ways. Participants of this study self-identified as parents and/or caregivers of children or adults with dis/abilities. In some cases, I did not meet the child with dis/ability and thus relied solely on the self-identification. During the interviews the parents described how their child functioned at home and at school if applicable. All but one parent portrayed their child's abilities in a manner that would more than likely identify them with a cognitive dis/ability. The one parent that did not explicitly discuss her child's functioning did explain many of the same challenges to having a child with dis/abilities. The ability for the researcher to meet the children and ensure that the child and parent were a fit for the study was limited due to factors of location and accessibility. As it was the rainy season during the time the study took place, travelling to some sites took hours and included getting stuck in deep mud and thus having to dig out the vehicle. Due to this constraint, it was not plausible to return to the site to conduct follow up interviews.

### *Ethical Concerns*

Ethically, this field study provides multiple concerns. The nexus of the concerns are the assurance of "rights, privacy, and welfare" of the children with dis/abilities and their families (Berg, 2001, p.39). Revolving around that nexus are the issues of cross-cultural research and foregrounding the subaltern.

In this cross-cultural study, interlocking issues of language, power, class, and my whiteness carried significant concerns. The concerns of doing cross-



cultural work are so interwoven that they cannot be separated. Language of the interviews was conducted in either English or Oshiwambo, as per the participant's preference. An interpreter always accompanied me to ensure the power of the English language is mitigated as much as possible.

As a researcher, I recognize the issues of power, class, and whiteness are inherent and cannot be changed or given away. Reflexivity on my part attempted to address, not erase, these issues. While I will never be able to see through the eyes of a rural Namibian family/caregiver or a child with a dis/ability, I must acknowledge that "interpretations are always filtered through our own cultural lens" (Shope, 2006, p. 171). Therefore, I was constantly interrogating my epistemology, methodology, and identity to facilitate the most ethical research (Mama, 2007, p. 1).

Much of the positivistic research on children with dis/abilities the world over excludes children's voices from the dialogue and portrays them as powerless victims (Diaz Soto & Swadener, 2005, p. xii). My hope is this study will be able to foreground some of their experiences vis-à-vis their parents and/or caregivers. While this will not completely reposition the child with dis/abilities as participant, it will mitigate some of the sting of the child as a subject. Snelgrove (2005) posits this struggle by saying, "we must try to take on the challenge of foregrounding the voices of the most excluded others, students with 'moderate and severe intellectual disabilities', listening to their stories and transforming these into the context of inclusion" (p.314).

In addition, ethically, I gave considerable consideration to decolonizing methodologies. Throughout the literature review process, fieldwork interactions, writing of the manuscript, and sharing of final data, I attempted to mitigate, “the ways in which the underlying code of imperialism and colonialism” are reified vis-à-vis this research (Tuhiwai Smith, 1999, p.7).

Among some examples of ethical considerations, the literature review was comprised as many local and/or indigenous sources as possible; international aid organization literature was only used in cases where no local or regional sources were found. While in the field, I always had a local ally with me and the participants were initially contacted by the Namibian ally. Cross cultural sensitivity was in the forefront of my interactions and interview questions; my interactions were often processed with the interpreter to ensure appropriateness. As the manuscript reaches its final phase, the introduction and summary of findings will be translated to Oshiwambo and forwarded to the participants that indicated their interest.

## CHAPTER 4

### Findings: Sociocultural Context And Narratives

This chapter provides a summary of findings based on the qualitative interviews and draws heavily from the actual narratives of parents and other family members of people with dis/abilities. It begins with a brief historical context of children with disabilities and the education system in Namibia, followed by the findings as shared by family members, concluding with a brief discussion of major themes from cross-case comparative analysis. While analyzing the data, I sought ways of understanding what deep assumptions (cultural models) the family held regarding dis/ability.

To help uncover the implicit cultural models, I used phenomenological interviews. Each interview included three parts; some done in three sessions and some take place in one session. Each interview segment is distinct in structure, as advocated by Seidman (2006), and discussed in the previous chapter. Part one was the focused life history, which allowed me to elicit information about experiences the family and/or child had as a consequence of his/her dis/ability. Parents also had the opportunity to share their experiences with dis/ability. Next were the details of their lived daily experiences; this entailed an explanation of the daily schedule of the person with a dis/ability from the time s/he woke up to when s/he went to sleep. The final part was a reflection on the meaning of the experiences. While it is understood that each part of the interview process was a meaning making experience, as Vygotsky says, “the very process of putting

experience into language is a meaning-making process;” this in this portion of the interview, I specifically asked the interviewee to reflect on the meaning of the experiences we discussed in the prior two interview segments (Seidman, 2006).

Each interview was conducted with one participant, me, and sometimes a translator. For the sake of conciseness, I have not provided citations after each statement; it should be assumed that the conversation and statements come from the participants unless otherwise noted. In the case when a translator was utilized, all statements should still attributed to the participant and certain pronouns were altered to indicate the words are of the participants. Throughout this findings section, I drew heavily from stories as told to me by families of children with disabilities to make sense of the deeply internalized beliefs that contribute to the exclusion of children with disabilities from school. The exclusions that occur for multiple and varied reasons may be “related to history...political and economic circumstances, and geographic influences” (Mallory, p. 3, 1993). However, most of these explanations have been espoused by teachers, school administrators, policy makers, and academics. Families of children with dis/abilities and people with dis/abilities have rarely had a voice in the discourse; this work will foreground the parents’ perspectives and stories to add breadth and depth to our understanding of this phenomenon.

### Context

In sharing these stories, it is vital to understand that they should not be interpreted as a static, essentialist picture of the child, family, perceptions, and

context. In fact, it is quite the opposite. Varenne & McDermott warn that when share stories about families and children with disabilities it often leads to blaming, pitying, and/or celebrating the person (p. 131, 1999). That simply does not add any benefit to the person or others, “everyone is left without rationality or intelligence, without agency or appreciation...” (Varenne & McDermott, p. 131, 1999). The authors suggest the best way to authentically represent the person and the stories is to begin with painting a picture of the historical conditions “as structured tools to be carefully accounted for while showing how persons manipulate these conditions to make new ones for each other” (p. 132, 1999). Also, remembering that historical context consistently exists in a person’s daily lived experiences.

The history of Namibian education was examined in more depth in Chapter 2; this portion is intended to serve as brief contextual piece allowing the reader to develop a schema that illustrates the child and family participate in a dynamic nature in which they have agency in recent history. We know that most children with dis/abilities, termed “children with special needs” in Namibia, do not have access to education and endure social exclusion (MoE, 2008, p. 15). However, progress is being made. For the first time ever, the census taken during 2007 included collection of data on dis/abilities; it was reported that 27,880 learners (with special needs) functioning within the parameters indicated on the census (MoE, 2008, p.20). In contrast, there were 2,953 learners with disabilities out of 570,623 learners in the Namibian school system (MoE, 2008, p. 3).

It should also be noted that demands are being put on the education system to support children with special needs. About 14 legal and regulatory frameworks indicate and demand education for children with dis/abilities (MoE, 2008, p. 16). The call from parents and dis/ability advocates for accessible education for children with special needs has increased, creating “long waiting lists” and mandating facility expansion in special schools (those for children with dis/abilities). (MoE, 2008, p. 10).

The current day situation demonstrates how people have influenced conditions, policies, public discourse to open spaces for children with dis/abilities in the social sphere and increased educational access and opportunities. Previously, the social and educational spheres were closed to people with dis/abilities. During apartheid, “We have found the human rights have been infringed as regards to the right to education, the right to information, the right to freedom of movement, the right to culture, the right to freedom of religion” (O’Callaghan, 1977, p. 168).

#### Interview Data

The following sections present portraits of the focal children in the study and draw heavily from narratives drawn from the family member(s) interviewed. The constructed portraits that result are an analytic tool for better understanding the implicit views and life experiences of the child and his or her family. They have been arranged in chronological order according to the child’s age. The first interview was with Armas’s mother, then Indila’s mother, followed by Magano,

Toivo, and Nailoke's father, then Ndahafa's mothers, and finally with Tangeni's aunt. Figure 1 provides a concise description of participants and persons with dis/abilities.

Figure 1

Participant	Relationship	Age	School going status
Person with dis/ability			
Mrs. Iipinge	mother	38	college educated
Armas	son	7	attended before onset of epilepsy
Ms. Elago	mother	27	unknown
Indila	daughter	8	did not attend; received services from a nonprofit organization
Mr. Angula	father	62	unknown
Tovio	son	10	attended school
Magano	daughter	10	attended school
Nailoke	daughter	7	attended school
Mrs. Haufiku	mother	38	unknown
Ndahafa	daughter	16	attended school
Mrs. Paulus	aunt	unknown	never attended school
Tangeni	nephew	36	never attended school

Description of Participants

### *Armas's Story*

The story of Armas was told by his mother, Mrs. Ipinge, in three separate interviews that took place at her homestead in the sitting room. Each session was 60 minutes to 90 minutes in length. Mrs. Ipinge wanted to conduct interview in English, therefore no translator was present. As Mrs. Ipinge is a teacher at the local school, we often arranged to talk in the late afternoon/early evenings. It was still hot and dry and sunny out while we conducted the interviews in her sitting room. This homestead is hybrid of a traditional homestead, in that it has a few huts, and a more contemporary area because of the chain link fence around the property, and a relatively large home made from bricks and corrugated tin roof.

#### *Part 1: Life History*

At the time of this interview, Armas was a 7 year old male, who lived in a rural, traditional home in the Oshana region of northern Namibia. He lived with his mother, caregiver, and four other children (siblings and a cousin). The caregiver was primarily responsible for Armas during the day when his mother was teaching. She cared for him in addition to household duties that included cooking and cleaning. His father worked on the coast, in Walvis Bay, Namibia and came home on holidays.

Armas was born a healthy child in 2001. At age 3, he was progressing typically just as his two older siblings. Mrs. Ipinge said, “he can walk, he can speak, he can do everything” (January 7, 2009). Then in mid-April of 2004, he



began “fainting.”<sup>1</sup> It was one occurrence and, “then I took him to the hospital, ah, maybe it’s malaria because he was the temperature was so high. Just a high fever.” By December of that year the seizures had increase in severity and frequency and occurred about 10 times per night. She took him to the hospital and he was admitted but was not given a diagnosis or recommendations for treatment.

By March of 2005 the seizures had become more frequent and the doctors recommended they take him to the capital city of Windhoek, which is about an eight hour drive. At this meeting, Mrs. Iipinga said they “scan to test the brain and the whole body to maybe find whatever problem with the brain, but they say nothing. But the problem they say the function of the brain was so bit low by they say, aahhh, not to disturb anything. He cannot be given medication for that one, maybe it will come, even that time he can able to speak anything.” They went on to tell her the brain structure was fine even though he continued to have seizures about 15 times per day for durations of up to 60 seconds. At times, he would at times go for a few days without seizures and was able to physically and mentally recover quickly after the seizures. He could resume speaking, walking, and his typical functioning.

By the middle of 2006, “he start forgetting words, even the names of the sister of him.” Armas’s progression of losing function came to a head around November of 2006 when, “nobody heard a voice from him. Everybody was, what

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<sup>1</sup> “fainting” is the term used by Mrs. Iipinga to describe the episode when Armas would be on the ground and his body would shake uncontrollably. Subsequently, after diagnosed it was noted that he was having seizures.

is wrong with him? Until he was keep quiet but he can cry but cannot say any words. He was at my mother's house that time. But they arrived, AAAHHHH, everyone was saying ah, everyone hear the voice of Armas today. And they all said, ahh, he cannot, they start calling him 'Armas!' He came but he not say any words." This seemingly sudden loss of his ability to orally communicate had been slowly occurring over the past months as Mrs. Ipinge communicated, he "would just loose words, one by one, one by one, even his name is cannot able to say, but he can hear what you say."

As this loss of oral communication ability was quite unsettling to Mrs. Ipinge and the family, she took him back to the doctor. But they said, "he is ok ...even the heart is pumping well, I don't know what is wrong. Ok just go with this medication. Ok we process, we proceed, we cannot say any words." Mrs. Ipinge continued to seek out the answer to Armas's faintings and, "went to one teaching and I don't know how to call it, it is somewhere there. It say, ah, ok, but now we cannot use medicine, just bring him here so we can pray for him. Ok so we took him until we found one day he can make just a sound without any words. Like that one, aaaahhhhh (she screams to imitate Armas). If he happiness, you can't realize he is screaming. If he is angry, he can cry or beat."

According to Mrs. Ipinge's interview, she stopped giving Armas the prescribed medicine in lieu of the alternative treatment from a religious group that would pray for him. Armas's mother claimed that the faintings decreased after she began taking Armas to church and he was regularly being prayed for by the

group. While she was not completely satisfied with the prayers alone, she again sought medical treatment. “Now we still go to church. Now, it was October of last year (2008) I took him to Ongwediva Medical hospital (a private facility thought to provide better patient care) because I wanted them to look. I thought they maybe repeat the skull scan. Then those doctors they say, ok, but you have to take him back the doctor so they maybe the doctor will change the medication for this child. Now the brain...he was losing that one, even the mental was somehow. He can eat everything he finds, on the ground, even the millipedes. He can taste everything he find (before we went to church).” So they transferred him to another hospital, back to the original doctor that treated Armas. Mrs. Iipinge relayed the recent history of Armas and “we gave him the story that we stopped. He say ‘why did you stop the medicine?!’ ‘Ok, we stopped this one because we join one church and say we have to stop medicine.’ He say, ‘ok, it is fine, but you have to proceed to the church but you also must take medicine.’”

Based on the advice of the doctor, Armas and his mother resumed the medication and added a vitamin “to help the function of the brain and I.Q.” The seizures gradually continued to decrease and his function level began to increase. “But now he can faint, in the condition now is better because he can feed himself, he can go to the toilet himself, even you call him he can come, even sometimes faint. He can faint, he was faint ... last week...but now the condition is fine. Sometimes he maybe faints one day and then next day, but then goes two weeks without fainting... You cannot find him fainting while he is awake. He always

faints while he is asleep. That is why those people say, ‘ah, those are the devils disturbing him.’ The church is saying.”

She continued to make a connection to between the decrease in severity and frequency of seizures to the religious influences, “that is why they say one day come here, those people from those members from that church, and they say we have to sleep here, laying all the night; but I informed them there is some change because a long time, when I sleep, before he faint, you find him wake up and scream like he see something, look something, ok, but they say, ok, that is the devil, now we pray for him. Now he is no more doing those type of things. He is just only fainting. You find him just for only 40 seconds. He looks like a deep sleep. Only me, I know, if you don’t know him you cannot feel anything unusual.”

Armas’s mother made a direct connection between his health and the interventions from her church. However, before she began this intervention, the family tried traditional means. “In the beginning, while he was fainting many times, we took him to the witch doctors, but maybe he started in 2005...some people say you have to take the child to the witchdoctor...yes, nothing else to do. Because it is midnight, sometimes you were at the hospital yesterday and then when he starts again, because the doctor says, ok, you have to take him back to the hospital when you see that he is serious not like that one. Ok, I have to wait until the condition goes worser is take him back to the hospital. I took him to the witch doctor when he was four years old, then he gave him some of that

traditional medicine but the condition was the same, it stayed the same.” In 2005, she took Armas to two witchdoctors but did not see any change in his functioning so went back to the hospital. When at the hospital, the medical doctors would said “aaahhhh, don’t go to that one, because sometimes they can give too much of those medicines because they don’t know how to measure.”

In spite of searching for treatments for Armas from multiple sources and having limited success, on this day, Mrs. Ipinge shared her hope. “Today he learned how to remove the t-shirt! Just today! The condition is now better and I cannot even worry about him because a long time I worried to worried to worried but now I feel god’s help...one day we find him speaking.” As she brings up his successes and the hope that “maybe one day you will find improvement from his medication,” I asked, “what about school for him?” Her tone changed, “no. nothing because when he, because he cannot take him to school where he not able to say any words.”

Knowing that Mrs. Ipinge is a teacher at the local school, we began to talk about “special teachers” and “special schools.” These are teachers/schools specifically for children with identified disabilities. “Yes, there is a special school in town. I don’t know whether they can allow those people that faint epileptic one. Only the ones with difficult disabilities, blind, those types of students because the problem is only the fainting because I don’t think you can take him to school because of that problem. Maybe the problem fainting stops maybe you can take him to the special school but now I don’t think able to send him...” As an

interviewer I asked, “if he is only fainting during the day, only at night, do you think there is a school he could be at?” She responded, “...we cannot find here. Only in the town. The problem of taking and bringing...those children with disability are accommodating in the hostel.”

Some children from the rural areas are transported from home to a school in town daily. Typically, children that come from homes that can afford transport, extra school fees, etc. send children to town for what is thought to be a better quality education. Armas’s brother and sister attend school in town and are taxied from home to school daily.

In lieu of attending school, we discussed what Armas does during the day in our second meeting. In Part 2, Mrs. Ipinge describes what Armas does from waking to sleeping.

#### *Part 2: Daily Life*

Armas’s daily life involves staying home with another child (a cousin) and the caregiver/housekeeper while everyone else is at school or work. His day began at about 7 am “and (he) wants to go out. Because it is so early, we can lock the room where he sleeps to keep him in the room. While the sun is rise up, but when we open the door, he can go and start playing his own things as usual.” She continued, “he can play until the time for breakfast because breakfast they use to eat Jungle Oats.” He eats with Maria (caregiver) and knows which foods to use a spoon with and when to eat with his hands.

After he eats breakfast, Mrs. Ipinge said he, “just plays his own things. Most of the time he is busy, just busy playing. He cannot sleep during the day, until during the night time.” She continues, when he plays, “he comes up and picks things, makes house with sand...sometimes he can pick sticks and stuff or maybe he wanted to wanted to make a fire just to cook his own things... he can pick sticks mostly, objects, container, empty container, making groups, putting this on side and that on the side...but most of the time he likes to play alone.”

According to Mrs. Ipinge, most of his day is spent playing around the homestead using locally available materials (seeds, containers, leave, etc.). One time I was at the home preparing to interview Mrs. Ipinge, Armas was playing around the homestead. According to my notes, “Armas has his foot in a bunch of ants watching them crawl on his him.” A few minutes later, “Armas moves around area picking up leaves, etc. from the ground and putting in Maria’s hand. She says ‘tangi, iylao’ (“thank you”) and he continues. He then comes to me and takes the pen I’m writing with and gives it to Maria then brings it back to me.” During the time he is interacting with Maria and me, the other children are playing cards. (personal journal, January 9, 2009). Later he begins picking up stones and repeatedly throwing them on the zinc roof which makes a “ting” noise.

Mrs. Ipinge said, “when he stops playing is when we say come and eat. You cannot find him just sit and quiet like this. Only when he does not feel ok is when you will find him just sitting quiet doing nothing. He can play, he can anything, pick sand, bricks ...”

On January 27, 2009 I went to conduct an interview with Mrs. Iiping and found that Armas was acting drastically different than every other time I had been there. In my observation journal I wrote, “Armas is sitting near a nut, staring off. I say ‘hi’ and shake his hand; he continues to look off and is not engaging. He went into the hut with his caregiver. She gives him *oshikundu* (a type of drink). He refuses it and walks out of the hut. His movements are nearly slow motion and he seems disoriented. The man working in the field said he had seven seizures last night. I pick up Armas and sit him on my lap. I applied some joint compressions to his upper limbs; it seemed to relax him and/or orientate him a bit to his surroundings. He then rested his head on my chest and about every ten seconds, he would pop his head up and look to the right. The caregiver told me, ‘maybe he sees something like he is witched.’”

Next in his day is lunch around 1:30 or 2:30, and then “back to playing because you cannot find him sitting quietly. He can change the activity-from zinc to groups to sand put the stick in. He wants to make his own house because his sister do her own house outside there (points outside the door to the ground). To make a circle and start to put the stick in like to make a traditional house... It is not the proper way like those because he make a big... like a pile of sand... but not the correct, but he is trying.”

Around 8:30 in the evening they have dinner and begin to come into the house to watch TV. “That is why they are fast to do the work to come to watch Afro Connection.” As Mrs. Iiping brings up, the children have work to complete



before dinner. She speaks of some of the chores like “hoeing the field, looking for goats, they can even wash the dishes and the cars...pounding.” When she speaks of Armas’s responsibilities, “we do not try to give him something to do because the other can wash plates, but you cannot give him something to help out.”

After a day of play, meals, and some TV, Armas got to bed around 9:00 or 10:00 pm. His mom said, “he sleeps on the floor because I am afraid he will fall because of the sickness. We leave mattress on the floor.” In addition to fear of him falling, she “locks him the room...because sometimes when I am bathing myself because I am afraid of going outside while it is so cold; that is why I lock in the room and leave the night pot.”

### *Part 3: Meaning Making*

In this interview, Mrs. Ipinge and I discussed intelligence in children and how it is demonstrated, Armas’s contributions to the family, the future, and how education may fit into his life. Mrs. Ipinge began by informing me about the seven faintings the night before (see my observational notes in previous section). After we briefly talked about his drastic change in functioning, we discussed intelligence and how he demonstrated it at home. Mrs. Ipinge said, “ah, I don’t know really...but now he can play many things. But even last year, last week, the day after yesterday, he knows how to, I saw him just writing him on the rock make circle because the day after that one, we say, ‘ok’ everybody try to draw a child start to make big circles small, what what. I saw him doing just doing itself, but it’s not really a circle, but you find, oh, he wanted to maybe imitate the

sister.” She continued to explain how he exhibited understanding via imitating, “even I failed to take him to the church last Sunday but I found him just starting to clap hands like in the church because the people in church clap hands, singing...but there are many be memories and he can remember start clapping hands but cannot able to sing but to make loud noise.”

In addition to demonstration of understandings, we began to discuss how he contributed to family chores. On multiple occasions throughout the interview Mrs. Iipinge asked, “long time or now?” “Long time” meaning before the onset of epilepsy and “now” meaning after onset. After I clarify that we are discussing present day, she said, “he can make them laugh. Now even he can go to the see the goats because he started to, maybe I think, he realize it now this is a goat. Along time he could not go there. This is goat; he could not concentrate on that one. He want to go with you.” She goes on to note that while he does go to the goats, he is not taking care of them.

After attempting to make meaning of Armas’s interactions in his environment, we talked about the future. I asked, “what do you think Armas will be doing in 10 years?” Armas’s mom paused and began, “aahh, maybe I think he will be fine. He can maybe start schooling because now the condition of him, even mental, has really improved because now you can tell him, ‘Armas go there.’ He go and come back, he can come back. Sometimes you see he wants to say any words but really I don’t really know what is wrong. There is something just a little

bit things. He wants to say something-he is trying...maybe in five (years), I think he will be fine, when I compare the condition.”

We then projected even farther ahead to when Armas is 20 years older and she responded, “maybe he will be somebody because the only problem is only the voice. Maybe (if) he start speaking, he can start schooling, he can start doing the things, or get work, or whatever...if the fainting stops, is no more fainting, maybe I’ll take him to the special school. The problem now is only he because he faints. You cannot take him to the hostel or the special schools but nobody will care for him and he will give tough time to the teachers. They cannot even allow because they say, ‘we do not need those sickness people but just only the children disable or disability...’ but if one of that one stops fainting he will fine and do what everybody do.” I ask that if she was,”... able to find a hostel that could care for him even with the epilepsy, would there be benefits for him to attend school?” She replied, “yes, the only problem is transport...I heard that there are some schools also try to take the learners even they have problem. Yhea, I would take him...I think he would get something because I compare to when with him at home. When I say go and do this or don’t do this, or it is time for eating, he can know now that ‘oh, I need to sit on the chair and wait for the water to wash my hands.’ Maybe he go to school he can gain something because those teachers maybe try to imitate other children because even at home he can look at them and try to do something but even not really proper in the same way like other do, but he is trying.”

We then began to discuss the way she has felt in light of these experiences. Similarly to Armas's changes in functioning; her emotions seem to mirror those ebbs and flows. "In the beginning it was just really a big problem, because sometimes I cannot even eat...now, aahhh, I don't feel it is a problem, because even he feels like that I know that, aahh, he will be fine after two days...and can do what he wants to do. It's not really hurt me anymore. My hope just one day he will be fine. It is only my hope..."

As our interview was concluding, I asked what her thoughts were about children with a dis/ability and how that goes, or doesn't go, with education. She said, "but always you know that those children are disability are better to accommodating in the same place on the educating on the same place. For insistence, I take Armas to (local school where she teaches), it will be (difficult) because those learners without any problem they sometimes can start laughing, but if you taking him to those learners with same problem like him or different problem...it will be fine. Those learners they will also because he know in this situation also but same situation but some can say, ahh, especial those that don't have any problem, say, 'hey what type this person?' Because I compare it to when I go with him to the hospital. There are some people who start, 'what type is this person.' But some can say, 'ahh,' some they feel patience for him, some, 'how can you let him just touch me,' or something I say...he sits like a grown up person, the way he behaves in not like a ok. I have to explain, but I think those children in the disabilities are better to accommodating place because even school

them having their school, it will be better. It will also help them because those school don't have problem they can laugh at them.”

Finally, I asked if there is anything that Mrs. Ipinge would like to share, “yea, because (I) used to stay with Armas now I learn a lot because long time when I see even I not care about those people that are (disabled)...but now, I saw I found sometimes in the street sometime I can say, ‘let me give bread to this’ because I know some just born normally but because of this when I compare to Armas he was just normal child. He can speak, do whatever he want to do, but when starts his condition is that like that one. Now it is also teaching me a lot. I learning a lot because I can also know to care for him. How I treat him in the traditional culture we say, those people who faint you cannot touch him. You just leave like that until when...let him recover is when you start to touch him. Even he is next to the fire, do not touch type of person...people are afraid to touch them, even dangerous things...but now (I know) to take that person to a safe place until done. In traditional, we say, ‘don’t touch, and don’t touch.’ When you touch him, the salvia come out...when you touch that salvia, you no more wake up...dead forever.”

Clearly Mrs. Ipinge had learned from her son, their experiences together, and is very adamant about pushing aside some traditional beliefs about dis/ability. The last thing she shared was, “this is true information, how can you hide? I cannot hide anything.”

While Armas was not “hidden,” he did not have access to educational opportunities and many of the themes that Mrs. Iipinge touched on revolve around theoretical underpinnings of reasons for exclusion of children with disabilities in developing countries. She had expressed strong beliefs about traditional dogma and the christen beliefs of her church, the medical model of dis/ability, fear, and hope. Also, as Armas’s mother is a teacher, she brought a unique perspective to this interview; she discussed how she thought a student should behave, communicate, and function in a school setting and the dissonance between that model and how her son functions.

#### *Indila’s Story*

The story of Indila, an 8 year old girl, was told through the eyes of her mother, Ms. Elago. Her mother preferred the interview to be in Oshindonga, her mother tongue; therefore the director of a local nonprofit agency for children with disabilities provided the translation services (Mr. Nambinga). This discussion was about 90 minutes in length and covered all three sections (life history, daily life, and meaning making). We were unable to break up the interview into different meetings, due to the mother’s work schedule, transportation constraints, and Indila’s schedule at the center.

The interview took place at the nonprofit organization’s facility; an organization about 30 kilometers from their traditional home. The facility was a three bedroom home that has been turned into a center serving children with dis/abilities and their families. It was constructed of bricks and corrugated tin roof

supported a system of running cold water and electricity. We conducted the interview in a bedroom that had been converted to the director's office. Outside we could hear the digging and construction of the new addition to the home. Also, as it was summer and the rainy season during these interviews, to enter into the house, we had to carefully plan and navigate a way to the front door of the house to avoid the large, muddy puddles.

This organization provides a place for the child with dis/abilities to live for short periods of time to learn functional skills. In addition, families learn about how to support their child and encourage independent functioning. Therefore, during the interview, we could hear, and sometimes see, children screaming, crying, laughing, playing, and interacting with staff.

### *Part 1: Life History*

Indila was an 8 year old girl at the time of this interview. Her family came from a rural, traditional home in the Oshana region of northern Namibia. Within her homestead there are four adults and four children. Her grandmother is the matriarch of the family and the homestead. She is also the primary caregiver for Indila.

Ms. Elago works at a take-away (equivalent to fast food in the United States) in a town about a 45 minute drive from her traditional home. Therefore, she does not stay at the traditional home with Indila and her younger brother, as transportation to her work site as a security guard is too far.

Throughout life, Ms. Elago never had interactions with people with disabilities but, “realized when Indila was nine months that she was not ok.” Looking back, her pregnancy “was difficult because it was the first” and she was “sick...no vomiting, but high blood pressure.” Ms. Elago sought regular medical attention during pregnancy and had a normal labor and delivery.

When Indila was nine months, Ms. Elago noticed “she took a long time to crawl, not able to sit, most of the time she was just sleeping...she took 2 years 4 months to walk, and then she started speaking. She would say “meme,” “tate,” and names of people.”

Indila’s mother continues about struggles of, “having difficulties taking her to school because...there are no specialized schools. There was no options and only option which she took to have to school was to take her to this center.” I followed in this stream of discussion and asked, “did you ever try to take Indila to school?” She responded, “Never...did I try because of these habits and mentality. They have that type of people like Indila are not accommodated in the school.”

From schooling we moved on to her lived experiences in her homestead and local rural community. “In her community, especially the neighbors, they welcome her and she goes and plays with them. She go herself even. And can go...and welcome her anytime.” When she is there, she plays “with the children who are around... (the) same game like building small houses with sand and sometimes chasing one another.” During these play opportunities, Indila is constantly laughing and enjoying her time.



Like Indila's neighbors, her grandparents, "welcomed her and support her up until now." Socially, as with interactions with the neighbors and grandparents, Indila "is always happy" and expressive, "when he (her brother) goes out and then comes back, she wants to give him a kiss and greet him." She is also expressive when she dislikes something or is in distress. I witnessed an example during the interview because Indila came into the room and began telling her mother something in Oshindonga. I asked the translator what she was saying and he said, "she is saying she wants to go home."

It seems Indila has not had many experience outside of the homestead and in the medical community interactions are limited because, "she is not a person that can (be) sick all the time...when she was a baby, she use to go to Windhoek for exercising the arms." In the beginning, when she noticed Indila was "different," "she went to the to the local hospital to give her exercises...before she started walking. During this initial time of seeking treatments, Ms. Elago acknowledged that she was never told about Indila's issues. Aside from seeking exercises for her arms from the medical community toward the beginning of her life, Ms. Elago has not sought treatments from the church or traditional doctors.

### *Part 2: Daily Life*

Indila's day regularly began when, "she wakes, it is always the same, that she is happy...if she has an inconvenience of course she will get angry...she cry and then she doesn't even stop." Indila usually woke up around 5:00 am or 6:00

am, and, “don’t really 100% fall asleep for the time, but she can sleep for some hours...and she usually wants to say something, she wake up others.”

After Indila was awake, “she can even go outside the house, or go and greet (others).” She is socially engaged until breakfast time, when she would sit down and drink tea and eat with the other children until it is time to go to work/school. “Like now, especially when people are plowing, then she followed the people and do what others doing. Ms. Elago continued, Indila uses a hoe during plowing time, like the others, and does contribute to family farming activities.

During others times of the year, when it is not harvesting season and the other children are at school, Indila stayed at home with her grandmother.” In the morning, “when the others are going (to school), she wants to follow them” but she stayed behind with her grandmother (Kuku) and helps in the fields or around the house. She anxiously waited for the children to come from school, and, “when the others come from school she is happy and then she starts playing”

The children play until it is time to begin cooking, “when the others are cooking, she is always sitting...she watch them” and does not try to help. Her mother reported she is fearful of Indila around the fire, sometimes, “she is closer too much.” When the food is ready to eat, Indila often refused to follow tradition by eating from the communal plate, “when they eat from one plate, she doesn’t like, but then she likes when her plates are separated, but when she’s eating with

the grandmother, is using the same plate, but when she eating with the other children, she can't."

After eating, "sometimes they relax for some minutes, and then do some work to be done and they and do some work." In the evening, Indila's day ended by listening to the radio, "Indila like very much, the radio, especially when they are music" and she likes to dance along to the beat.

### *Part 3: Meaning Making*

When Ms. Elago and I discussed her experiences and the meaning behind them, it mainly focused on Indila's functioning and contributions to the family unit.

We began to discuss Indila's experiences when she was around adults; she follows Kuku, and if she is washing, she wants to get her clothes and wash them. Indila liked to imitate others, "she go (to get water with others), she can take it and go...if container is heavy, she can pour out some water." Another chore she will imitate other is the pounding of the omahago (millet), she pounds, "somehow, but not really, not with strong energies, but she tries."

Making meaning of previous experiences was a challenging discussion for us. We were unable to reach much depth in this area. The conversation did not get past what Indila was able to do, in terms of chores and self-care, and how much of what she does is an imitation of others.

Throughout the interview, though, Ms. Elago's discussion noted main themes such as the child as integral contributor to family farming, what learning

looks like, and expectations for a child with differing abilities. Indila was an expected participant in family farming activities and contributor to the overall functioning of the home; sometimes it meant she would cultivate, sometimes it meant she encouraged others. Imitation of others was an area that seen as cursory and not valid learning and/or participation. Thus, the expectations the family had for Indila and impacted her participation and place in the family unit. All of these notions that Ms. Elago explained are consistent with the literature.

*Magano, Toivo, and Nailoke's Story*

This interview was part of the dual interview held with the mother of Ndahafa (interview to follow). This meeting was organized by the director of a nonprofit, Mr. Nambinga, and subsequently arranged in the rural area by the council member. The councilman allowed us use of his new regional council facility for the interviews and contacted/scheduled the interviews with the participants. The facility was recently built using funds from international donor agencies and is constructed of cement bricks, tin corrugated roof-with ceiling tiles on the inside, which supports electricity and water, furnished with modern conference furniture. The interview was conducted in Oshindonga and therefore translated by Mr. Nambinga. It was approximately 90 minutes in length.

Mr. Angula is reflecting on his three children with disabilities. He, his wife, and six children live in a rural village in the Oshana Region of northern Namibia. This family lives in a traditional homestead located one kilometer from the local school. All six of the children attended the local school. This interview

was focused on Mr. Angula's children that he has identified as having a dis/ability. Of the nine children in the family, three have been identified as functioning with a cognitive dis/ability; two of the children are twins, one boy (Toivo) and one girl (Magano), and a younger female sibling (Nailoke).

### *Part 1: Life History*

We began the interview discussing the children's births and the mother's health, all of which appeared to be typical. "My wife was not sick, but I was severely hurt and beaten by the South African regime." Looking more closely, we discussed what he identified as the dis/ability of his children. None of the children "have disability of crippling." The twins have, "problems with studying, can read slowly and write." For example, Magano "scribbles...but can write her name." In contrast, Toivo "writes words...but has no patience." The youngest child, Nailoke, "can read and write, but an education official say to take to hospital."

More specifically, Mr. Angula related how his children function in varied settings. Toivo, when he was about 7 or 8, "...was (able to) play, not ever able to use pen." When he completed grade 1 he "couldn't write any letters." Even now, at age 11, "if you show him to write's' he can but then ask him to write 'a', still writes's'." Apart from school and back at home, Toivo "likes to be with goats and cattle." Toivo's twin sister Magano "can write name." However, she is unsure of basic information, for example, "if ask which village (she is from), she doesn't know." Mr. Angula reports, "she is making progress, needs special education, encouragement, and support." The younger child, Nailoke, was "very fast in

everything...knows more than twins.” However, while she functioned at a higher cognitive level than the twins, Mr. Angula said, “she is lacking something in head.”

Mr. Angula related his children’s ability to how they perform in school and around the home, so I asked “when and who first noticed that each of your children were not typically developing?” “If you see all three at house,” he said, “you will say they are all normal. Not notice a disability.”

The family has sought medical care to find ways to help the children. According to Mr. Angula we “went to doctor. He said he was normal, but doctor didn’t check.”

### *Part 2: Daily Life*

The Angula children began their day around 6:30 am on school days. An adult “warms water for them to bath and prepares tea and lunch.” After they bath and have breakfast, they walked one kilometer to school. During the school day, they each attended an age level appropriate general education classroom. In their classrooms, there were no additional support personnel, resources, or outside provisions that facilitates the learners and/or teacher to better access the curriculum. After school, the children walked home and began the typical afternoon/evening work; they “take care of things in field, fetch water...go and play, watch TV.” As the sun sets, dinner is prepared and eaten. After dinner, and after it is dark, the children go to bed.

### *Part 3: Meaning Making*

As Mr. Angula relays his experiences with the children with disabilities, it seems he noted more visibility of the dis/ability during school. Therefore, I began the third part of the interview focusing on school related experiences, then transitioned to family contributions, challenges, and ended with what the future may hold for each child.

When we began to talk about how his children demonstrated their cognitive ability in school, he said it was “according to they things they are doing.” He offered an example of the oldest male, Toivo, “when others are doing many things, while playing, he doesn’t do anything-just sitting.” Another example he shared was how Nailoke “likes animals, makes animals from things at house...she likes to ask for things. If she sees other, (she) asks for it...like an exercise book (or) homework.” In fact, when Nailoke asked for homework, she did it!

Like many African cultures, families highly value the contributions the children can make to sustain the family. Mr. Angula noted that all three of his children are “very supportive to the family.” He illustrated this by sharing how the children are, “responsible for the field, house, and tell if visitor come. (They can) relay message and can run errands.”

The family has hope for each of their children’s future, yet still is fearful about each of them being in the community. Mr. Angula said there are “some challenges” to having children with disabilities, like “your heart is not free

because we are worried (for them) to go out, for fire, getting lost, or doing something incorrect.” Against the backdrop of fear and worry, their father shares that he “hopes (Toivo) will become a mechanic because he likes mechanically and practical things. He can do something that will help him in future.” Magano “will have a bright future if she gets additional care and special education. She will be able to help herself. The head is not open yet, she imitates the brother.” The youngest child, Nailoke, “is motivated all the time, has moral. He likes singing, dancing...motivates others...like to run. With continued support, one talent will help him in future.”

We ended the interview with an open ended discussion of his thoughts on dis/ability and he discussed experiences he had as a child and philosophical notions about dis/ability. During Mr. Angula’s childhood he “learned they cared then too much because they are children of God, or abnormal or feel pity. Where I studied, I notice when a child with a disability. They weren’t treated well, sometimes put in a corner and leave them. (It was) only to have their name in the register to say they were there.” Obviously these experiences have informed his ideas today, “in Namibia there are many people with disabilities. These problems are natural things, you can’t blame others...disabilities don’t have boundaries.” He continued, “They need special care, support and facilities...infrastructure are not conducive. Education is a problem; especially special education.” As illustrated in previous statements, he is hopeful that, “maybe government and



international community should work together to fight disabilities. We can find a solution.”

As we ended the interview, Mr. Nambinga (the translator) and I left together to drive back to town. In the car he began to give me background information on the children because he knows them. Mr. Nambinga said, “he didn’t say this, but his twin children are, what do they call it...mongoloid.” For clarity, I asked what that meant and he described children with Down Syndrome physical characteristics. In the United States, “mongoloid” is an outdated term (and derogatory) which is commonly understood to indicate a person with Down Syndrome.

In contrast to Armas and Indila and most children with dis/abilities, Magano, Toivo, and Nailoke attended the local school; yet many of the same notions were uncovered in our interview as seen with the children that were out of school. Mr. Angula held deep assumptions about the dis/abilities residing within his children and more specifically their brains. He also illustrated the dissimilarity among the children’s functioning at school (as deficit) and at home (as typical).

#### *Ndahafa’s Story*

As previously noted, this interview was organized by the director of a nonprofit, earlier mentioned, and subsequently arranged in the rural area by the regional council member. This interview occurred in tandem with Mr. Angula, a father of three children with dis/abilities living in the same village; thus, the

interview context was the same. The interview was conducted in Oshindonga and therefore translated by Mr. Nambinga.

Ndahafa was a 16 year old female living in a rural, tradition setting in Namibia Africa. She lives with his mother, father, and six siblings. The interview was conducted with her mother, Mrs. Haufiku, and was about 120 minutes in length.

### *Part 1: Life History*

Ndahafa began life on September 14, 1992 after a full term pregnancy and typical birth. Dis/ability was not identified at birth; in fact, she was a “strong baby at birth.” The first indication that Ndahafa was different was, “noticed by her mother then called to school by teacher.” Prior to age 10, there was no indication that Ndahafa had any cognitive challenges; there was “no injury or accident.”

Mrs. Haufiku began to speak about Ndahafa’s present functioning level, “at home, no problems. If given a task, she can concentrate at home...except reading and writing.” Therefore, it is at school that the dis/ability became obvious, she “can read and write, but never pass exam...only concentration problem...when others are studying.” According to Mrs. Haufiku, it is “because she was compared to other learners. They were progressing well, but not her.”

While at school, Ndahafa faced challenges of concentration and memory. For example, if someone asks or told her something, “but she suddenly forgets.” Also, during the time when students were working independently, “the child doesn’t concentrate when studying...he doesn’t take books.”

In contrast to the previously interviewed participants, Ndahafa's family had not sought out ways to remediate her memory and concentration issues. Other than discussing with the teacher, they had not looked to doctors (conventional or traditional) or religion for a "cure".

As for other experiences, Ndahafa's dis/ability seems to only be noticeable during her time at school, in the classroom. Mrs. Haufiku did have not any lived experiences to share about her daughter's experiences outside of the school structure.

### *Part 2: Daily Life*

Mrs. Haufiku began to tell about the daily life of Ndahafa, but noted that the day looks different on the weekend versus the weekday, and during different seasons because of the chores around the home and in the field. Therefore, we spoke about what a school day looks like for Ndahafa.

She woke up around 6:00 and "they don't do anything" before school. It is my understanding that Mrs. Haufiku was meaning in terms of work around the homestead; she did warm up water and then bath herself, make tea, and go to school for the day. Once Ndahafa is back from school, she "take care of goats/cattle, sometimes weed the field, do homework or study, collect firewood, and prepare dinner." After the evening meal is finished, Ndahafa takes time with the other children to "tell stories to each other, study, or sometimes radio." Then, she goes to sleep.

### *Part 3: Meaning Making*

As we began to make meaning of Ndahafa and Mrs. Haufiku's lived experiences with dis/ability, we honed in on demonstrating intelligence, contributions to the family, and her future. First we talked about how Ndahafa showed that she is intelligence and her mom said, "only singing and performing...in other things-doesn't have intelligence." In contrast, Mrs. Haufiku alluded to her daughter being very capable of functioning within the homestead. Ndahafa is "very responsible...can care for young children, cook, make sure things are in order...make sure there is water." According to Mrs. Haufiku, her daughter that appears to have cognitive challenges in the school setting, is quite able to perform all expected tasks around the homestead and does not face challenges outside of school.

In this interview, we spoke about the future and Mrs. Haufiku talks frankly about her feelings, "fear for child's safety;" and her worry for Ndahafa's future. When asked, "where do you see Ndahafa in five years," Mrs. Haufiku talks a long pause, shakes her head, and then offers her response, "if there is nothing special, just promote grade to grade." When looking forward to 20 years from now she said, "if maybe some change within her, maybe a job, maybe married. I can only hope for these things if there is a change in her."

In the final minutes, I ask if she has any final thoughts on dis/ability, things to add, important ideas she wants me to know. Mrs. Haufiku responds, "I

don't have words to say...we only trust in god. We can pray to god and solve the problem of disability.”

Mrs. Haufiku expressed notions that were also seen with Mr. Angula's children. Some of the main themes were the visibility of dis/ability during school, the idea that the problem resides in the body and/or brain, and fear for her child's future.

### *Tangeni's Story*

Tangeni was a 35 year old male living Oshana Region of northern Namibia. He lived with his aunt and uncle in a traditional homestead consisting of multiple huts. His family composition outside of the living situation is unknown. This homestead was very traditional, in that it had no brick home; it consisted of multiple huts surrounded by a wooden fence and then encompassed by their field. There was no water or electricity at this home; the nearest water source is about 1 kilometer away.

The interview was conducted on two separate occasions and translated by a local woman that knows the family. Each meeting lasted about 45 minutes. We conducted the interviews under a tree, in the field, as the aunt was cracking and shelling local nuts to sell at the market. On the audio recording, the rhythmic tapping and cracking is simply glorious. The uncle sat about 10 feet away but did not participate.

### *Part 1: Life History*

Tangeni was born premature on April 11, 1973 in Ondangwa. At the beginning of the interview, one of the first questions I posed was, “when was Tangeni born?” His grandmother initially said, “can’t remember,” and then replied with seeming confusion, “he is 24.” She went on to say, “He was born with a disease, “but (I) don’t know what to call it.” She then sent for someone to get Tangeni’s identification, and it indicates that he was 35 at the time of the interview.

At a young age Tangeni came to live with Mrs. Paulus, his aunt, “because I am the elder and decided to take care of him.” Tangeni lived with his aunt, uncle, and three similar aged female cousins. We began to discuss his life as a baby and Mrs. Paulus says, “growing up, he never cried, didn’t talk, and couldn’t walk...but he did walk, but can’t remember age.” Around the homestead during his formative years, Mrs. Paulus initially said, “no other kids around,” then later informs us that he was raised with her three daughter that are around the same age as Tangeni.

While he was growing up, “he never went to school because he couldn’t talk.” He did often play with his cousins. He developed quite a love his cousins that grew up with him. At about age 10 he began to go out of the homestead alone and as an adult continues, “to go visit neighbors sometimes...just go and sit...didn’t talk to them.” He also regularly interacted with people in the village community, “people know him, talk to him, and he likes people...he doesn’t drink

alcohol or go to cuca shops.” Mrs. Paulus notes a challenge with oral communication, “...can’t understand a lot of what he says. He doesn’t speak clearly.”

The interview focused on present day situations of Tangeni, it seemed that Mrs. Paulus did not remember much of his formative years. Now he will visit people and “looking after cattle, fetching water, go to oshini...but doesn’t drink at the cuca shops.” He also gets visitors; his mother will come and visit him as will his brothers. When his brothers come, “he gives it (money) to them to share.” The money he gives to them is paid to Tangeni based on his dis/ability from the Namibian government. While people come to him and he moves freely around the village, he does not go to town because Mrs. Paulus is “afraid for him to be in town and hit by a car.”

We then began talking about activities and chores he does around the homestead. When I asked the question about what he does around the home for chores, she responded with an audible laugh and pause before she answered that he is, “just around the house...he cultivates...he washes his own clothes, I ring them because he is not strong enough. He bathes himself, but they remind him to do.” She also remarked that, “he doesn’t walk too much because of his stomach...it is too big.”

Tangeni did stay around the home most of the time, but when he got out, he enjoyed, “looking after cattle and goats.” He also enjoyed going to the local cuca shops and, “listen to music...and if he hears nice music, he will dance.”

### *Part 2: Daily Life*

Although the translator and I explicitly explained the three part interview process (I thought), when we came back a few days later for the second interview, Mrs. Paulus seemed confused that we wanted to talk with her again. She was willing to discuss with us, but did note that she gave us all the information she about Tangeni in the previous interview. I explained that we would talk about something a bit different today and she seemed willing to tell us about what a typical day looks like for Tangeni.

When I asked her to tell me what Tangeni does from waking to sleep, she laughed, paused, then responded, “he sits around the while day.” I then asked, “what time does he wake up?” She said, “wakes around 8:00 am...puts water on the fire, but he can’t build the fire.” She is fearful about his ability to build a fire, as “he was never taught to make or build, I am afraid he will be burned.” He drinks tea and eats breakfast and then, “only sometimes takes care of cattle and goats.” Sometimes he may “fetches water only if in the house with a wheel barrel.” He ends his day after eating dinner around 9:00 pm.

### *Part 3: Meaning Making*

This segment of the interview was not conducted with Mrs. Paulus. While nothing was overtly said to me about her not wanting to participate, I interrupted signals from her that were indicative of her not wanting to proceed. I spoke with the translator about this and she concurred.



The background of this participant and person with dis/ability was different than other interviews. First and foremost, the person with a dis/ability was an adult, raised during the Apartheid regime. The participant was elderly and had been traditionally educated, thus offering a unique lens into dis/ability and her nephew's participation in family living and education. She discussed his ability to contribute to sustaining the family and his contributions to family farming; like all other participants, she also referenced her fear for his safety in town and around the homestead.

### Conclusions

These stories transversed deep assumptions about the lived experiences of children with dis/abilities that were informed by a gamut of backgrounds, histories, abilities, ages, and school going status. Many of the cultural models that emerged about children with dis/abilities are documented in the literature as challenges to accessing education and fully realizing human rights; in opposition to literature though, some cultural models surfaced are in stark contrast. A common thread throughout all interviews was the tension of reconciling indigenous ways of knowing with more western ways that have been infused during colonization and more recently, policy transfer.

Five main deeply held assumptions emerged from the interview data. The most prominent was the notion of "othering," or viewing people with dis/abilities as different, significantly contributed to the level participation in the community and school. An example is Mrs. Ipinge noted that if Armas was able to speak and

not cause problems to the teachers, she would send him to school. All families also discussed how the child or adult with dis/abilities contributed to familial obligations, such as farm work, housekeeping, and childcare. Most were able to offer some assistance in limited tasks, yet many participants noted that the person with dis/abilities contribution was not quite as sufficient as their siblings. Belief in the supernatural, either Christian dogma or Indigenous beliefs, were mentioned by all participants. In some cases it was discussed as a cause of dis/ability (i.e. he is witched), and in other cases it was mentioned as a way to save the child (i.e. God help us). The interview data also brought to light a very dynamic view of dis/ability. Some participants vacillated between a medical model, social model, and the traditional model ways of viewing dis/ability. At times participants would mention that the dis/abilities was located within the child, like Mr. Angula said the problem was in the head; some would discuss that society imposed barriers for their child, Mrs. Elago noted that the problem is the school, not enough qualified people to meet her daughter's needs. The final shared cultural model that emerged was that participants deeply care about and for their family member with a dis/ability; thereby are not embarrassed or ashamed of them of which could lead to complete social exclusion. In stark contrast, participants all noted how the person with dis/abilities navigated their immediate rural community, yet did not travel to the urban areas. The reason that emerged was of the need to protect their child from dangers and/or stigmatism, not to hide.

As the world continues to figuratively shrink and rural northern Namibia becomes more influenced by globalization, people are confronted with the hybridity of their lives and attempt to make meaning of their lived experiences. Each participant implicitly discussed hybridity and demonstrated this practice is wrought with contradictions, tensions, collisions, reconciliations, and concessions. As Homi Bhabha said of this notion, “we find ourselves in the moment of transit where space and time cross to produce complex figures of difference and identity, past and present, inside and outside, inclusion and exclusion” (2004). The shared cultural models of dis/abilities that emerged from data illustrate that participants were making meaning of dis/ability and education in varied ways that were influenced by history, indigenous beliefs, colonialism, western ideologies, globalization, and policy transfer.

An example of these tensions comes into view from the interview with Mr. Angula and Mrs. Haufiku. As we know, formal education is a direct result of colonization; before that, “adults in our communities took responsibility for helping the new generation understand their environment, their society, and their responsibilities as member of society (Ministry of Education and Culture (MEC), 1993, p. 27). During apartheid, Indigenous people were taught basic skills of reading and writing and labor; higher level thinking skills were not encouraged (MEC, 1993, p. 27). Mr. Angula and Mrs. Haufiku were educated during the apartheid system, thus their appropriation of educational policy illustrated the tension between the expectations that children go to school—a more western

ideology, juxtaposed with their internalization of the norm not questioning what occurs once the learner is in the classroom. Both parents described their child being promoted grade to grade with no specific instruction to meet their needs in the classroom, however never mention going to school to understand why, or demand more than peripheral participation for their children. This is not a critique of their actions, but a way to make sense of the tension they may struggle with, the struggle between viewing this western way of education as vehicle to possible economic stability, their understanding of navigating systems and not questioning, the implicit nature of indigenous knowledge, and their lived history. The participants consistently had to navigate these shades of gray and make sense of their world.

## CHAPTER 5

### Discussion and Implications

This final chapter presents shared cultural models that emerged from the data and allows further discussion of findings related to the first research question, which asks about the dynamics of exclusion as well as the second research question, which seeks an understanding of how the identified shared cultural models influence policy appropriation.

The chapter begins with a reiteration of the research problem framing the issues, briefly reviews the methodology that guided data collection and analysis, provides a summary and discussion of the cultural models that emerged from the data and policy appropriation, and concludes with implications of this study.

#### *Problem Statement*

“The right to education, the right to take part in cultural life, and the right to enjoy the benefits of scientific progress and its applications,” are just a few tenants of the Universal Declaration of Human Rights that people with dis/abilities in northern rural Namibia have not yet fully realized (1948, Articles 26 & 27). Educational opportunity, health, teacher training, budget allocations, stigmatization, inaccessible facilities, and communication are just a few of the salient and dire obstacles people with dis/abilities face. The issue of Human Rights, including access to education, for Namibian people with dis/abilities is an extremely complex issue to unpack; yet a vital piece in the progress toward

realizing full inherent dignity. Complicating this struggle are broader historical, cultural, political, social, and economic concerns.

I contend that such dynamics of exclusion have become so deeply embedded in people's belief systems and actions that they go unnoticed and unquestioned. This occurs as cultural communities strive to maintain their group's identity and to do so, "the group is required to pass on information about this regulative dimension to newcomers so that cultural continuity is ensured" (Artiles & Dyson, 2005, p. 45). Due to the inherent nature of this line of regulation and cognition, people with dis/abilities regularly face limited opportunities. Fewer than 10% of children with dis/abilities attend school, of which the Namibia government acknowledged, "There is a serious concern about access to education for children with disabilities..." (MoE, 2008, p.10). If a child with a dis/ability is able to access education, "the quality of teachers' training/pre-service remains a concern with special reference to Inclusive Education and Special Education" (MoE, 2008, p. 14). After the immediate concern of access and quality of education are considered, it is essential conceptualize the daily lived experiences people with dis/abilities face: poverty, mortality, more likely victim of violence or rape, unemployment, poor health care, dangerous living conditions, and forced child labor (ILO, 2010, p. 60; UN, n.d., fact sheet, The World Bank, 2009).

Layered upon the problems of access and teacher training are challenges of economic, political, social, physical, and communication barriers (MoE, 2008, p. 19). These micro level issues are compounded when broader challenges are

acknowledged. Namibia lives with the after effects of apartheid, the push and pull of international aid organizations, forced choices by international financial organizations, and the impact of globalization. While there have been strides for individuals with dis/abilities toward human rights, economic and social inclusion, and the intersection of local and global issues continue to arrange for most children with dis/ability being denied full access to education.

### *Overview of Methodology*

This study used ethnographically informed qualitative field research to uncover the cultural complexities of educational exclusion. Methodologically, it incorporated interviews, participant observation, and field notes to gain an understanding of the interplay among cultural models, human motivation, and appropriation of policy that arrange for children with dis/abilities to be excluded from to educational opportunities.

Data gathering was guided by the interview methods of Seidman; the process focused on a “phenomenological approach in-depth interviewing” (2006, p. ix). The three part interview session/s engaged the participants in telling the stories of their child with dis/abilities. The participants discussed the child’s life story, daily lived experiences, and their meaning of those lived experiences.

An overlay of analysis methods were employed to mine the breadth of data. First, it began with uncovering phenomenological themes, moved to discovering deeply held cultural models vis-à-vis non keyword analysis, and punctuated with examination of the local discourse that appropriate education

policy for children with dis/abilities (Seidman, 2006; Strauss, 2005, Sutton & Levinson, 2001).

A complimentary notion to the methods and conceptual framework is the research study occurred across dimensions. Not viewing the phenomena from a multi-dimensional level provides a monolithic view which is unbalanced and incomplete (Vavrus & Bartlett, 2006). Thereby using contextualized understandings further complicated the research findings while looking at, “larger forces, structures, and histories” (to) inform local social interactions and understanding” (Vavrus & Bartlett, 2006).

### *Summary of Results*

Five cultural models emerged from the interview data, illustrating distinct assumptions that the participants held regarding people with dis/abilities. The participants also demonstrated they were active agents in the creation and appropriation of policy that arranged for the exclusion of children with dis/abilities from full access to formal education.

Throughout the data, the tension of traditional belief systems juxtaposed with western ways of knowing was visible in almost all interviews. The shared cultural models that materialized show the hybridity of the ways of knowing that are learned from elders and traditional culture with the diffusion of western ideas of culture, religion, education, and development. This is not indicative of a dichotomy but rather concepts that simply have a relationship. As Dei and Asgharzadeh note, “the concept of ‘indigenous’ simply alludes to the power



relations within which local peoples struggle to define and assert their own representations of history, identity, culture, and place in the face of Western hegemonic ideology/ies” (2006, p. 35). These interactions and tensions are not unique; understanding the “important differences that distinguish multiple knowledge forms by their unique philosophies and identities” is vital (Dei & Asgharzadeh, 2006, p. 55).

This section will first provide a results summary of the shared cultural models and nested shared cultural models followed by Table 2 and Table 3 that briefly describes each. It is trailed by a results summary of the Policy as Practice.

#### *Shared Cultural Models*

Five shared cultural models emerged from the interviews with participants (see table 2). Each model had distinct features and implications, yet all are intricately bound together that at times cannot be separated.

The first and most prominent deeply held assumption was viewing the person with a dis/ability as an “other.” It was a notion implicitly situated a person with a dis/ability as different from their peers and made visible their differing abilities. These variances thereby situated the child with a dis/ability outside of the mainstream and facilitated exclusion in many contexts. Within this idea of “othering,” three sub or nested shared cultural models emerged as shown in Table 3. As the child with dis/ability was situated in a peripheral manner in relationship to education, it became evident that it was easier to assume or deny that s/he had the same human rights and non dis/abled peers in all spheres of life. Furthermore,

making sense of how children with dis/abilities access human rights and education illustrated how “othering” limited and excluded them from all possible opportunities. All families encouraged their child with a dis/ability to learn along with their siblings in traditional, indigenous ways. However, as formal education has become codified in northern Namibia, so has the way in which a learner must behave, look, and learn to participate in the system. Therefore, being a learner, in the formal, westernized way of schooling, a child must be able to function within a strict set of parameters (i.e. sit, listen, write, not cause trouble, etc.). When a child does not meet these strict sociocultural rules of being a learner, s/he is excluded from formal education opportunities or not allowed full access to participate in the classroom.

The second shared cultural model that emerged was that children with dis/abilities did not fully meet their family obligations. All children had obligations to the family including farming activities, household activities, and childcare responsibilities. In all cases, parents noted that the child with dis/ability did contribute but not in the same manner, or as fully, as non dis/abled family members. The next assumption that surfaced from the interview data was that children with dis/abilities were not hidden from the community and had access to move around their local area relatively freely. This is in contrast to other sources suggesting that they are hidden due to familial shame/embarrassment. It seemed that families were attempting to protect their child with dis/abilities from the

urban areas and possible mishaps (getting hit by car was given as an example) and from stigmatizing.

The final two shared cultural models that materialized were that the supernatural plays a role in how participants made sense of dis/ability and the meaning of dis/ability was a dynamic notion. Some participants discussed how the supernatural, which included traditional indigenous beliefs and Christian dogma, played a role in the identity of their child with dis/abilities. One participant specifically spoke of how her child had been witch and it was manifested as epilepsy. In conjunction with that, participants noted how their understanding of their child's dis/ability was fluid and contextually based. The same participant illustrated this point by vacillating between situating her son's epilepsy in the supernatural world to its location within the body. Other participants noted that in some situated contexts (i.e. school, grocery store) that the dis/ability was visible yet described that in other contexts it went unnoticed. They attributed it to how the child participated in activities and, at times, what societal barriers were present.

Table 2

*Descriptions of Major Cultural Models*

Major Cultural Models	Brief Description
“othering” <sup>2</sup>	Participants indicated that children with dis/abilities did not fit the norm and excluded based these variances that occurred in situated contexts.
familial living social obligations	Children with dis/abilities did not adequately contribute to the familial living social obligations needs (i.e. farming, economic sustenance, care of other kin, household work).
not hidden, but protected	Children with dis/abilities were active members of their immediate rural communities. They however did not navigate the urban community and spaces; this seemed due to the family members protecting the person with dis/ability, not hiding (which indicates shame/embarrassment).
supernatural	The supernatural, beliefs about entities beyond the visual universe, were woven into discussions/beliefs/decisions regarding children with disabilities. These beliefs were based in both Indigenous ideology and Christian dogma.
dis/ability is a dynamic notion	The notion of dis/ability vacillated between: the body and mind are damaged and require treatment; systemic barriers that are disabling; and a traditional model built on pity and charity.

Table 3

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<sup>2</sup> See shared cultural models nested within “othering” in Table 3

*Descriptions of Nested Cultural Models*

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Nested Cultural Models:

Children with dis/abilities as “other”	Brief Description
not entitled to same human rights	Persons with dis/abilities do not access all human rights and freedoms and are dehumanized and alienated from educational opportunities and self-determination.
indigenous learning system	The traditional system of learning emphasized apprenticeship and imitation of family and/or community members in the local environment
learner is bound by rules	Learners must be able to speak, sit quietly, listen, and follow instructions so s/he can benefit from formal school. If a learner cannot behave within those parameters, s/he should be in a separate setting with special teachers or not attend school.

### *Policy as Practice Summary*

Each participant demonstrated unique ways in which s/he created and appropriated local education policy that directly affected their family member's access to full educational opportunities. For the purpose of this discussion, the policies that guide education for learners with dis/abilities have been strategically essentialized to the facilitate discussion.

The policy at the focal point stems from the Namibian Constitution and the National Policy on Disabilities. Together, these policy documents legislate that, “ All persons shall have the right to education” and education should be based on The Salamanca principles on inclusion (The Government of the Republic of Namibian, (GRN) 1990, Article 20; ) The Namibian National Policy on Disabilities is based on the Salamanca Statement which states, The guiding principle that informs this Framework is that, “schools should accommodate all children regardless of their physical, intellectual, social, emotional, linguistic or other conditions” or in shorthand, inclusive education (UNESCO, 1994).

Throughout the study each participant demonstrated extreme power in how education policy for their child with a dis/ability was created and appropriated. In fact, in all cases, the formal, official education policy was obsolete. Not one family or child with a dis/ability realized inclusive education that accommodated academic needs and learning. However, each parent did create and appropriate different policies. For example, two parents created policy that facilitated their children with dis/abilities attending school; the participation

however, in learning was in a peripheral manner. The children were in the classroom but their learning needs were not being accommodated. Two other parents fully resisted inclusive education policy and did not attempt to send their children to the local or seek out special schools. The fifth participant was not of school going age at the time of the study and thereby not included in this discussion

The outcome of parents' policy creation and appropriation had profound implications for their child with dis/abilities and their life trajectory; yet the story before the parents appropriated policy involved complex social practices, a constant process of normative cultural production and historical factors.

### *Discussion of findings*

This section will discuss assumptions and practices that emerged from cultural models and then transition to findings of how participants appropriated policy. The initial discussion will address the first research question of this study: What are the dynamics of exclusion from full educational opportunities for children with dis/abilities in rural northern Namibia? The following section will transition to a discussion of the findings of the Policy as Practice and address research question two: How do shared cultural models of dis/ability influence the appropriation of policy?

### *Assumptions and Practices*

Following are shared cultural models that exemplify the tension among indigenous and western cultural models of how dis/ability is constituted and

constructed. They demonstrate how participants hold implicit thoughts about dis/ability and how cognition can motivate practices and actions that directly impact a child with dis/abilities and his/her school going status.

*Children with disabilities as “other.”*

Children with dis/abilities in rural northern Namibian were thought of in very different ways than their “typically developing” peers. The participants had implicit and explicit expectations regarding the functioning of children with dis/abilities in varying contexts. These normalized expectations contributed to a view of child with dis/abilities as “other.” Within this shared cultural model of othering, three nested cultural models emerged. Each nested cultural model exemplified deep assumptions held by participants that created a sense of “us” and “them” that profoundly disempowered the people with dis/abilities. The interviews uncovered assumptions that persons with dis/abilities are not entitled to same human rights as people that are not dis/abled, a child with a dis/abilities learns within the indigenous learning system, but perhaps not as well within the formal education setting; and a child with dis/abilities can only attend formal school if s/he can demonstrate competence of strict sociocultural rules of being a learner.

*Persons with dis/abilities do not access all human rights and freedoms.*

Children and adults that have dis/abilities are dehumanized and alienated from many spheres of life. This “othering” arranges for the dominant, at times, to



exploit and subordinate those that don't fit the norm. Tangeni's aunt and Armas's mother illustrated ways this happened in their lived experiences.

Tangeni was living with his adult at the time of the interview and being supported by monthly benefits from the Government of Namibia. His aunt reported, "he gets money from the grant but he gives to his brothers to share." In this case, I suggest he is not being seen as full adult with the right to self-determine the use of his money and was, therefore, being exploited. While sharing of resources is quite common, it seems Tangeni did not have access to any of the money or agency in determining use of money.

Another example of a Namibian not fully realizing his human rights is the way in which Armas has not been able to access formal education. Remembering his mother is a teacher at the local school and Armas's siblings are transported daily to attend school in town; his mother reported the main obstacles to his formal education is the lack of special schools and transport to and from town. Mrs. Ipinge said, "all the special schools are in town, we cannot find here (village). The problem of taking and bringing...the problem of transport." At the same time she reported that his brother and sister, "...school in town, they (taxi) come and pick them for school and bring them." Armas's right to education has been denied, in part, because the view of a child with dis/abilities is not eligible to the same right to education as his typically functioning siblings. His siblings are being provided the transportation needed to access town and school; Armas is not offered access to transportation; no services in the local community and the option

of special schools had not been explored. This view that he does not have the same right to education as his siblings, as well as the learners in her class, contributes to his exclusion from formal school access.

*Indigenous learning systems and children with dis/abilities.*

Indigenous education has been observed to be an inclusive system that socializes all children into their society and is not dependent on their dis/ability (Chimedza, 2008, p. 128; Storeng, 2001, p.13,). This education is characterized by communalism, education as preparation for life, functionalism, and stability (Storeng, 2001, p. 14). The process of learning among the Owambo people was a process of learning where, “children were educated through participation in production and social life. The entire community functioned as teachers and children learned through imitation” (Storeng, 2001, p. 14). All the persons in this study with dis/abilities participated in indigenous education; the degree in which they were expected to demonstrate moral character, respect, and the other expected skills was influenced by their abilities.

As many children with dis/abilities do not attend school, this nested cultural model suggests that children can learn within the indigenous learning system, not the same education system then the rest of children access; albeit not universally able to exercise their right to formal education. All of the participants in this study, even the children attending school, learned in traditional ways. Armas demonstrated learning by imitating, which is a characteristic of indigenous education. His mother said, “we say...everybody try to draw...big circles. I saw

him just doing itself, but it's not really a circle...he wanted to maybe imitated the sister." Indila also demonstrated learning based on imitating her grandmother, her primary caregiver. It seems her grandmother is preparing her for life in the village within the family; her mother said, "she follows her Kuku (grandmother) around; she go she take it (water) and go to get water. (She pounds mahagno) somehow, but not really. Not with strong energies, but she tries." Toivo's father also noted that he has learned to function within the family compound by, "(being) responsible for the field, house and tell if visitor come, relay message and can run errands." Finally, Tangeni's aunt illustrated the saliency of learning moral cultural norms within indigenous education as, "he doesn't drink alcohol or go to cuca<sup>3</sup> shops."

*Being a learner.*

Being a learner is bound my strict sociocultural rules that contribute to the exclusion of children with dis/abilities from the formal system of education. Participants indicated a learner at the local schools must be able to speak, sit quietly, listen, and follow instructions so s/he can benefit from formal school. It was illustrated in the data, if a learner cannot behave within those parameters, s/he should be in a separate setting with special teachers or not in school.

The oldest person with a dis/ability in this study came of age during the Apartheid era and never went to school. His aunt said one reason he never attended school was his speech patterns. His aunt noted, "(we) can't understand a lot of what he says. He doesn't speak clearly." The youngest has not attend school

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<sup>3</sup> A small concentration of local "bars" operated by village members

because of his seizures, but in addition, his mother stated, “(we) cannot take him to school where he not able to say any words...he will give a tough time to the teachers. They will not even allow because they say we do not need those sickness people but just only the disable or disability.” She went on to say if he went to school at his current functioning level, “he may gain something...maybe try to imitate other children because even at home he can look at them and try to do something but even not really, not proper, in the same way like other do, but he is trying.”

The participants had ideas of what a learner should be able to do before attending the formal school. The children with dis/abilities that did not attend school were unable to adhere to the “rules.” Armas could not speak and had a medical conditions, Tangeni did not speak clearly enough, and India had a “habit” that prohibited her from being a learner. In contrast, the other two participants did send their children with dis/abilities to school. Although the children did attend school, they faced separateness within the school walls. Mrs. Haufiku said, children with disabilities, they never play with others, are neglect(ed). (Their) friends at school are usually relatives.” It is important to note that the dis/ability was not identified before the children were sent to school. That begs the question, had the parents of Magano, Toivo, Nailoke, and Ndahafa identified their child as having a dis/ability before they attended school, would they still have been sent?

Othering is a prominent notion that comes from postcolonial theory, more specifically, the work of G. Spivak that succinctly describes persons with

dis/abilities failure to realize their full human rights because they are viewed as “different from the centre” (Ashcroft, Griffiths, Tiffin, 1998, p. 171). Persons with dis/abilities have been constructed by the center to be different, separate, and not normal. In part due to this “other” identity creation, people with dis/abilities are more easily treated differently and not allowed to fully exercise their right to education; if they attend school, it is in a peripheral place. As Mr. Angula stated, his twins attended school and, “started in kindergarten, (but) always pushed to next grade.” Ms. Haufiku agreed about her child was, “just promote grade to grade.” The participants did not relay any stories of meaningful learning experiences for their children. This notion of othering and its contribution to how persons with dis/abilities in Namibia exist is just one piece that leads to exclusion or partial participation in the community.

*Children with disabilities cannot fully meet their social obligations.*

One deeply held assumption by all of the participants was that children with disabilities could not fully meet their social obligations to family and community. All participants described how the person with dis/ability contributed to family obligations and then qualified it with a statement that indicated their participation was not the same as the others. For example, Armas’s mother made two statements that seemed unrelated to the question of the child’s contribution to the family; however, in both statements she talked about his inability to concentrate, as if she was providing him an excuse not to participate in family living. She noted, “he can make them laugh.” I tried to rephrase the question to

prompt contributions he made to family obligations, she replied,” whey (long pause), aa, I don’t really know, (pause)...you find him just wondering to see the water (oshana)...” When I pressed for an answer that was related to typical work she said, “we try not to give him something to do because the other(s) can wash plates...you cannot give him something to help out.”

In contrast to Armas, other persons with dis/ability were expected to participate in family living. For example, a typical job of a 9 year old girl is to pound the mahago (local millet). Indila’s mother expressed that she participated in this activity. However she qualified it with, “somehow, but not really, not with strong energies, but she tries.” Indila did contribute to family farming activities by using the hoe in the fields, “she followed the people and do what others are doing.” Her mother said she could perform this task without hurting herself and was able to adequately remove weeds. When it came to cooking, another typical job of a girl her age, “when others are cooking, she is always sitting.” When broadly asked what contributions Indila makes to the family, her mother’s response demonstrated a tension, “oh, aa” (oh no) and then took a long pause before she said, “she comfort them because she makes them fun (happy)...and (if) she sees they are tired, she can encourage them by saying ‘please do!’ or go to the house to look for children to play with.”

Tangeni’s aunt painted a similar picture to Indila’s mother. Remembering that Tangeni was 36 at the time of the interview, his aunt reported, “he says he does jobs around the house like cultivates...looks after the cattle, fetches water,

goes to the oshini (machine that grinds millet into flour).” Then later in interview when we discussed what he did during the day, she paused and then replied, “he sits around the whole day.” I prompted a bit and she said, “only *sometimes* he takes care of cattle and goats...he fetches water *only* if in the house with a wheel barrel...he doesn’t walk much because of his stomach. It is too big (overweight).

The connection of children, with and without dis/abilities, to family and their subsequent role in shared responsibilities, is a cornerstone to African life. In the examples of Indila, Armas, and Tangeni, we see that the children are very much a part of the family processes, albeit at times in a peripheral way. The literature tells us that what the participants have illustrated that kinship is foundational, dis/ability is constructed as a shared identity among family members, and each member has an obligation to participate in economic life and farming activities (Ingstad & Whyte, 2007, p.24; Marfo et al, 1986 p. 240; Reagan, 1996, p. 20). In recent history, kinship allowed, “access to labor and security... (and) were at least a partial guarantee of social support (Weisner et al, 1997, p. 20).

More specifically, in Namibia we know that “Ovambo children (of which all participants in the study are members of this group) have to take their share of the work as soon as they are possibly able to. A general African pattern signals that participation in adult activities starts around the age of seven. As the Ovmbos practiced both agriculture and pastoralism, learning centered around these areas” (Storeng, 2001, p. 14). Looking at the participants stories, it illustrates the person

with dis/ability contributions in those two areas and others. The participants reported the person with dis/ability working in the fields, taking care of the livestock, keeping up in the house (cleaning, cooking), and providing emotional support and/or comic relief to the family. The notion that the person with dis/ability did not fully participate in their familial obligations, as notes by the participants, is another example of how they are seen as different.

Furthermore, it was an othering process that did not acknowledge the importance of apprenticeship learning, which included the children imitating others' actions. While most participants qualified the person with dis/abilities' actions with phrases that minimized abilities, contributions, and significance; I suggest this way of participating is an integral part of learning. Lave and Wagner discuss this notion as legitimate peripheral participation (1991). The person with dis/ability's participation in familial functions demonstrates co participation and thus learning. I suggest that participants did not recognize it as such because they view the person as "other" and participation and learning must follow a set of cultural norms.

*Children with disabilities access the rural community.*

Conducting this research study enabled me to connect with families and children with dis/abilities in ways that I had never experienced in Namibia. While I previously lived there for over two years, the interactions I had with children with dis/abilities were very limited. They were so limited I believed that children with dis/abilities were being hidden from the community. Throughout the



discussions with participants, my perception has shifted and the discourse provided a very different view.

Participants did not hide their family members from the rural community; in fact, all people with dis/abilities that were of an age to leave the homestead and travel to other homesteads and rural community spaces, did so. Chimedza reported, “Some African people with disabilities seem to enjoy more acceptance among their community than elsewhere” (2008). Tangeni's aunt reported that at about ten years of age, “he would go out of (the) homestead alone... (and) he would visit others and just sit.” Now as an adult, he continues to move freely around the rural community, “people in the community know him, talk to him, and he likes people.” Most of his daily chores require that he navigates the immediate local community such as fetching water, watching the cattle and goats, and visiting the local oshini (machine used to ground millet into flour).

Indila's mother reported similar interactions among the community and her daughter. “In our community, especially the neighbors, they welcome her and goes and plays with them. She go herself even, and can go and (they) welcome her anytime.” When she goes to the neighbors, “she plays with the children who are around... (and they) play together, (the) same game.”

Tangeni did not attend school when he was growing up during the apartheid era, Indila was of school age and did not go to school, but four children in this study did attend school and thus accessed to the rural community in more structured ways. Magano, Toivo, and Nailoke, children of Mr. Angula, and

Ndahafa, child of Mrs. Haufiku, all attended the local school in age appropriate classroom settings.

The notion that children with disabilities are hidden from the community did not hold true based on the discussion with family members in rural northern Namibia. It may occur in other parts of Africa and/or it may be a myth. One international aid organization published, “disabled children may be hidden away by their families who have little to no understanding of disability and in some cases they are considered by being ‘cursed’” (Leonard Cheshire Disability, n.d.). In a previous study with about Namibian teachers’ beliefs, then reported that children with dis/ability most often did not come to school because their parents were ashamed and hide them at home (Bartlett, 2003).

Contrasting evidence exists that suggests people with dis/abilities are not hidden, but being protected by their families. It is evident that children with disabilities do have access to rural community spaces, and some access formal education spaces. The myth of a child with disabilities being hidden comes from their regulation from public urban spaces. From the discussion with the participants, it was not out of shame and embarrassment that the family member with dis/abilities were not taking transportation to/from the rural area to urban spaces, or grocery shopping in town, or going to school; family members wanted to protect the person with dis/abilities from harm, stigmatization, and harassment.

Mrs. Ipinge described what challenges that she and Armas encountered when they went to the hospital, “sometimes he wants to play with them (the other

people in waiting room)...and touch them...but you have to explain ‘this one is somehow’ (because) some people can say, ‘hey...what is wrong with these people’” (Armas and mother). Therefore, out of fear of what he may do, other’s interpretations of him, and any other negative backlash they may experience, “when we go to the hospital, we only keep him in the car just to avoid...maybe one in the queue while the other saying in the car with him until I join the queue to the doctor and then I become the second or third to go in, I have to come back to get him.” Ingstad and Whyte discussed reframing of the hiding of children with dis/abilities to a more probable reason of protection and care for the child (2007, p.252). The question if the exclusion for reasons of shame versus protection is a salient issue that resonates with many possible layers of exclusion.

*The supernatural has a role in dis/ability.*

“Children of God” and “disturbed by demons” are just two ways that participants of this study made a connection between dis/ability and the supernatural. For the purpose of this discussion, *supernatural* indicates “of or relating to an order of existence beyond the visible observable universe; *especially*: of or relating to God or a god, demigod, spirit, or devil” (Merriam-Webster Dictionary, 2010).

The tensions between traditional ideology and Christian beliefs were evident with many of the participants. I anticipated more discussion of indigenous beliefs, especially from the participants that have lived most of their lives during

the Apartheid era. In stark contrast, older participants discussed much less in every area, especially about beliefs and dis/ability, than the other participants.

Armas's family, the most educated and financially stable, tried every available option to "heal" him from his fainting spells. They sought medical attention on multiple occasions, demonstrated resistance to medical advice by ignoring medication recommendations, sought traditional remedies by working with two traditional doctors (witchdoctors), and then sought guidance from a Christina based church. They had seemingly come to a place that fused Christian beliefs and medical foundations to assist in controlling Armas's seizures.

Some families sought medical advice but left unsatisfied with the results. Ms. Elago had not gone to traditional doctors or Christian churches looking for treatments, however, in the beginning of India's life, she did receive physical therapy for "her legs and back." After that, she has not deemed it necessary to seek "cures" for Indila through medical doctors or any other outlets. Mr. Angula also only sought medical advice for his twin boy and girl; he reported, "(we) never (went) to church and witchcraft; (we) went to doctor. He said they were normal, but doctor didn't check."

While these families did not seek cures from traditional sources, they did reference a Christian God during discussions. Mr. Angula called children with dis/abilities "children of God" and noted that were "abnormal or people feel pity for them." Later in the interview he expressed a tension, "these problem are natural things, you can't blame others." Mrs. Haufiku never has sought any

answers to her daughter's dis/ability but relied on the supernatural, "we only trust in God...we can pray to God to solve the problem of disability."

Religiously, since the mid-1800s, Europeans have had a presence in Namibia that included missionaries. Over 80% of the Namibian population claims an affiliation with Christianity (U.S State Department, 2007). In contrast, the report indicates between 3% to 10% of Namibians identify as practicing indigenous religions (2007). However, the tension of traditional thinking (abnormal/pity) and more western ideas (natural things) is in play, yet the influence of traditional beliefs cannot be underestimated. I believe that there is much more of the traditional belief system in play in the exclusion of children with dis/abilities than the participants shared.

*Dynamic view of dis/ability.*

The way of conceptualizing dis/abilities was a dynamic notion that indicated its located sometimes located within the body, or within the environment, or created by traditional religion and culture; no matter how it was conceptualized in the moment, it was always embedded and mediated by culture and social interactions.

Dis/ability is a complex, multilayered concept. Many people hold the idea that dis/ability is located within the mind and body. In contrast to that notion, the Disability Rights movement has begun to locate dis/ability somewhere between biological factors and social and cultural barriers. The Namibian participants

acutely described how, at times, their family members' dis/ability was squarely located within their body and/or mind and a problem needing remediation.

Tangeni's aunt located dis/ability in his speech and body. She said, "he doesn't speak clearly...he didn't go to school because he couldn't talk...he doesn't walk much because of his stomach-it is too big (fat)." Mr. Angula placed his children's dis/ability in their heads as he said, "the head is not open yet, she imitates her brother." The youngest child's dis/ability also resides in the brain, "he is lacking something in (the) head." Like Mr. Angula, Ms. Elago said that Indila's dis/ability exists "because of these habits and mentality."

At times participants noted that the dis/ability existed in the school system and its accommodation of children with special needs; thus placing the dis/ability more in the social model of dis/ability. Mr. Angula said, "education is a problem, especially special schools." Both Indila's and Armas's mothers agreed with Mr. Angula that lack of schools for children is the barrier, not the child's dis/ability in and of itself.

Some assumed that the dis/ability is located within the body and the school infrastructure, but as noted, there was also a relationship between the supernatural and dis/ability throughout the interviews. This leads to the possibility of the "location" of dis/ability moving among medical model ideology, social model ideology, and the less known traditional model of dis/ability. This model, "asserts that disablement is created specifically by traditional religion and culture. In this model, people with impairments may be regarded as unfortunate, different,

or blemished in some way, and as a consequence, they are sometimes perceived having inhuman or non-human traits because they are considered unable to perform traditional social roles due to this difference” (Peters, 2005).

The participants’ interviews indicate that they are regularly moving among ways of thinking about their family member with dis/abilities. This in-between space, or idea of hybridity, “carries the burden and meaning of culture” (Ashcroft et.al, 1998, p. 198). The history and sociocultural elements have created this place where Namibians inherently believe and see the world through a traditional lens that has been layered with discourse from apartheid and layered again with western ideologies of education.

These perceptions are vital to understanding the dynamics of why children with dis/abilities attend school or stay home. It cannot be said that children with dis/abilities are excluded solely because their bodies and/or mind are different; it cannot be said they are excluded solely because the school system does not offer appropriate services; it cannot be said children with dis/abilities do not attend school or have full participation because of supernatural ideology; it cannot be said one single, or even a few ideas are working together to arrange for less opportunities for children with dis/abilities. It seems that deeply held assumptions about oneself, others that are different, who deserves human rights, who belongs in school, and how people participate in their communities intersect to arrange for children with dis/abilities to have more or less access to educational opportunities.

The discourse analysis attempted to uncover the dynamics of exclusion from educational opportunities for child with dis/abilities in rural northern Namibia. Numerous forces acted upon the participants' cognition and thus actions, which arranged for opportunities, or lack thereof, for their children. The participants seemingly came into child rearing with a comprehensive set of ready-to-apply theories; when the child did not embody the expectations of development, cognition, and functioning, their cognition and actions relied on shared cultural models of dis/ability. Historically and culturally, notions about people with dis/abilities are shaped by supernatural beliefs, a dynamic view of dis/ability, the assumption they are different from the center, and cannot fully contribute to familial life. These forces intersection with outside factors (such as systemic limitations, financial constraints, logistical boundaries) worked in complex ways. Therefore, participants acted in a manner that seemed right and reasonable to them as mediated by deep assumptions and outside factors.

*Policy as Practice: Participants as agents of policy creation and appropriation*

This section describes continuities and disjunctures in the way local actors appropriated education policy for children with dis/abilities as mediated by their shared cultural models. While participants shared some cultural understandings, their agency and appropriation of education policy spanned a continuum. Participants exerted personal power on the contested educational policy for children with dis/abilities. I suggest that the appropriation by local actors supported, "the production of normative discourse for the reproduction of



inequality, hegemony, and subordinated political subjects” (Levinson, Sutton, & Winstead, 2009, p. 774).<sup>4</sup>

The framework of policy as practice suggests that local actors act upon their shared cultural models and “disproportionately wield power” in appropriating education policy for their child/ren with dis/abilities. The data demonstrated that the authorized policy of education spelled out by the Namibian Constitution and National Policy on Disability is virtually obsolete. Thus, the local actors’ agency determined the local policy outcomes. The shared cultural models that emerged from the data uncovered some factors that kept the authorized policy from being fully embraced by the participants.

Full implementation of authorized inclusive education policy had yet to be realized by any participant in this study. However, all participants created and appropriated local educational policy in varied ways. Two participants, Mrs. Haufiku and Mr. Angula, appropriated policy closest to authorized inclusion policy; Ms. Elago practiced full rejection of the policy, yet sought services (educational and functional) for her daughter through a local nonprofit; Mrs. Ipinge also fully rejected authorized inclusion educational policy.

Continuities throughout the data suggested, inclusive education seems quite resisted and contested as illustrated by their sociocultural practices. During the study cultural models emerged from the interviews that demonstrate how

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<sup>4</sup> Note: School going status and assumptions held by participants was not a proxy for participants’ commitment and love for their child; each participant demonstrated deep love and care for their children and made choices based upon that foundation; their motives were to provide the safest, most reasonable, and healthiest life for their child.

participants made sense of policy as mediated by their history and localized context. Many factors influenced how the authorized policy, which has traveled from the international community and been diffused into local communities, was encountered and negotiated by local actors.

Clear differences in policy appropriation were found between participants that were college educated and fully employed, those whom attended secondary school and employed part time, and those solely educated under the Apartheid education system and self-employed as farmers. Armas's mother, a college educated teacher, knows the authorized policy and yet appropriated a practice of full exclusion for her son from educational opportunities. Cultural models that influenced that decision stem from the othering of Armas, which included the strict sociocultural rules of what learner is and the notion of protection, not hiding. Mrs. Iipinge had a clear theory about what makes a learner and Armas fell outside of the parameters. Her rules include the ability to orally communicate and of sound body. She said, we, "cannot take him to school where he not able to say any words...I don't know whether they can allow those people that faint, epileptic one. Only the ones with difficult disabilities (like) blind... (if the) fainting stops, maybe you can take him to the special school but not I don't think able to send him because of fainting." Thinking of Armas as different from all children, even the children with dis/abilities, perpetuates his exclusion from most social spheres. His mother does it out of protection; she protected him from people at the hospital by keeping him the car until it was his turn; she protected him during the night by

having him sleep on the mattress on the floor and locked him in the room so he would not go outside and catch cold. This protection and othering however, allows a view of him as not a full, capable child and thus, has profound implications for his inclusion and access to educational opportunities.

In contrast to Mrs. Ipinge's complete rejection of the authorized inclusive education policy, Mr. Angula and Mrs. Haufiku have created a policy where children with dis/abilities attended school in a peripheral manner. Both parents indicated that their children were at school and as Mr. Angula said, "always pushed to next grade." The parents never discussed any meaningful learning experiences or skills the children learned at school. Again, the assumption that children with dis/abilities are different seems to make it easier for parents, teachers, and peers, to push them to the margins. The view they are not entitled to full human rights, or the rights of a nondisabled peer continues to empower nonauthorized policy makers and disempowered people with dis/abilities.

The assumption of dis/ability is a dynamic notion was inherent in the appropriation of policy by the participants. It seemed the more dynamic the notion of dis/ability, the more likely the parent would appropriate inclusive policy closer to the authorized policy and the child would likely attend school and/or receive other services. Mr. Angula and Mrs. Haufiku described dis/ability as fluid among the social model, traditional model, and medical model. At times Mr. Angula indicate dis/ability was located within his child's body, "the head is not open yet...lacking something in head." Mrs. Haufiku noted her child, "doesn't have

intelligence,” and thus is ascribing to a deficit and medical view of dis/ability. However, during the interviews they both discussed the fluidity of dis/ability; both participants discussed how in school the dis/ability was visible yet at home one would not notice any dis/ability. Mr. Angula stated, “If you see all three at home, you will say they are all normal (and) not notice disability.” This cognition demonstrated that, at times, participants understood that societal barriers caused the dis/ability; not an inherent problem with the child. The fluidity also moved through the traditional model that indicated pity for children with dis/abilities that both parents described as adults, at times, interact with their children.

In contrast, the more static the notion of dis/ability, the less likely policy would be created and appropriated similar to the authorized policy. Mrs. Iipingie understandable held a deep assumption that Armas’ dis/ability was located within his body. She did mention logical concern about the availability of special schools, but continually discussed ways in which the dis/ability was squarely located in Armas’ body.

A child with dis/abilities as a source of shame and embarrassment, and thereby being hidden, is a myth that has been propagated throughout the literature; I contend that children with dis/abilities have access to their rural community and are not concealed. I suggest that they do not have full access to all social spheres, but that is grounded in protection of the child. The idea of creating the most secure, safe, and nurturing environment for the child guided participants agency to reject the full inclusive education policy. Armas’s mother had totally

rejected Namibian authorized inclusive education policy, yet she is a teacher and stated that he could benefit from school.

Her reasons to discard the policy are twofold. One, there is no one to care for him as she does. His seizures require that someone care for him during and after the episode, her concern is that school personnel are not equipped to handle this. She said, “the problem now is only..because he faints. You cannot take him to the hostel or the special schools...nobody will take care for him...”

Furthermore, if people were around him during a seizure, they may react in a manner that does not support Armas. Mrs. Iipinge reported, “those people who faint, you cannot touch him. You just leave him like it...let him recover (and) that is when you start to touch him. Even he is next to the fire, do not touch (that) type of person.” Her fear for his health and safety is a real concern that significantly contributes to her rejection of inclusive education.

Secondly, she assumed he would be problematic in the general education classroom and, be made fun of by other learners. She said, “he will give a tough time to the teachers...also learner without any problem, they sometimes can start laughing; but if you taking him to those learners with same problem like him or different problem, ahh, it will be fine.” To protect him from general education students and not provide challenges for the teachers, who are her colleagues at the local school, she keeps him at home. To expose Armas to situations where he would possibly be unsafe, mocked, or ignored, highly motivated Mrs. Iipinge’s action and policy appropriation.

The examples of policy appropriation by the parents of children with dis/abilities demonstrated that the authorized inclusive education policy has been met with stiff resistance and outright rejection. The parents exercised absolute control, free from constitution and international covenants, about how this policy functioned in their local community. Their motives and actions were mediated by deeply held shared cultural models that directly arranged for their child's educational trajectory. The implications for these understandings are profound; simply said, if a parent does not believe sending his/her child to school is reasonable and safe, the child languished at home or in a non-inclusive classroom.

#### *Intersectionality*

This study has attempted to weave together theoretical frameworks that have overlapping tenants, which included critical ways of understanding dis/ability, postcolonial ideology, policy, and learning (see Appendix C). Using these lenses facilitated a view of data in multi layered ways that were mediated by beliefs, actions, institutions, policies, and histories that occurred in situated contexts. Common threads running through the theories include situated perspectives, cultural ways of knowing, recognizing implications of histories for the present, and critical investigation of phenomenon and ideologies.

The idea of community and learning exemplifies the complexities and overlap of theoretical underpinnings of this study. Traditional ways of understanding community in Namibia is about helping neighbors, extended families, learning together in inclusive ways, interdependence, and communal

good over individual good. Furthermore indigenous learning systems are based on apprenticeship, inclusivity, and functionality of “curriculum.” Participants discussed views of community and learning that coincided with how sociocultural theory describes participation in situated activities using specific tools; Ms. Elago described this when she spoke of how her daughter Indila was following her grandmother around the homestead, imitating her working, and learning to cultivate and would, at times, independently travel to the neighbors’ home to socialize.

Indila’s way of being demonstrated the sociocultural nature of learning and actions yet her exclusion from education provides a layer of complexity that can draw from the ideology of Postcolonial theories. It is evident that during colonization, people’s thoughts, beliefs, actions, and traditional and indigenous ways of making meaning of their lived experiences shifted. Indigenous learning systems were the only vehicle to learning and now that formal “westernized” education has been codified and viewed as the optimal path to education, albeit with minimal job opportunities or financial prosperity as an incentive, children that would have been included in apprenticeship learning are be denied access to education. Furthermore, the notion of “other” is also quite apparent in Postcolonial theory and Disability Studies which includes a critique of “us” and “them” and hierarchical structures that regulate people.

The participants demonstrated a fluidity of thought and action that transversed these theories as they discussed and implicitly provided examples of

theory in practice. As parents made decisions for their child with dis/abilities school going opportunities, the parents demonstrated how they had learned about dis/ability, their thoughts on questioning authority and/or governmental structures, how situated context is vital to understanding and decision making if policy appropriation, and the impact that Apartheid and their lived history had their understanding, meaning making, and life choices for themselves and their children with dis/abilities.

### *Implications*

Based on the findings of this dissertation and understandings I have vis-à-vis my time in Namibia and multiple bodies of literature, the following section will detail implications and recommendations for further policy, practice, and research. Chimedza (2008), a Zimbabwean scholar, aptly writes

“The purpose of inclusion in education is to develop inclusive societies. Discriminatory attitudes, stigmas and behaviours against disabilities that are found in some cultures in developing countries need to be challenged and corrected. There is a need to develop an accommodating society that embraces diversity. This can only happen through appropriate public and community awareness of disability issues including inclusion” (p. 131).

Without overstating the findings of this study, the data illustrated the power of deeply held beliefs of the parents of children with dis/abilities and its profound impact on the child with dis/abilities. This speaks to the need to abandon some of the top down measures to implement inclusion and begin addressing this



issue from the bottom up. To continue the process of social change that allows for differences to be normalized and persons with dis/abilities to be fully included, I suggest a two pronged approach that would incorporate strategic local discussion and awareness campaigns with a sustainable pilot project in schools that explicitly demonstrate inclusive education.

As part of a grassroots, bottom up initiative, as Artiles and Dyson (2005) suggest, there is a need to find out from parents what they desire for their children with dis/abilities (p. 43). As we know, the parents wield incredible power to appropriate policy and understanding their positions via-a-via legitimate research could allow progress toward inclusion. Using the understandings of parents, it would enable the Ministry of Education to begin to target areas for community discussions and awareness campaigns. In conjunction with acceptance and awareness building in the community, the need to demonstrate, through practical real life examples, of inclusion in the public school are vital. The process of increasing the inclusion of people with dis/abilities in Namibia must be done in a contextually appropriate manner that is sustainable in its development by local actors, including those with dis/abilities.

Furthermore, I suggest this study has implications for a larger audience attempting to embrace and appropriate inclusive education. As top-down inclusive education initiatives have largely been rejected in many developing countries, bottom up, grassroots work could provide a better inroad to understanding what is reasonable and desirable path is for children with dis/abilities and their families.

Finally, I believe that this work, in conjunction with the larger discourse, calls for each to exercise our power to interrupt oppression, exclusion, and demand equality for humans; not just people with dis/abilities, but all humans. This includes acknowledging and questioning imperial forces, globalization, and policy transfer, yet being able to make progress in spite of that.

*Researcher reflection/epilogue*

This five and half year journey has been a gift. This gift has facilitated academic growth, ideological changes, and spiritual development. While this process is seemingly focused on challenging, scaffolding, and extending my thinking, the personal process was much more profound. This is not to say I sailed through and made consistent strides; it is to say that I faltered, struggled, cried, and acknowledge this was a profound journey that has challenged me in immeasurable ways to more depthful understandings of myself and others; for this I am grateful.

What I have come to know as my truth vis-à-vis this research process is the excitement, peace, and fulfillment I glean when working with children in any context. The balance of finding personal peace, attempting to be intellectually rigorous, and contribute to making social progress, guides my life trajectory. Where that will take me, I'm unsure.

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APPENDIX A

BACKGROUND INFORMATION

## *Geography*<sup>5</sup>

**Location:** Southern Africa, bordering the Atlantic Ocean to the west and Botswana to the east, between Angola and South Africa (2)

**Area:** Total: 824,268 sq km; comparative: slightly more than half the size of Alaska (2)

**Regions:** demarcated by 13 regions (2)

**Climate:** desert; hot, dry; rainfall sparse and erratic (2)

**Terrain:** mostly high plateau; Namib Desert along coast; Kalahari Desert in east (2)

**Natural resources:** diamonds, copper, uranium, gold, lead, tin, lithium, cadmium, zinc, salt, vanadium, natural gas, hydropower, fish (need source)

## *People*<sup>6</sup>

**Population:** 1,830,330 (1)

**Age structure:** 0-14 years: 26% 15-64 years: 52% 65 years and over: 7% (1)

**Infant mortality rate:** 52 deaths/1,000 live births (1)

**Life expectancy at birth:** females-50, males-48 (1)

**HIV/AIDS - adult prevalence rate:** 21.3 (2003 est.)% (3)

**HIV/AIDS - people living with HIV/AIDS:** 210,000 (2001 est.) (3)

**Ethnic groups:** black 87.5%, white 6%, mixed 6.5% (3)

**Population density:** 67% live rurally, 33% urban dwellers (2)

**Religions:** Christian 80% to 90% (at least 50% Lutheran), indigenous beliefs 10% to 20% (3)

**Languages:** English (official), 11 indigenous languages, main home languages (% of households): Oshiwambo 48% (1)

**Literacy:** 81% (1)

**School attendance (age 6-15):** boys-80%, girls-84% (1)

**Disability:** 5% of population (1)

## *Government*<sup>7</sup>

**Country name:** conventional long form: Republic of Namibia, conventional short form: Namibia former: German Southwest Africa, South-West Africa (2)

**Government type:** republic (2)

**Independence:** 21 March 1990 (from South African mandate) (2)

## *Economy*<sup>8</sup>

**Unemployment rate:** 37% (4)

**Average annual income:** 55.8% of population lives on US \$2 or less per day.

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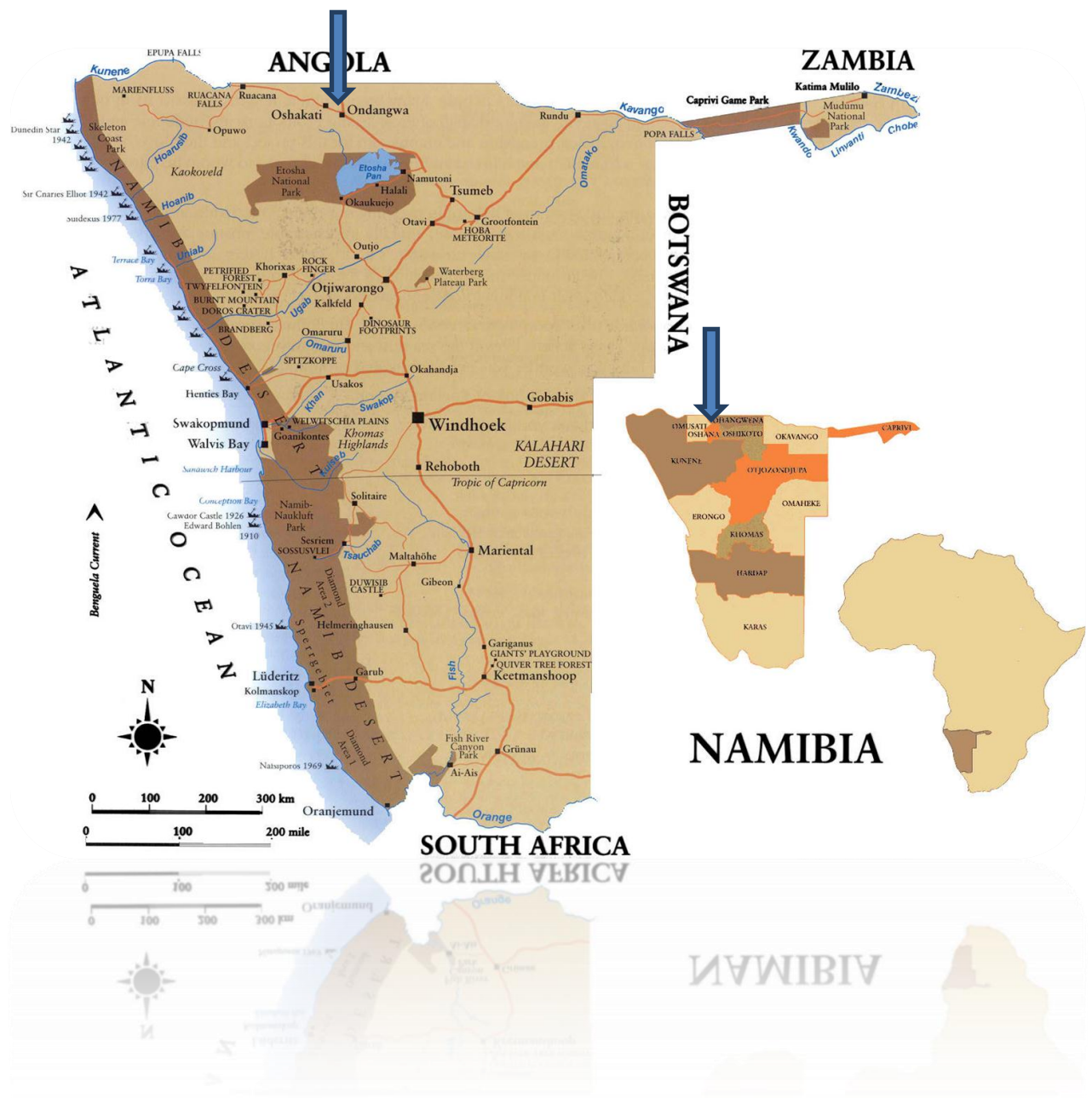
<sup>5</sup> [http://www.npc.gov.na/census/census\\_indicators.htm](http://www.npc.gov.na/census/census_indicators.htm)

<sup>6</sup> [www.grnnet.gov.na/aboutnam.htm](http://www.grnnet.gov.na/aboutnam.htm)

<sup>7</sup> <http://www.sarpn.org.za/documents/d0002973/index.php>

<sup>8</sup> <http://www.ilo.org/public/english/region/afpro/mdtharare/country/namibia.htm>

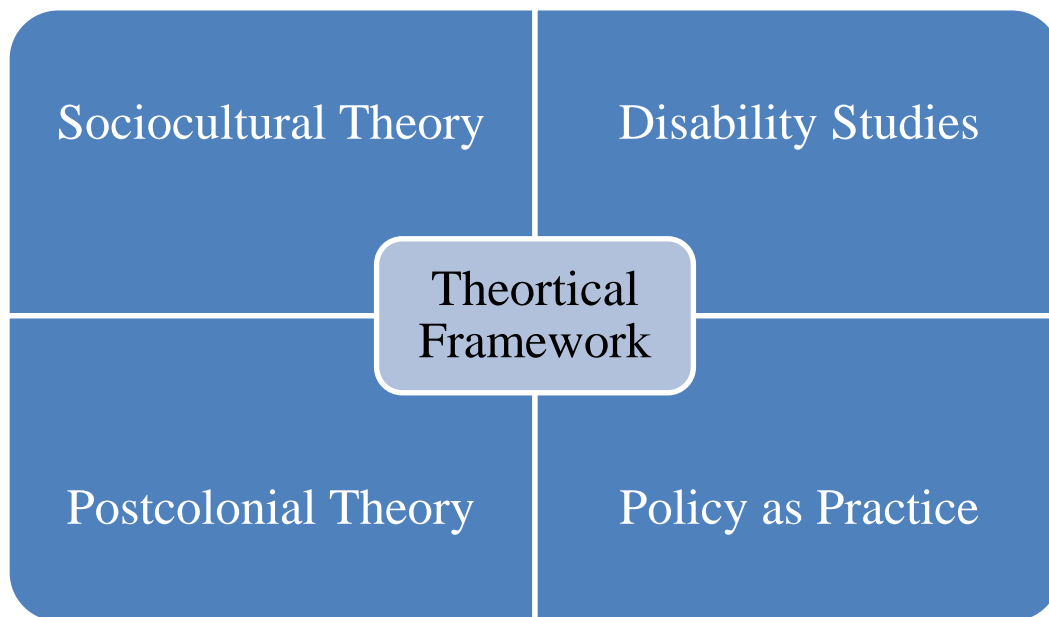
APPENDIX B  
MAPS OF NAMIBIA



MAPS OF NAMIBIA

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APPENDIX C  
THEORETICAL FRAMEWORK



APPENDIX D  
PICTURES OF RURAL LIFE





TRADITIONAL HUT WITHIN HOMESTEAD



RURAL SCHOOL

APPENDIX E

INFORMED CONSENT

**"Out-of-school children with disabilities in Namibia, Africa: Uncovering the complexities of exclusion"**

Date:

Dear Participant:

I am a graduate student under the direction of Professor Beth Blue Swadener in the College of Education at Arizona State University, USA. I am conducting research to study why children with disabilities are out-of-school in rural northern Namibia.

I am inviting your participation, which will involve 3 separate interviews. Each interview will last about 90 minutes. Each interview will have different questions. The first interview will be about your life story with your child that does not attend school. The next interview will focus on more details of the experience. The final interview will find out what you think about these experiences. You have the right not to answer any question, and to stop the interview at any time.

Your participation in this study is voluntary. If you choose not to participate or to withdraw from the study at any time, there will be no penalty.

If you decide to participate in this study, the interviewer, an experienced teacher, will invite you to participate in two workshops about how to teach your child at home. There are no foreseeable risks or discomforts to your participation.

Throughout this process, your confidentiality will be maintained by using pseudonyms to describe your story. The interviewer and interpreter will not disclose your name or homestead location (other than educational region). Furthermore, your responses will be anonymous. The results of this study may be used in reports, presentations, or publications but your name will not be used.

I would like to audiotape this interview. The interview will not be recorded without your permission. Please let me know if you do not want the interview to be taped; you also can change your mind after the interview starts or at any time, just let me know.

The audio tapes will be used to help me understand exactly what you have said; furthermore, it allows the interview to be conducted in Oshindonga. Later, it will be translated into English. The interview will be recorded on a digital voice recorder which will then be transferred to a computer for storage and accessing. The recording will be kept there for up to 3 years and then deleted.

If you have any questions concerning the research study, please contact the research team:

Dr. Beth Blue Swadener at ASU, P.O. Box 871411, Tempe, AZ 85287-1411 USA

Maggie Bartlett at ASU, P.O. Box 871011, Tempe, AZ 85287-1011 USA

In Namibia at P.O. Box 134, Ondangwa, or phone 65 245235.

If you have any questions about your rights as a subject/participant in this research, or if you feel you have been placed at risk, you can contact the Chair of the Human Subjects Institutional Review Board, through the ASU Office of Research Integrity and Assurance, at (480) 965-6788.

APPENDIX F

RESEARCH APPROVAL FROM NAMIBIAN MINISTRY OF EDUCATION

OSHINDONGA VERSION



REPUBLIC OF NAMIBIA  
MINISTRY OF EDUCATION:  
OSHANA REGION

Tel: (065) 230057  
Fax: (065) 230035

Private Bag 5518  
Oshakati  
Namibia  
16 December 2008

Omapulo: Hilma Shapaka  
Onomola: 15/3/6

**OSHINIMA: OMAPEKAPEKO GE NA SHA NAA NONA MBOKA YE NA  
OMAULEMA YO IHAAYI KOSIKOLA**

Omushangwa nguka ota gu ku tseyithile kutya, Maggie Barlett okwa pewa epitikilo opo a ninge omapekapeko ge moshitopolwa shElongo mOshana. Maggie omulongwa moshopotudhilo shopombanda shaArizon States muAmerika nota ningi omapekapeko gena sha naanona ye na omaulema yo ihaay yi kosikola.

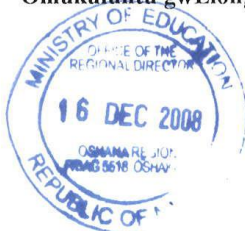
Maggie otaka ninga oonkundathana naavali nenge aasilishimpwiyu yaanona mboka yena omaulema yo ihaay yi kosikola. Otaka ya wo moonkundathana naanambelewa mboka haa longo mekwatathano naavali nenge aasilishimpwiyu yaanona ya tumbulwa metetekelo.

Otwi inekela kutya otamu ka kwathela Maggie mokugandja omauyelele opo a vule oku mana oshinyangadhalwa she.

Tangi unene keuveko nokekathelo lyeni.

Neyelo Gweni,

7. *[Signature]* 16.12.08  
.....  
**Meme Dutte N. Shinyemba**  
**Omukuluntu gwElongo moshitopolwa: Oshana**



APPENDIX G

RESEARCH APPROVAL FROM NAMIBIAN MINISTRY OF EDUCATION

ENGLISH VERSION



**REPUBLIC OF NAMIBIA  
MINISTRY OF EDUCATION:  
OSHANA REGION**

Tel: (065) 230057  
Fax : (065) 230035

Private Bag 5518  
Oshakati  
Namibia  
16 December 2008

Enq: Hilma Shapaka  
Ref: 15/3/6

**SUBJECT: RESEARCH ON OUT-OF-SCHOOL CHILDREN WITH  
DISSABILITIES**


This communication serves to inform you that permission has been granted to Maggie Bartlett to conduct her research project in Oshana Region. Ms. Bartlett is a student at Arizon State University in the United States and is conducting a research on out-of-school children with disabilities.

She will interview parents/care-givers of children with disabilities who do not go to school. She also would like to talk to officials who are directly involved with parents/care givers of children with disabilities and officials who work closely with children with disabilities who are out of school.

We hope that you will provide her with the information she requires to be able to complete her project.

Thank you very much for your understanding and support.

Yours Sincerely,

  
..... 16.12.08  
**MRS. DUTTE N. SHINYEMBA**  
**DIRECTOR: OSHANA REGION**

