Disability inequality within Orange Farm: barriers to education for children with disabilities within a township community in Johannesburg, South Africa.

Photograph removed for confidentiality reasons.

Original photograph showed disabled children lying on the floor of a school bus without seatbelts

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This paper is based on research carried out in July/August 2007. It investigates the factors that influence whether disabled children can access education within Orange Farm township, Johannesburg, South Africa. The predominant data source is interviews with parents together with a number of professionals connected with educational provision. This research suggests that in order for disabled children to access their constitutional right to education, it is the attitude of their parents, the local community and educators that need to change for their rights to be realised.

Photograph removed for confidentiality reasons.

Original photograph showed field work assistant from Orange Farm with her son.
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<thead>
<tr>
<th>Abbreviation</th>
<th>Full Title</th>
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<tbody>
<tr>
<td>CDG</td>
<td>Care Dependency Grant</td>
</tr>
<tr>
<td>DFID</td>
<td>Department For International Development</td>
</tr>
<tr>
<td>DG</td>
<td>Disability Grant</td>
</tr>
<tr>
<td>DOE</td>
<td>Department Of Education</td>
</tr>
<tr>
<td>DP</td>
<td>Disabled Person</td>
</tr>
<tr>
<td>DPI</td>
<td>Disabled Peoples International</td>
</tr>
<tr>
<td>DPSA</td>
<td>Disabled People South Africa</td>
</tr>
<tr>
<td>EWP6</td>
<td>Education White Paper Number six</td>
</tr>
<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
</tr>
<tr>
<td>HDI</td>
<td>Human Development Index</td>
</tr>
<tr>
<td>ICF</td>
<td>International Classification of Functioning</td>
</tr>
<tr>
<td>ILO</td>
<td>International Labour Organisation</td>
</tr>
<tr>
<td>RDP</td>
<td>Reconstruction and Development Programme</td>
</tr>
<tr>
<td>SA</td>
<td>South Africa</td>
</tr>
<tr>
<td>SAHRC</td>
<td>South African Human Rights Commission</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>UPIAS</td>
<td>Union of the Physically Impaired Against Segregation</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
</tr>
</tbody>
</table>
Acknowledgements

I would like to thank the following for their time and valued contributions which have made this work possible.

In the UK: my dissertation supervisors, Katie Willis and David Simon, my UK assistants, and my parents.

In South Africa:
- Those who gave their time and expertise in interviews:
  - Sebenzile Matsebula (Ex leader of the Office for the Status of Disabled People)
  - Marie Schoeman (Department Of Education)
  - Goodman Vilakazi (Disability activist from Orange Farm)
  - Vernie Koemalo (DPSA official Johannesburg)
  - Ari Seirlis (Director of the Quadriplegic Association of South Africa)
  - Justice Albie Sachs (Constitutional Court of South Africa)
  - Dr. Gillian Saloojee (Therapist and founder of Mamalule Onwards)
  - Prof Haroon Saloojee (Therapist and founder of Mamalule Onwards)
  - The numerous social workers, therapists, and school staff
  - And especially the parents and children of Orange Farm
- Those who gave me invaluable assistance:
  - The fieldwork assistants/translators from Witwatersrand University
  - Sarah Dyer (Founder of Pamodzi Consulting)
  - Dr Terese Dirsuweit (Cultural Geography tutor, Witwatersrand University)
  - Prof Charles Mather (Head of Geography, Witwatersrand University)
  - Prof Stefan Grabm (Deputy Head Geography, Witwatersrand University)
  - Thandizwe Nsimbi (Technician, Witwatersrand University)
  - Pam Thomson (Admin Manager, Witwatersrand University)
Chapter 1: Introduction

Orange Farm is a peri-urban township approximately 45 kilometres south of the Johannesburg Central Business District (Fig.1). It includes one of the most populous informal township areas in South Africa (SA) (Thale, 2002) and comprises Wards 1–4 of the Johannesburg electoral area (Fig.2). The initial settlement was constructed in 1988 for displaced inhabitants from Wielers Farm near Grasmere (Thale, 2002) by the Transvaal Provincial Administration. According to the latest census information, the majority of incoming migrants to Orange Farm predominantly originate from Soweto, Meyerton and Evaton. Population estimates fluctuate between 163,826 (Census 2001) and 672,000 (Visser, 2007).

Within Orange Farm there are many children with disabilities who require access to services and amenities, including education. The World Health Organisation (WHO) (2006) observe that 10% of the global population are disabled, approximately 80% of whom live in the developing world. The proportion of disabled children in a developing country is usually higher than a developed country (Donald, 2007).
8514 disabled people were reported in the 2001 Census for Orange Farm, including circa 3000 disabled school age children (Table 1). Anderson and Pholole (2001) report that over 50% of school aged disabled children in Orange Farm do not attend school.

As a relatively new South African (SA) township, Orange Farm raises interesting issues regarding the experiences of disabled children in the country. The requirements of disabled people are in danger of being overlooked during rapid development in the area. Education is ‘positively associated with development’ (Dyer, 2002), as confirmed by the Millennium Development Goals (UNDP 2005), and therefore needs to be addressed for all Orange Farm children. Disability, childhood disability in particular, is a significant issue in SA generally; there being over one million disabled children in SA (Saloojee et al. 2006). Orange Farm has a large disabled population and serves as a representative area in which to research access to education for disabled children.

When Orange Farm was first established only the most basic provisions were made, but subsequently Orange Farm has experienced some of the most rapid development in the country since 2001 (Thale, 2002). The area has acquired: a new library (Plate.1); community centre; shopping mall; tarmac roads; and street lighting.

<table>
<thead>
<tr>
<th>Persons</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sight</td>
<td>3477</td>
</tr>
<tr>
<td>Hearing</td>
<td>1038</td>
</tr>
<tr>
<td>Communication</td>
<td>237</td>
</tr>
<tr>
<td>Physical</td>
<td>2160</td>
</tr>
<tr>
<td>Intellectual</td>
<td>585</td>
</tr>
<tr>
<td>Emotional</td>
<td>1017</td>
</tr>
<tr>
<td>Multiple</td>
<td>939</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>9453</td>
</tr>
<tr>
<td><strong>Net total (Total minus multiple)</strong></td>
<td><strong>8514</strong></td>
</tr>
</tbody>
</table>

Table 1 - Types of disability within Orange Farm (Census, 2001)

Plate 1- The new library and community centre (Thale, 2002)
The majority of residents are given a small plot of land to build their homes, often constructed of corrugated iron, with basic amenities (electricity, standpipe, and pit latrine toilet). There is an ongoing programme of construction of Reconstruction and Development Programme (RDP) houses. These small brick dwellings include such amenities as internal water supply and connection to the sewage system. Illegal migrants erect shacks on undesignated land which connect illegally to electrical supplies, and do not have access to safe sanitation facilities.

The main aims of this study are to investigate the reasons why disabled children reside at home instead of attending school. This paper is concerned with investigating the attitudes, perceptions and mechanics affecting the education system in Orange Farm with particular reference to disabled children. A pilot visit was undertaken in August 2006 and a preliminary overview of literature suggested that: transport; perceptions of disability; and income were central factors to consider.

Aims and objectives

- Overall aim:
  o To find out the reasons why disabled children are not attending school in Orange Farm.

- Specific aims:
  o To find out what effect transport has on disabled children’s access to school in Orange Farm.
  o To find out what the perceptions of disability are in connection with Orange Farm, and to assess their impact on disabled children’s school access
  o To assess the impact of family income on access to school for disabled children.
Chapter 2: Literature Review

This review draws on the limited literature on education for disabled people, a topic that is increasingly studied in the Western World but is sparse in the developing world (Charlton 1998). Geography, as a discipline, has failed to engage with disability, therefore much of the literature for SA comes from official government reports and documents (Power 2001). This review examines three key areas:

- Disability theories
- Government and official legislation and education policy
- School transport for disabled children

Disability theory

The grassroots network Disabled Peoples International (DPI) differentiates between functional impairment and disability. The International Classification of Functioning (ICF) defines disability as ‘[t]he outcome of the interaction between a person with an impairment and the environmental and attitudinal barriers he/she may face’ (Mulcahy 2005). The South African Human Rights Commission (SAHRC, 2002) uses the DPI definition and specifies that impairments may be permanent or temporary and can be sensory, physical, cognitive or psychological. The Department For International Development also uses this definition, but adds an economic perspective stating that a disability will reduce economic participation in the community. (DFID, 2000)

Disability theory uses the traditional, medical and social models to define people’s attitudes to disability. The medical and social models were developed in the Western world, particularly the UK, and may therefore be criticised for a ‘[f]ailure to account for the vast majority of people with disabilities who live in the Third World’ (Charlton, 1998.ix).

The traditional model

The traditional (religious or charitable) model views people as ‘victims’ of impairment and beneficiaries of charity for which they should be grateful (Underhill and Dyer, unpublished). Development assistance in SA has for a long time been based on this model (Coleridge, 1993). These attitudes often originate from local history and culture
People may regularly attend Christian church and base their lives around religious ideology, but a large proportion of the indigenous population believe in both witchcraft and Christianity (Masasa et al., 2005). In many religions and cultures disability is seen as a ‘punishment’ or ‘gift’ from God. The Bible links disability to being ‘[u]nclean, an outcast, and/or possessed by demons’ (Coleridge 1993:72). ‘People think that [disabled people] are not a full human being[s]’ (Charlton, 1998:13). This perception can segregate disabled people from mainstream society, and in the context of this paper, exclude disabled children from education.

The medical model

In the Western world the traditional model was largely replaced by the medical model (Fig.3) as advances in medicine and technology made treatment more available. The medical model describes disability as the problem of the individual (Schneider, 2006). It defines disabled people by their impairment, seen as an ‘abnormality’. (Valentine, 2001) This model sees disabled people as ‘patients’ who need caring for (Underhill and Dyer, unpublished). The idea of disabled people as separate ‘others’ can mean that ‘[d]isability comes to signify evil, social disorder, moral degeneracy and fear of dependency’ (Wilton, 2005).

The social model

The social model (Fig.4) was put forward by the UK based Union of the Physically Impaired Against Segregation (UPIAS) in 1975 in opposition to the medical model. (Finkelstein 2001) Development of the social model was heavily influenced by SA (Priestley, 2006). As Finkelstein (2005:1) says; ‘I
came to view complaints about the constrictions imposed on disabled people as similar to the oppression of South Africans under the apartheid system of segregation’. Nelson Mandela compared life under apartheid with disability in the Rivonia trial speech saying; ‘Above all, we want equal political rights, because without them our disabilities will be permanent’ (Finkelstein 2005:1). Schneider (2006) observes that the impairment of the individual is not seen as the disability, it is the barriers in society that disable the individual. These can be: lack of physical accessibility; social exclusion from society’s negative attitudes towards disabled people, and a lack of provision of services. Providing disabled people with assistive technology and accessible transport results in them having access to education, reducing their disablement (Schneider 2006).

**Models of thinking and provision of education**

Table 2, adapted from Rieser (2007) demonstrates a clear link between the disability models and the consequent provision of education.

<table>
<thead>
<tr>
<th>Thinking/Model</th>
<th>Characteristics</th>
<th>Form of Education</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Traditional</strong></td>
<td>Disabled Person, shame on family, guilt, ignorance.</td>
<td>Excluded</td>
</tr>
<tr>
<td><strong>Medical 1 (complete segregation)</strong></td>
<td>Attempts to separate DP so that the issues related to them do not affect others.</td>
<td>Segregation Institutions/ hospitals Special schools (with ‘expert’ special educators)</td>
</tr>
<tr>
<td><strong>Medical 2 (partial segregation)</strong></td>
<td>Person can be supported by minor adjustments to function normally. Continuum of provision based on severity and type of impairment.</td>
<td>Integration in mainstream:- a) At same location-in separate class/units b) Socially in some activities e.g. meals, assembly or art. c) In the class with support, but teaching &amp; learning remain the same.</td>
</tr>
<tr>
<td><strong>Social Model</strong></td>
<td>Barriers Identified -solutions found to minimize them. Attitudinal, environmental and organizational barriers are removed. DP achieve their potential, because they are welcomed.</td>
<td>Inclusive education - schools welcome everybody. Support is provided so all can be successful academically and socially, everyone values diversity. This requires reorganizing teaching, learning and assessment.</td>
</tr>
</tbody>
</table>

Table 2 - Implications of disability models for education (adapted from Rieser, 2007).
Government policy – education for disabled children

Human rights

Government legislation emphasises that disabled people are recognised as an important part of the community. SA is one of just seven countries that has signed and ratified the UN Convention On The Rights Of Persons With Disabilities article 24, which mandates an inclusive education system (UN, 2006) (Fig.5). The SA Constitution states that everyone of school age has the right to attend school (Fig.6).

“1) Everyone has the right:

a) to a basic education, including adult basic education; and

b) to further education, which the state, through reasonable measures, must make progressively available and accessible.”

Figure 5 - UN Article 24 convention ratification status (UN, 2008a) (Graphic adapted from UN, 2008b)

Figure 6 - Constitution of the Republic of South Africa 1996, Chapter 2 - Bill of Rights, 29. Education (South African Government Information, 2004)

The SA Schools Act states that ‘[a]ll children between 7 and 15, or in grade 1 to 9 must receive compulsory education’ (SAHRC n.d:5). The 1997 White Paper on an Integrated National Disability Strategy states that ‘[f]ree compulsory education should apply to all children of school age equally. Thus it should include children with disabilities, irrespective of the nature of their disabilities’ (1997:40). This shows a positive attitude towards disabled people. However, use of ‘should’ instead of ‘must’ leaves the meaning open to interpretation by schools. Similarly, ‘funds permitting’ creates loopholes in legislation being a non-binding term, thus funding can be denied to those who need it. Education is significantly more expensive for disabled children due primarily to high transport costs and higher school fees for specialist schools. Disabled children are unlikely to gain future employment, therefore parents are often reluctant to invest in education with no return (Kabzems and Chimedza, 2002).
SA is ranked 56th by GDP but 121st by HDI, (Fig.7) with a Gini Coefficient of 57.8 (UNDP 2008), showing substantial inequality within the country (Willis, 2005). SA is being taken over by Western capitalist ideas and places greater value on productive people (Watermeyer, 2006). Charlton (1998) draws a parallel between the alienation of disabled people now and self-alienation of Marx’s proletariat. Due to this, disabled people are largely excluded from Poverty Reductions Strategies (ILO, 2002).

Inclusive education strategy

The aim of inclusive education is to include disabled children regardless of disability, especially those vulnerable to exclusion from mainstream schooling (SAHRC, 2002). Inclusive education benefits society as well as the disabled individuals because funding special schools is expensive; money could be saved by implementing inclusive education. Inclusion helps to develop positive attitudes about disabled children and eliminate stigma. Furthermore, research conducted in Bangladesh reveals that disabled children perform better in inclusive schools (Kibria, 2005).

The Education White Paper Number six (EWP6) (Ministry of Education, 2001) stated that the needs of all learners must be met. The inclusive education plan aims to develop 500 ‘full-service’ schools over the next 20 years, with additional funding and training of staff to cater for disabled students (Department Of Education, 2005). Sukhraj (2006) reported that the inclusion plan was delayed due to lack of funding.

Kibria (2005) highlights barriers to education in Bangladesh, a less developed country than SA, who are experiencing similar issues with implementation. These include: cost; negative attitudes of professionals and the community; and lack of willing and trained teachers. Schools claim they are not sufficiently funded or prepared, placing disabled
children in an environment that does not cater for their needs (Kibria, 2005). Inclusive education is being implemented in Zimbabwe but the system is facing similar challenges to SA (Chitiyo, 2006). However, in Botswana, where inclusive education is more successful, they are actively investing money in training teachers; recommending they should have basic elements of special needs training (Dart, 2007).

**Transport**

Transport is a major obstacle for disabled people in SA, affecting: access to education; employment; and social activity (Seirlis and Swartz, 2006). Public transport rail and bus systems are almost completely inaccessible. The only options available to a wheelchair user are taxis and meter taxis (Fig. 8). Taxis have taken advantage of a niche in the transport market and charge high fares to carry a wheelchair and carer. There are no subsidies for taxi drivers and therefore no incentive to carry disabled passengers who take up more seats and add to journey times in a competitive market. Meter taxis are significantly more expensive than taxis, but will take the wheelchair user from door to door. The Department Of Education (DOE) policy assists only if a learner has to walk further than five kilometres per day, but a disabled child might not be able to walk at all (SAHRC, 2006). A school bus is sometimes arranged by the school but is an additional, sometimes prohibitively expensive, cost.

### South African transport terminology

- **Taxi** – a minibus holding up to 20 passengers which travels along a set route picking up and dropping at pre-determined points.
- **Meter taxi** – a car which takes a passenger from any point to any point
- **Bus** – public bus service with a city or local rural area
- **School bus** – bus operated by the Education Authority for mainstream schools in an area or by a specific special school
- **Coach** – long distance bus service
- **Train** – for this study, the suburban metropolitan rail service

*Figure 8 - South African transport terminology (personal field observations, 2007).*
Statistics – are disabled children accessing education?

An analysis of the latest census (2001) suggests that perhaps as many as 3,000 of the 8,514 disabled people in Orange Farm may be school age children. It is difficult to ascertain an accurate number, partly because many disabled children are hidden for cultural and religious reasons (Charlton, 1998). Accuracy of statistics is affected by the wording of disability related questions (Schneider & Couper, 2007).

Census 2001 (Statistics South Africa, 2005) shows that nationally, disabled children’s school attendance is only 10% lower than non-disabled, but EWP6 identified 64,200 disabled children in school, and between 260,000 and 280,000 out of school (Soudien & Baxen, 2006). For comparison, across the Global South, only 20-30% of disabled children attend school (Bieler 2006).

Saloojee et al. (2006) makes the assertion that in Orange Farm 50% do not attend school, and that SA has neglected to deal with the problems which lead to disabled children not being able to access services. Furthermore, there are 39 primary and secondary state and independent schools within Orange Farm, but no special needs schools; mainstream schools will not admit disabled people.

Published literature has investigated isolated elements of the issue, yet few studies have considered the range of factors and the interconnections between them to identify why disabled children in Orange Farm have restricted access to education.
Chapter 3: Methodology

Research was conducted during the period 9th July 2007 and 20th August 2007. Five primary techniques were implemented to gain the data required to achieve the aims of this paper: semi structured interviews; questionnaires; focus group discussions; telephone surveys; and participant observation in a controlled setting.

Qualitative methods were used in this research because they allow participants to share their experiences on a research topic openly.

Qualitative techniques allow researchers to share in the understanding and perceptions of others and to explore how people structure and give meaning to their daily lives. Researchers using qualitative techniques examine how people learn about and make sense of themselves and others (Berg 2007:8).

Semi structured interviews (written)

Interviewing parents, school principals and professionals (disability activists, government officials and social workers) allows people to ‘comment on their experiences and articulate their feelings and values’ (Hoggart et al, 2002:205) However, participants do not have an infinite amount of time and attention to give the researcher (McCraken, 1988).

Parents

Semi-structured interviews were chosen because it was simple for the parents to understand the questions, however, this also allowed for open responses. Data was collected on a range of factors including perceptions of: disability; transport; built environment; gender and human rights. The interviews lasted approximately two hours, the personal nature of the questions making face to face interaction essential. Despite being time consuming and requiring travel (Hoggart et al, 2002), utilising the home for conducting interviews leads to a more relaxed and open conversational environment (Valentine, 1997).
A pilot study of the interview was conducted with a mother of a disabled child contacted the previous year; allowing time to evaluate and modify the proposed questions. Research candidates were identified by snowballing, which is a

Non probability sampling strategy which is excellent at locating subjects with certain attributes necessary to the study. Snowball samples are popular for their ability to address successfully sensitive topics as well as difficult-to-reach populations (Berg, 2007:44).

The strategy for snowballing involves identifying people with relevant attributes and asking them to partake in an interview or discussion. Participants are asked whether they know of other people with the desired attribute and whether it would be possible to be put in touch with that person.

School principals and centre directors

Six principals and directors of centres were interviewed at their place of work, two from mainstream and four from specialist schools. A translator was used where needed, although three comfortably conducted the interview in English. The interview focused on attitude and willingness to accept a disabled student into the school.

**In-depth interviews (digital recording)**

A number of professionals were informally interviewed at their place of work or via telephone. A list of points to cover was constructed, allowing the conversation to flow and for them to relay their experiences. This also allowed me to concentrate on the discussion while providing an accurate record for later transcription, essential if the interviewee is to be quoted. This is time efficient for the interviewee, but transcribing adds time for the interviewer (Hoggart et al, 2002).

**Questionnaires**

A questionnaire was used for gathering quantitative data from School Principals. This technique helps to limit uneven responses (Hoggart et al, 2002).
Questionnaires were used with 11 children at a centre for disabled children. Their ages ranged from 14-23 years. Questionnaires were designed for the children to be short and simple, in some cases the phraseology was modified further in order for some children with learning difficulties to comprehend. A translator was used to communicate in the local languages of Sesotho and IsiZulu.

**Focus group in a school**

Focus group discussions were used in a special school to understand the feelings of teachers because this technique encourages a group to ‘feel strength in numbers and feel in control of the research process’ (Lloyd-Evans, 2006: 155). This allowed a more relaxed conversation between the participants, so their responses were not limited by direct questioning. This made it an effective way to capture knowledge, opinions and feelings (Hoggart et al. 2002). There were six teachers at the focus group, which lasted for 30 minutes.

**Telephone survey**

Orange Farm mainstream schools and special schools across Gauteng were telephoned to obtain basic statistical information to save time travelling to each school when only a small amount of data was required.

**Observations within schools**

A group of 30 children were observed in a day centre for 2 hours during a party to evaluate whether they might be unnecessarily excluded from mainstream schools. Covert participant observation, where I do not inform the people that they are being observed, was used. I was ‘the participant as observer’ (Junker, 1960 cited in Hoggart et al, 2002) because it allowed me to provide a stimulus (party games and activities) that produced a response that I could evaluate.

During the research at Orange Farm, six schools were visited: two mainstream schools, one specialist school and three specialist day centres. During these visits I observed the activities taking places: what the children were learning; conditions in the school; and
facilities. I looked at the equipment and whether it was being used. I also observed how accessible the schools were. These observations were documented with photographs (where possible and appropriate).

**Limitations**

It was difficult to locate disabled children as they are often hidden within the community. Contact with the community was initially established through a physiotherapist who had previously worked with the community for research purposes; returning to the community every six months to meet the parents and treat the children. One parent acted as a gatekeeper and could recruit potential interviewees, because she knew many families within the area and helped in running courses for disabled children. The use of independent translators ensured that the gatekeeper did not exert undue influence (Bujra, 2006).

Most interviewees speak IsiZulu or Sesotho as their first language, so a translator was essential to ensure they understood the questions. Sometimes the parents interpreted the questions differently than intended, so the questions were explained in more detail by the translator. The Consent Form (Appendix D) was provided in the first language explaining confidentiality and nature of the research to each interviewee.

A focus group was attempted at the centre. However, this failed because the children had poor understanding of the concept and those who ran the centre tried to influence the children’s responses.

Observations made at schools were documented by photographs, however, it is not always appropriate.

**Ethical issues**

There is an argument that research cannot be completely ethical, however, this paper has endeavoured to consider ethical issues as much as possible. Cutting ethical corners is not an option. As a disabled geographer researching disability, some of the topics were very
emotional. My disability helped me to sympathise with their situation, but this emotional attachment to my subjects may have reduced my impartiality.

Completing research abroad involves a considerable amount of background research into cultural values. There are time constraints on finding participants who conform to the study topic and have the available time and willingness to take part in the study. Research abroad puts pressure on collating enough data to answer the aims.

SA research ethics mandate that a consent form be presented to each interviewee. The standard consent form was written in a formal language which the parents could not understand, so key points were summarised to clarify understanding.

There is an issue of bringing personal subjectivities and power relations to the research. My presence as a white, male academic with lots of equipment would have had an effect on the participants. There is a traditional African belief that disabled people are viewed negatively and bound up in notions of the devil, raising issues regarding my position as a disabled person.

Information about disabled children and their families is confidential, so particular attention was paid to ensuring informed consent and maintaining confidentiality in recorded information (Brydon, 2006).
Chapter 4: Results and Discussion

Image removed for confidentiality reasons.

Figure 9 - Orange Farm field research locations (adapted from City of Johannesburg Corporate GIS 2007)
Access to education?

**Overall aim: to find out the reasons why disabled children are not attending school in Orange Farm.**

This section draws together the overall results from the field research (Fig.9), identifying whether disabled children have access to education and the principle reasons for lack of access.

Children not at school

All of the 35 non-disabled school age children were at school. Eight of the 25 disabled children were not at school or a day centre, and stayed at home all day (Fig.10). Of these, one of them was too young to go to school.

**Case study: Child not at school**

Child FD was thrown out of school when his mother died and he moved. Administrative errors meant he did not have a wheelchair, so he could not get to school. No school will take him now as he has missed four years education. He stays at home, his grandmother struggles and does not know where to turn for any support. FD is unlikely to be employed and therefore will not generate income for the family.

![Figure 10 – Case Study of a child not at school to demonstrate why some disabled children do not attend school (personal research results, 2007).](image)

Seven parents of the eight disabled children who were not attending school said they would like their children to go to school. One parent was of the opinion that she would not like her disabled child to attend school because they would not provide enough care. Three were concerned about violence and abuse, which is a significantly increased risk for disabled children. (UNICEF, 2005) All parents said school is worthwhile.

The parents’ of these eight children were asked if their child had ever been at school and why they do not attend now. The response was broken down into six categories for analysis. Some gave more than one reason for leaving. (Graph.1)
Graph 1 - Reasons why disabled children in Orange Farm do not attend school (personal research results, 2007).

Schneider (2006) found similar reasons for non attendance, including ‘shortage of money, lack of schools catering for their needs and priorities in the developing world’. Of the seventeen who are at school only five have always attended the same school, twelve moving because their school could not meet their needs.

Reasons for lack of Access

The most important factors in determining access to education were: transport; attitudes towards disability; and family income. This is examined in detail in the following sections of this paper. The other less significant factors include: the built environment; human rights; and gender.

Accessibility of the built environment is important for all public services, including education (Imrie & Hall, 2001, Schneider, 2006 and SAHRC, 2002). The built environment in Orange Farm is not a significant problem for access to education because it has been constructed since 1988. School buildings are modern structures, mostly single storey, many incorporating accessibility features such as accessible toilets. This is positive because including accessibility in the original building only increases costs by 1%; later
adaptation is more expensive (Steinfield, 2005). The gravel roads are a problem for wheelchair users, but these are being replaced by tarmac.

The SA Constitution could be considered to have the most progressive disability rights in the world. Chief Justice Albie Sachs, an anti-apartheid campaigner, who was disabled by a bomb due to his battle against the apartheid regime, stated in an interview that as one of the people involved in drafting the 1996 Constitution he ensured it had strong anti-disablist legislation (Plate.2).

Plate 2 - Draft version of the Constitution showing the amendment to include disability - Apartheid Museum, Johannesburg (taken by researcher)

However, I found that people are unaware of their rights and have no access to the legal system. The SAHRC confirmed in an interview that no case about access to school for a disabled child has ever gone to court. Sebenzile Matsebula commented in an interview that the disability rights movement, which was so effective in the anti-apartheid campaign, seems to have lost leadership. The original leaders have taken up important positions within government and public organisations, but are no longer as active in
driving social change (Matsebula et al, 2006). Vernie Koemalo of DPSA said in an interview that; ‘DPSA is more monument than movement’.

Gender does not seem to be a significant factor in determining access to education for disabled children. Families with disabled children often have a single female head of household, but in Orange Farm this is also common among families without disabled children. Some families with disabled children had been abandoned by the father, but this was attributable to their attitude to disability rather than gender.
Transport

Aim: To find out what effect transport has on disabled children’s access to school in Orange Farm.

There are no ‘special schools’ within Orange Farm, therefore disabled children must travel significant distances to access education. The nearest special school is in Lenasia, which is 20 kilometres from Orange Farm. Some schools or centres provide a school bus. Where no school transport is provided, travel is privately arranged by the parents with a taxi or meter taxi owner at their own cost; or the child may walk to school. A public train service is available from Orange Farm, but this is inaccessible and unsafe. School buses are therefore the main way of getting disabled children access to education (Graphs.2,3). Interviews with parents and professionals highlighted some key problems with the provision of transport to schools. There are three main areas of concern: availability, appropriateness and affordability.

Availability

This section will discuss the availability of transport to disabled children who travel from Orange Farm to school; a major obstacle when accessing education. Many schools do not offer transport due to lack of funds, or are reluctant to send buses to Orange Farm. Marie Schoeman confirmed in an interview that accessible school transport is separate from the general school bus system, saying: “We have not been able reach a point where when we are planning learner transport we can include disabled transport in the whole system.” Gauteng Education recognises the need to extend the provision of special needs school transport (Department of Education Gauteng, 2007). From my interviews with school teachers in Orange Farm, it became clear that geographical location was a significant issue in transporting disabled children to school. Comparison of the disabled and non-disabled children shows the effect of segregated schooling. Disabled children go to special schools rather than local mainstream schools and they have to use a bus or taxi rather than walking. Nationally 81% of children walk to school (Statssa 2007).
44% of the parents say that the transport is unreliable. (Fig.11) Sometimes, school buses break down for long periods of time and the children cannot get to school because no alternative is provided.

One interviewee stated drivers would not stop when they saw the wheelchair so they employed a meter taxi service, which is much more expensive. For example child AA travels by taxi at a cost of R133 per month, while child VA and FD use a metered taxi at R280 per month. In two interviews parents stated that they carried their child on their back to the taxi as they could not afford a fare for the wheelchair.

Official SA policy states that public transport should be accessible to disabled people. In practice the taxi industry dominates the transport system and drivers do not want to make extra efforts to carry disabled people and view carrying them as a loss of time and money. This is confirmed in an interview with Goodman Vilakazi (Plate.3) who says; “The public transport does not cater for disabled people, the bus drivers and taxi drivers feel that they
are wasting time”. The New Taxi scheme, which is replacing all existing taxis by 2012, has made accessibility features optional. In an interview with Ari Seirlis, he stated that; ‘only four accessible New Taxi vehicles have been introduced in the whole of SA’. Buying an accessible taxi is more expensive and will reduce the number of passengers carried. An option could be that the Government could subsidize the cost of accessible taxis and enforce that every taxi be accessible. Similarly, there is no legal requirement to make public buses accessible, so only ten Johannesburg buses are accessible for wheelchair users (Whitehead, 2004), including six out of 532 operated by Metrobus (The City of Johannesburg, 2008).

Affordability

Transport costs in the Orange Farm sample group ranged from about R150 (£11) a month by taxi, to about R300 (£22) a month for school transport organised by a group of parents to take the children to school.

**Case study – a high school student**

BB travels by power wheelchair from home to school, a distance of approximately one kilometre. Her sister attends the same school and walks with her. When it is wet the gravel roads make her power wheelchair unusable, so the family hire a meter taxi to take her and her manual wheelchair to school.

*Figure 12 - Case study taken from results of a questionnaire to show transport issues for one disabled student in Orange Farm (personal research results, 2007)*

The cost of transport for the disabled child is more expensive than for their non disabled siblings. (Fig.12) In many cases non disabled children can walk to school, however, for long distances, when transport is needed, accessible transport may cost more because of multiple fares. A taxi operator will charge three fares; one for the wheelchair user; second for the carer; and a third for the wheelchair. One family pay R70 a month for a non disabled child to travel to school, and R270 a month for their disabled child. Because of
the problems associated with transport, some children are unable to get to school and therefore cannot access education.

Appropriateness and safety

Safety is another major issue with transport. An interview with Ari Seirlis reveals that although some schools provide transport it is often very inappropriate because they cannot carry wheelchairs (Plate.3). They have no safe tie down systems for people using wheelchairs or any other safety devices for people with other mobility impairments. 40% are concerned about their child’s safety. The school buses are old and have no seatbelts, therefore physically disabled children are sometimes left rolling around on the floor. Some of the taxi drivers do not have licences and most of the taxis are not road worthy. 25% of parents said that the transport was not easy to use; children often have to be lifted into the buses because they are not adapted to carry equipment.

My study confirms the findings of Francis and Muthukrishna (2004) who found that transport was a significant problem for disabled students in rural SA. Without suitable public transport, it is simply impossible for some students to attend school. This is most obvious in the case of people with mobility impairments, but the issue of safe and accessible transport is important to people with a range of other disabilities. Ari Seirlis agreed with Charlton (1998), saying in an interview that; ‘Transport still remains the greatest barrier to the acquiring of skills, the opportunity to socialise, to the opportunity to go to school’. 
Perceptions of disability

Aim: To find out what the perceptions of disability are in connection with Orange Farm, and to assess their impact on disabled children’s school access.

In this section of the paper, I will discuss the perceptions of disability and how these beliefs affect and shape the lives of disabled children. The traditional, medical and social models of disability are central to how disabled people are treated within society. The attitudes of: parents; the wider community; educators; and policy makers have a significant effect on access to education for disabled children.

The traditional model

Within the Orange Farm community views are predominantly in line with the traditional model (see literature review) and originate from Christianity and earlier pre-Christian beliefs. Many believe that children are disabled because their parents had committed a sin or been affected by witchcraft, confirmed by Francis and Muthukrishna (2004). A parent from the study expressed that ‘[i]t seems as if you have sinned, you are being punished’. Most people strongly believe that disability is the will of God.

Case Study: Community attitudes towards child LB

One parent in the study said; ‘They do not treat him well, they always say my child is wild and sometimes they say ‘mad boy’. Last week, another old guy beat him and said he was mad.’ The family had stopped going to church because their son was alienated by the church.

Figure 13 - Case study taken from results of a questionnaire to show community attitudes for one disabled student in Orange Farm (personal research results, 2007)

My research shows that there is a belief that some disabled people are less intelligent. It is thought, if somebody looks physically different, or has less control over his or her body, that this extends to the person’s mind. (Fig.13) Disabled people in their 20s are treated like children.
The party arranged as part of the research at the centre for disabled children suggests that some children at the centre have the mental capacity and interest for mainstream school (Plate.5). They engaged well when stimulus was provided (Graph.4). Although they might still require assistance, some would be capable of integrating socially and academically in a classroom. They are segregated from society because their parents are uninformed about where they can fit in, and schools will not accept them.

Several families in Orange Farm believe that having a disabled child brings shame on the relatives. As a result of this, they may try to hide the child from the rest of society so that nobody knows they exist. It would seem that there are many children who are hidden within Orange Farm. For instance, I did not find any blind people during the research project, although according to the official statistics, there are apparently more blind people than those with any other disability. Out of the total population of up to 3000 disabled children that could be in Orange Farm, only 287 could be located. It is suspected that many of the other children are hidden, although in some cases it can be due to other circumstances. (Fig.14)
It is assumed that disabled people are passive and are never going to speak out for themselves. Therefore the lives of disabled people are decided for them by parents, teachers and professionals. Disabled children living in Orange Farm have always had decisions made for them. Some do not have the courage to fight back and challenge their own education. They are also open to possible abuse or exploitation from the schools and centres because the staff think that the children will not tell their parents.

At one day centre, the children are spending several hours a day breaking up coat hangers to prepare them for recycling. (Plate.6) The Principal said; “[The hanger company] has contracted us to make hangers and they pay us and we share that money amongst ourselves.” The Principal told me in an interview that the children will eventually receive money for doing this. When talking informally to the children, however, they were not aware of this arrangement.

A specialist school for the deaf that I visited is not fully utilised. Only 83 out of 200 pupils have hearing problems (Plate.7). The focus group suggested that the school had been unable to recruit more deaf children, but it is estimated that there are approximately 300 deaf children in Orange Farm alone. The group identified that: transport; lack of use...
of sign language; and the curriculum not extending to grade 12 as major problems. Students are supposed to be able to learn using sign language (DOE, 2005 and Howell et al, 2006) but teachers are not supported in acquiring these skills.

As a result of negative perceptions of disability, many children do not go to mainstream school. Instead they go to a special school or day centre where they do not receive suitable education. Until perceptions of disability change within the community, disabled children will continue to lag behind their peers in their educational achievements.

The medical model

The legacy of the apartheid era includes the separation of schooling for disabled children. Disabled white children were placed in special schools. Disabled black and Asian children generally remained at home without education. Some special schools were created by the local community in areas such as Soweto and Lenasia. Orange Farm was created in 1988 and all the schools that have been built since are mainstream. The attitudes of teachers are largely based on the idea that disabled children are ‘different’ and need to be catered for differently. Therefore, teachers are reluctant to accept disabled children in mainstream schools (Kubyana 2005). As soon as a child is identified as disabled, they are expected to leave mainstream schools and go to a special one (Millogo & Siranyan, 2003, and Brandon, 2006, and Mdikane, Ntshangase and Mayekiso, 2007, and Obeng, 2007) (Fig.15).

Case Study: Epilepsy

Child KB started mainstream primary school when he was 6. After three years his mother was told to take him to a special school, because he had fits and was perceived as a slow learner. He has missed four years of education, but speaks four languages and knows some sign language, is partially literate in Sotho and English and plays chess well. This capable child has been denied access to education because of the medical model thinking of teachers.

Figure 15 Case study taken from results of a questionnaire to show teachers attitudes for one disabled student in Orange Farm (personal research results, 2007)
The social model

The government in SA has an inclusive education plan based on the social model. The plan is to build full service schools which will admit disabled and non-disabled children and stop building special schools.

Support groups are being set up so that parents can openly talk about any issues, share ideas and talk about disability in an environment where they feel they will not be judged. The government is designing a programme to raise awareness about disability for teachers alongside the teacher training programme.

Educational policy makers have to address the problem of the long timescale for implementing the inclusion policy. It would undoubtedly be best for Orange Farm mainstream schools to admit disabled children; but until this can be achieved the absence of any special schools means that most disabled children are receiving no education at all.

There needs to be disability awareness provided for the wider community to avoid the negative treatment of disabled children. The differing views of the community, teachers and policy makers reinforce Priestley’s contention that; “There are risks in building new educational programmes based on the cultural and economic assumptions of the North”. (Priestley in Watermeyer, 2006, p.20.)
**Family Income**

**Aim:** To assess the impact of family income on access to school for disabled children.

**Disability Grants**

Only 12% of Orange Farm adults are employed (Census 2001). The Principal of a secondary school in Orange Farm confirmed that over 80% of parents of children in his school were unemployed. Those that are employed tend to be in unskilled manual labour and they do not earn more than R5 an hour (£0.35) (South African Dept of Labour).

Disabled people can receive a grant of R870 per month. Up to 18 years of age, this is a Care Dependency Grant (CDG), over 18 it is the Disability Grant (DG). However, those with income above R1100 are not eligible for this grant (South African Government Services). Grants can also be obtained from fostering a child and for any young child up to 12 years old. In some cases, the family is dependent on the CDG/DG as the only source of income. Disabled activists and others criticise this use of the grant arguing that it is solely for the disabled child. However, if a family has no other income the grant will be used to alleviate poverty.

18 of the families interviewed receive CDG/DG, five do not. To expand, 19 children received CDG/DG, six did not. Limited access to welfare services means a lot of disabled people end up not receiving the grants that they are entitled to (Schneider, 2006).

One parent had two disabled children and only applied for one child because she didn’t think it was fair to apply for two. Another parent was denied CDG/DG for having a bank account even though the account was empty. One was told she cannot have both CDG/DG and foster care grants. Another mother stopped receiving the CDG/DG because she did not reapply when the child turned eighteen, when it changes from a CDG to a DG. Finally, a mother from Lesotho had no SA ID, so was unable to apply for CDG/DG. Schneider & Saloojee (2006) reported that only 40% of eligible children in peri-urban
Gauteng received CDG. Nationally 182,365 CDGs were received in 2007 (Statssa 2007), but the disabled child (0-18) population Census 2001 was approximately 500,000.

Social workers function as gate keepers, controlling access to grants. (Fig.16) They are poorly trained and do not know the basic criteria for giving grants, leaving many parents unaware of their entitlement and therefore missing out on potential financial aid. (Schoeman, 2002)

Employment Income

Participants were asked whether they were employed, as this indicates whether they have an income other than the CDG/DG. (Graph.3) This is important because it shows whether the CDG/DG is likely to be used to support the whole family.

![Graph 3 - Employment in households with a disabled child (personal research results 2007)](image)

It is uncertain whether people with disabled children are more likely to be unemployed than non-disabled, because unemployment is high in the general population. Some of the mothers clearly had restrictions to their employment because of their disabled children. For example, one parent had to quit her job because she was told she was having too much time off.

**Access to grants – a test case**

Three different social workers were asked the same question. “If a child is both disabled and a foster child, can they get both grants”. One said only the disability grant, one said only the foster grant, and one said both grants. An interview with a senior manager who deals with disability grants revealed that they can get both grants.
Support from family members

It is noticeable that under half of families in the sample were headed by the father. (Table 4) In 13 of the households, the father provides financial support whilst ten of them do not. Fathers may leave the family when a disabled child is born because they do not want the responsibility or the social stigma attached to having a disabled child. 14 of the disabled children are cared for by their parents as well as another member of the family who helps the primary carer, usually the mother. The remaining children are either independent or cared for only by their mother. Nine households get additional financial support from other family members whilst 14 did not.

Disability Costs

The children in this research are all from the same families. Any cost differences between children are therefore entirely attributable to disability. Additional costs, for example diapers, wheelchairs (Plate 8), special diets, and transport can cost up to R530 a month.

<table>
<thead>
<tr>
<th>Head of Household</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father</td>
<td>11</td>
</tr>
<tr>
<td>Mother</td>
<td>9</td>
</tr>
<tr>
<td>Grandmother</td>
<td>1</td>
</tr>
<tr>
<td>Grandfather</td>
<td>1</td>
</tr>
<tr>
<td>Mother’s partner</td>
<td>1</td>
</tr>
</tbody>
</table>

Table 4 - Head of household

Photograph removed for confidentiality reasons.

Original photography showed old, battered wheelchair

Plate 8 – Additional cost of wheelchairs (photograph by researcher)

Graph 4 - Comparison of education costs for disabled and non-disabled siblings
Education costs for disabled children averaged R465 per month, compared with R314 for non-disabled children. (Graph.4) Fees are higher for disabled children, and this difference will increase in 2008, when, according to the Principal of the secondary school, fees will be abolished for mainstream schools in Orange Farm. Transport is more than four times as expensive for special schools because of the distance travelled; non-disabled children go to local schools. Food costs are lower for disabled children because many special schools and day centres provide food as part of the school fee. The costs for school uniform and books are lower for disabled children because there are no uniforms and limited requirements for text books. Transport is the biggest cost for disabled children, and is also the area where there is the most significant difference in costs. Free school transport is provided in some rural areas of Gauteng (Gauteng News, 2003), but peri-urban special school transport is not free.

In one case parents took their disabled child out of school because they said it was too expensive, even though they had a CDG/DG. It is useful to consider that although education is important in the Western world, it may not be viewed as such in a community where many people are unemployed with poor prospects for the future. Once I suspended judgement from my ‘western perspective’ I was able to rationalise their decision. A family living in poverty might choose not to spend a great portion of their income on the education of their disabled child, who in their eyes will probably never get a job and generate income for the family. In Orange Farm, where only 12% are employed, disabled people are even less likely to participate in the economic life of the community. The families that ‘misspend’ the CDG/DG may think it is better to spend the money on things that will support the whole family in the present rather than investing in the future.

The difficulties faced by disabled people in Orange Farm reflect the lack of implementation of South Africa’s policies for the disabled, exemplified by the lack of progress on the five key areas identified in a 2002 contract between the OSDP and DPSA. (Table.5)
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>• Ensuring accessibility for all disabled people in the new taxi recapitalisation initiative and through new bus contracts;</td>
<td>• None of the new taxis are accessible, and new inaccessible buses are being introduced in Johannesburg;</td>
</tr>
<tr>
<td>• Supporting the implementation of EWP6</td>
<td>• Despite being physically accessible there are no inclusive schools</td>
</tr>
<tr>
<td>• Recognition of South African Sign Language and the provision of interpreters;</td>
<td>• MC Karbhai is reducing the number of deaf students, partly because of lack of teachers trained in sign language;</td>
</tr>
<tr>
<td>• Inclusion of disabled people in mainstream government initiatives towards small business development and employment;</td>
<td>• The limited training facilities for disabled people are lacking support;</td>
</tr>
<tr>
<td>• Ensuring that all disabled people who qualify for a disability grant are registered with the authorities and receive their grants.</td>
<td>• Social workers are acting as gatekeepers and failing to ensure that people understand and access the grant system</td>
</tr>
</tbody>
</table>

Table 5 - Progress on five key areas of disability policy
Chapter 5: Conclusion

This dissertation has shown that the most significant issues preventing the studied disabled children from accessing their right by law to education has three facets: cultural attitudes; income; and availability of transport.

Local Orange Farm cultures are associated with religious ideologies with negative perceptions of disabled children as an embodiment of the devil, or as bewitched. Furthermore, some locals believe that children are born disabled as a result of their parents committing spiritual sins. From a Western perspective, these negative cultural attitudes and perceptions of disabled children by the inhabitants of Orange Farm has been identified as the most significant barrier to disabled children’s education. Until disabled people are culturally respected as equal, persuading parents to consider educating their children at school will be challenging. Orange Farm’s population perceives disabled children’s access to school in line with the traditional model of disability. For this reason, many disabled children are hidden from society as their parents believe that negative spirits have inhabited their child and this will bring great shame on the family.

Negative attitudes of educators prevent disabled children from accessing schools. Further, teachers consider that teaching disabled children is stressful. There is a gap between the aspirations of the official DOE policy of inclusion and the reality on the ground in Orange Farm. Without efforts to change attitudes in the community and among teachers many disabled children will not attend school for the foreseeable future.

Transport infrastructure, responsible for transporting disabled people to school, is one of the contributing factors for disabled children not accessing education; as suitable transport is not available. The unavailable and unsuitable infrastructure of Orange Farm public transport prohibits disabled people from travelling ‘normally’, and thus these people rely on expensive taxis or buses which are organised for their sole use. This form of transport is problematic in three ways. Firstly, the high cost of transport is the main economic factor for keeping children at home instead of sending them to
school. Secondly, the transport that is available is very unreliable, making it impossible to attend school. Finally, the transport is unsafe; sometimes children have to lie unprotected on the floor.

SA is investing money in transport infrastructure, however, the plans that are being implemented are not disabled access friendly. Instead of ratifying transport legislation to force accessible public transport, inaccessible new taxis are bought which exacerbates inaccessibility. While cheap public transport is unavailable to peoples with mobility issues, the chances of them attending school is severely reduced as the costs of private transport is not comparable with family income.

A large percentage of Orange Farm inhabitants are unemployed. The CGD/DG, available to families with disabled children is intended for the sole upkeep of the disabled child. However, the widespread financial issues associated with Orange Farm results in the grants being used for multiple purposes, and at times may be utilised to sustain the entire family; this may even be the sole source of income. The consequences of this may be a necessary choice not to educate children and instead focus on basic survival needs; as school and transportation fees are relatively high for disabled children.

In the Constitution, the INDS, EWP6 and the ratification of Article 24 South Africa has declared an intention to build a post apartheid society that ends segregation for disabled people. This intention is not being achieved. Every inaccessible new taxi, every newly qualified teacher untrained in special needs, builds a new barrier for disabled people. Orange Farm, with its accessible school building infrastructure, appears to be a good opportunity for rapid implementation of the inclusive education policy. Failure to seize this opportunity will deny access to education for another generation of disabled children in Orange Farm.
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Appendices
### Appendix A — Formal structured questionnaire

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<th>F</th>
<th>Name</th>
<th>P</th>
<th>Address</th>
<th>Phone</th>
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</thead>
</table>

**Education** (complete for each child in the family)

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<tr>
<th>Child A</th>
<th>Child B</th>
<th>Child C</th>
<th>Child D</th>
<th>Child E</th>
<th>Child F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>S</td>
<td>G</td>
<td>L</td>
<td>B</td>
<td></td>
</tr>
<tr>
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<td>grandchild</td>
<td>grandchild</td>
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<td>Female</td>
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<td>Disability?</td>
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<td></td>
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<td>Does this child attend a school or centre?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>(If NO skip to 14)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What kind of school or centre?</td>
<td>Public secondary</td>
<td>Public secondary</td>
<td>Public primary</td>
<td>Special School</td>
<td></td>
</tr>
<tr>
<td>Which school or centre?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is this the nearest place to home?</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Has this child always attended this kind of place?</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Does this child have any special resources or equipment for this place?</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does this child have any personal assistant for this place?</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How much does it cost to attend for each month?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) Fees</td>
<td>6</td>
<td>6</td>
<td>8</td>
<td>520</td>
<td></td>
</tr>
<tr>
<td>b) Transport</td>
<td>0</td>
<td>0</td>
<td>70</td>
<td>280</td>
<td></td>
</tr>
<tr>
<td>c) Food</td>
<td>80</td>
<td>80</td>
<td>80</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>d) Other (uniform, books, pencils, etc)</td>
<td>34</td>
<td>34</td>
<td>34</td>
<td>150</td>
<td></td>
</tr>
<tr>
<td>Total education cost</td>
<td>120</td>
<td>120</td>
<td>192</td>
<td>950</td>
<td></td>
</tr>
</tbody>
</table>

**Complete 14 – 19 for disabled children only**

<table>
<thead>
<tr>
<th>Child A</th>
<th>Child B</th>
<th>Child C</th>
<th>Child D</th>
<th>Child E</th>
<th>Child F</th>
</tr>
</thead>
<tbody>
<tr>
<td>If not currently at a school or centre where is this child?</td>
<td>Home</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Would you like this disabled child to attend school?</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you applied for a place at school?</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------</td>
<td>--------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Will the school accept this disabled child and if not then why?</td>
<td>No, they said it was full and they were going to call – I am still waiting</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. What alternative did the school suggest?</td>
<td>None</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Has this child ever been at a school or centre and has now left? Why did they leave?</td>
<td>He has always been at school, he stopped when his mother passed away. A year before last they told us that they were full. We went to the doctor and the doctor suggested that we take him to a new school because this one does not want to take him but I still want him to go there.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Disability**

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
</table>
| 20. What is other people’s attitude towards disabled people? | People were impatient with him, now they are used to him. At church people like him but when I go to people that do not know him they complain about him because he touches people anyhow but some are fine.  
—he does not have a balance so he will always hold on to people. |
| 21. Why do you think people are disabled? | God wants to test people. They are born because of God’s will. |
| 22. Do you think disabled children should have the same opportunities as non-disabled? | Yes disabled children should have same opportunities as normal children. They should be able to attend mainstream schools so that people could get used to them. |
| 23. How does disability affect the family? | The family did not want to help taking care of him but they love him so much. |

**Transport**

<table>
<thead>
<tr>
<th>(answer for each child in the family)</th>
<th>Child A</th>
<th>Child B</th>
<th>Child C</th>
<th>Child D</th>
<th>Child E</th>
<th>Child F</th>
</tr>
</thead>
<tbody>
<tr>
<td>24. How does this child get to school/centre? (School bus/taxi/public bus/car/walk/other?)</td>
<td>Walk</td>
<td>Walk</td>
<td>School bus</td>
<td>Taxi</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
25. Transport service

<table>
<thead>
<tr>
<th>a) What time do they leave home?</th>
<th>7:00</th>
<th>7:00</th>
<th>6:30</th>
<th>6:30</th>
</tr>
</thead>
<tbody>
<tr>
<td>b) Is the transport easy to use for your child?</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Is the transport reliable?</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Is the transport safe?</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) Do the drivers refuse to take your child?</td>
<td>No</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) Where is the nearest pick up point for your child?</td>
<td>At the house</td>
<td>At the house</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

26. Apart from school/centre what other comments would you make about transport for a disabled person?

*The reason I decided to have the regular guy it was because other drivers wouldn’t stop for us when they see a wheelchair.*

### Built environment

27. What kind of house do you have? *(See Dwelling Type list)*

<table>
<thead>
<tr>
<th>A - House of brick structure</th>
</tr>
</thead>
</table>

28. Which utility services do you have?

| Water – house or stand pipe, | House |
| Electricity | Electricity |
| Sewage – connected to system, council cleared pit latrine or un-cleared pit latrine | Connected |

29. Are there any adaptations for disability? E.g. ramp

| No |

30. What electrical appliances do you have? E.g. Cooker, fridge, tv, hi-fi, microwave)

| Stove, fridge, kettle, iron, heater, TV, radio |

### Income

30. Do you have any kind of employment? *(see Employment list)*

| K - Occasional worker |

31. Do you get any disability grants/ allowances?

| Care allowance R870 Foster care 620 x 3 870 +1860 = 2730 per month |
32. Do you get any financial support from any other family member?  No

33. Disability costs e.g. wheelchair, pampers, bibs, extra clothing, special diet.  None. Government wheelchair was applied for but the paperwork was lost twice before the wheelchair was eventually provided after two year wait.

<table>
<thead>
<tr>
<th>Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td>34. Who is the head of the family?  I am</td>
</tr>
<tr>
<td>35. Does the father provide any support?  No – deceased</td>
</tr>
<tr>
<td>36. Does anyone else in the family help with the general support such as looking after the child?  Yes – uncle</td>
</tr>
<tr>
<td>37. Do you think boys and girls are treated equally at school?  Same treatment</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Human rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>38. Do you attend church and would your church support you in dealing with the school?  Seventh Day Adventist</td>
</tr>
<tr>
<td>39. Are there any support groups for families with disabled children?  Yes</td>
</tr>
<tr>
<td>40. Is there anyone to help persuade the school to admit your child?  Yes</td>
</tr>
<tr>
<td>41. Do you know what legal rights disabled and non-disabled children have to go school?  No, did not know at first.</td>
</tr>
<tr>
<td>42. Can you get any legal advice to help getting your child to school?  No</td>
</tr>
<tr>
<td>43. Does your school have a School Governing Body that includes parents?  Yes</td>
</tr>
<tr>
<td>44. If there is a School Governing Body, does it help getting your child into school?  Yes, we do</td>
</tr>
<tr>
<td>45. Would the a School Governing Body help in raising money for your child to attend school?  Yes – I also donate clothes when we have extra</td>
</tr>
<tr>
<td>46. Do your children participate in any extra mural activity at school or after school?  Yes he sings, he dances and also plays soccer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Concluding question</th>
</tr>
</thead>
<tbody>
<tr>
<td>47. What would you like to see happening to improve the situation for disabled children?  I would like them to go to mainstream school, they must have their own transport and people should learn that disabled people are a gift from God.</td>
</tr>
<tr>
<td><strong>Dwelling type</strong></td>
</tr>
<tr>
<td>-------------------</td>
</tr>
<tr>
<td>a) House of brick structure</td>
</tr>
<tr>
<td>b) Traditional dwelling or hut</td>
</tr>
<tr>
<td>c) Flat</td>
</tr>
<tr>
<td>d) Town cluster semi house</td>
</tr>
<tr>
<td>e) House flat room in backyard</td>
</tr>
<tr>
<td>f) Informal shack not in backyard</td>
</tr>
<tr>
<td>g) Room flatlet not in backyard</td>
</tr>
<tr>
<td>h) Caravan or tent</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
Appendix B — Child questionnaire

Questions for the disabled children informal interview

<table>
<thead>
<tr>
<th>Child</th>
<th>Name</th>
<th>Parent</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
</table>

**General Questions**

1. How old are you?
2. Do you go to school, if not have you ever been to school?
3. Do you have friends?
4. Do your friends go to school?
5. Why do you think people become disabled?
6. Do you have any disabled friends at school?
7. Do you think disabled people should have the same opportunities as non-disabled?
8. Do you have any disabled brothers or sisters?
9. Do you think disabled children get enough support?
10. What support do you think they should get?

**For disabled children**

1. What disability do you have?
2. How does it affect you?
3. What do you think your family members feel about your disability?
4. Do you think you are treated differently from your brothers and sisters?
5. How does that make you feel?
<table>
<thead>
<tr>
<th>Part A (not at school)</th>
<th>Part B (at school)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Why don’t you go to school?</td>
<td>1. If you do go to school, what is the name of the school?</td>
</tr>
<tr>
<td>2. What do you do instead of going to school?</td>
<td>2. What kind of school?</td>
</tr>
<tr>
<td>3. Do you want to go to school or do something else?</td>
<td>3. What grade are you in?</td>
</tr>
<tr>
<td>4. What would you like to do as an alternative to school?</td>
<td>4. What subjects do you study?</td>
</tr>
<tr>
<td>5. Have you been offered a school, and you did not want to go?</td>
<td>5. How do you get to school?</td>
</tr>
<tr>
<td>6. Have you been offered a school, and you did not want to go?</td>
<td>6. How far do you have to travel?</td>
</tr>
<tr>
<td>7. Have you been offered a school, and you did not want to go?</td>
<td>7. Do you have any problems getting to school?</td>
</tr>
<tr>
<td>8. Have you been offered a school, and you did not want to go?</td>
<td>8. What support do you get at school?</td>
</tr>
<tr>
<td>9. Have you been offered a school, and you did not want to go?</td>
<td>9. What support would you like to get?</td>
</tr>
</tbody>
</table>
Appendix C — List of Interviews

(Removed for confidentiality reasons)
Appendix D — Consent form

Hello, I am Anthony Ford-Shubrook. I am from Royal Holloway, University of London, England. I am asking people from your community to answer a few questions for my research on the access to education for disabled children at Orange Farm, which I hope will benefit your community and possibly other communities in the future.

I am an undergraduate student undertaking research for my BA Human Geography degree. I am interested in the factors that influence the access to education for children who are disabled. I am carrying out this research to find out whether disabled children go to school and why they might not go to school. The results of this study will be released in a dissertation presented to Royal Holloway, University of London. A copy may also be made available to the University of the Witwatersrand, Johannesburg and to other interested parties. No personally identifiable details will be released, and only averaged information.

I have chosen you and you household or organisation because I am interviewing a representative sample of families with disabled children and other individuals or organisations that may influence access to education for disabled children. I am doing this in different parts of Orange Farm.

Please understand that your participation is voluntary and you are not being forced to take part in this study. The choice of whether to participate or not is yours alone. However, I would really appreciate it if you do share your thoughts with me. If you choose not to take part in answering these questions you will not be affected in any way whatsoever. If you agree to participate, you may stop at any time and discontinue your participation. If you refuse to participate or withdraw at any stage, there will be no penalties and you will not be prejudiced in any way.

I will not be recording your name anywhere in the dissertation report, and no one will be able to link you to the answers you give. Only I will have access to the detailed information. All individual information will remain confidential.

The interview will last about 90 minutes. I will be asking you some questions and request that you are as open and honest as possible in answering these questions. Some questions may be of a personal and/or sensitive nature. You may choose not to answer these questions. I will also be asking some questions that you may not have thought about before, and which also involve thinking about the past or the future. I know that you cannot be absolutely certain about the answers to these questions, but I ask that you try to think about them. When it comes to answering these questions, there are no right and wrong answers. When I ask questions about the future I am NOT interested in whether you will turn out to be right, but simply in what you think.

If I ask you a question that makes you feel sad or upset, we can stop and talk about it. There may be local organisations that you can talk to about disability related matters, and I will leave you a list of these organisations so that you can speak to them if you wish.

If you have any other questions about this study, you can ask me on 082 858 3497 or you can contact my dissertation supervisor, Dr Katie Willis, by email at Katie.willis@rhul.ca.uk.

If you have a complaint about any aspect of this study you may contact my dissertation supervisor, Dr Katie Willis, by email at Katie.willis@rhul.ca.uk

Anthony Ford-Shubrook
CONSENT

I hereby agree to participate in research regarding access to education for disabled children at Orange Farm. I understand that I am participating freely and without me being forced in any way to do so. I also understand that I can stop this interview at any point should I not want to continue and that this decision will not in any way affect me negatively. The purpose of the study has been explained to me, and I understand what is expected of my participation. I understand that this is a research project whose purpose is not necessarily to benefit me personally. I have received the telephone number of a person to contact should I need to speak about any issues that may arise in this interview. I understand that this consent form will not be linked to the questionnaire, and that my answers will remain confidential.

Signature of participant ______________________  Date______________

TUMALLANO

Ke dumela ho nka karolo mo dipatlisisong tsena mabapi le ho fumana thuto ha bana bao basa itekanelang mo mmeleng mo Orange Farm. Ke a thlahohany/a/ulwisisa hore kenka karolo ke lokolohile, kwantle ha kgapeletso epe fela. Ke a thlahologanya hape/ulwisisa hape hore nka emisa ho nka karolo mo dipotsong nako enngwe le e ngwwe ha ke batla, le hore tshwetsed eeo ke e nkang ha ene e nkama ka tsela e pe fela e e fosahetseng. Lekaba le leholo la thuto ena le hlalositswe ho nna, ke a thlahologanya/ulwisisa seo se sololetswe mo go nkeng karolo haka. Ke thlahologanya/ulwisisa hape hore dipatlisiso tsa thuto ena ha se hore di tlile ho thusa nna ka sebele/ke le mongwe. Ke amohetshe dinomore tsa mohala/telephone numbers tsa motho yo nka businga le ena ha eba ho nale sengwe seo ke batlang ho se sela kapa ha e ba ho na le ho hongwe ho ho hlahellang morago ga dipotso. Ke a thlahologanya/ulwisisa hore foromo ena ya tumallano ha e keke ya kopantshe ha le dipotso tseo ke di arabileng le hore dikarabo tsa ka di tla ba khupa marama.

Signature ya motsaya/monka karolo____________________  Date ______________

Consent


Signature of participant____________________________  Date_________