SOCIAL EXCLUSION AMONG STUDENTS WITH VISUAL IMPAIRMENTS AT UKZN EDGEWOOD AND HOWARD COLLEGE CAMPUSES

BY

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DECLARATION

The Registrar (Academic)
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I, Roshanthni Subrayen, Student Number 8116135 hereby declare that

(i) Where otherwise indicated, the research indicated in this dissertation is my original work.

(ii) This dissertation/thesis has not and will not be submitted for any other degrees or examination at any other university.

(iii) Transcripts from other sources have been re-written and or where exact words have been included then these writings have been placed inside quotation marks and acknowledged.

SIGNED……………………………..

CANDIDATE………………………..

As candidate's supervisor, I have approved this dissertation/thesis for submission.

SIGNED………………………………

SUPERVISOR………………………..

DEDICATION

Thirty three years ago a girl was born and this girl is my sister, Keshni Appanah. My sister was born with a learning disability and a visual condition. These multi marginalities shattered her life into many pieces. The issue of “otherization”, powerlessness, voiceless-ness, exploitation by able bodied people, failure at school, the absence of a loving personal relationship and not having true friends undoubtedly pains every minute of her existence. Hence my journey with social exclusion and disability did not happen by accident. It is through the painful experiences contained in my sisters “dance” with social exclusion and disability that my “Personal became my Political”. (Mullaly, 1993, pp 154-156).

Keshni Appanah, just know that you are loved and are very special. This thesis is really for you!!!!!

My late father, Mr Subramoney Appanah, who always told me that Rome was not built in one night, there is a time for everything to happen. Well Dad, here I am with my lifelong dream of having a Master’s Degree in Social Work.

For my husband Siva Subrayen and most adorable sons, Jadyrien and Brenton for listening to and inspiring me as I passed through each step of this momentous research journey. Your support, guidance and belief in my academic abilities will forever be remembered and treasured. Thank you all for walking this inspirational journey with me.
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ABSTRACT

Title: Social exclusion amongst students with visual impairments at UKZN Howard College and Edgewood Campuses.

This research used a qualitative study exploring thick descriptions, inside voices and perspectives of "otherization", powerlessness and voiceless-ness resulting from social exclusionary processes perpetuated by social and university structures and poverty. Convenience sampling was used. Semi structured individual interviews and focus group discussions were used to explore the key research questions focusing on social and university challenges experienced by students with visual impairments at UKZN in their social and university environments.

The data was interpreted through The Anti Oppressive Approach (Dominelli, 2002) which gave support to understanding how continuing to ignore marginalized persons with visual impairments out of mainstream systems of development, perpetuated "othering", powerlessness and voiceless-ness. This study provided evidence of the multi dimensional and multi structural nature of the social exclusionary process with key focus on abuse of power by dominant groups (sighted persons), violation of human rights and visual impairment as confinement as experienced by students with visual impairments either in their social or university environments or both. In addition, this theory looked at the manner in which dominant or superior groups arrange resources around them to benefit them and exclude persons with disabilities. This research also gave a voice to women with visual impairments being oppressed by sighted women as well as poverty as a social exclusionary process.

Keywords: Anti Oppressive Theory, Visual Impairments, Social Exclusion

“Overlooking or ignoring the plight of disabled people is not an option that an acceptable theory of justice can have”

Amartya Sen, (2004) as cited by Albert and Hurst, (2004:4).

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CHAPTER ONE

INTRODUCTION

1. INTRODUCTION AND RATIONALE FOR THE STUDY

Globally Higher Education institutions and services for persons with disabilities align with International and National legislations to ensure that persons with disabilities are included in the mainstream of life. This ensures tolerance, equity, anti discriminatory practices, access, widened participation and retention and throughput of students with disabilities. The guidelines from The Constitution of South Africa (1996) and International, National and or Local policies embracing disability, inclusive education and human rights were used in informing this study about inclusion, equity, tolerance, respect and full participation of persons with disabilities in all avenues of life.

In South Africa, the White Paper on an Integrated National Disability Strategy (1997) advocates a paradigm shift from the medical model to a social model in approaching interventions for persons with disabilities. The Draft National Disability Policy (2007) supports the Integrated National Disability Strategy (1997) to ensure and promote the inclusion of persons with disabilities at the level of government development strategies. The White Paper on Special Needs Education (2001) advocates that educational institutions should strive to include and accommodate all learners regardless of their disabilities using the constructs of the social model of disability in promoting inclusion, equity and full participation in mainstream education. The Constitution of South Africa (1996) Chapter 2, Clause 9 guarantees equal access, full participation, overall protection and a guarantee to fundamental human rights for all. Furthermore, these declarations also speak to the right to freedom from discrimination based on disability and zero tolerance towards disability discrimination. This study aimed at exploring and understanding the gap between how the ideal and actual may be bridged

International declarations such as The World Program of Action (1982), The World Declaration for Education for All (1990), the UN Standard Rules on Equalization of Opportunities for Persons with Disabilities (1994) and the recent United Nations Convention on the Rights of Persons with Disabilities (2006) advocate societies responsibility in mainstreaming services for persons with disabilities, promoting, protecting and ensuring their full and equal participation without discrimination.

Despite International, National and Higher Education legislations on anti discriminatory practices, persons with disabilities still experience exposure to social exclusionary processes.

Therefore this study aimed to explore, understand and glean thick descriptions of how students with visual impairments at University of Kwa–Zulu Natal (UKZN) Howard College and Edgewood Campuses embraced the social exclusionary processes, despite these legislations.

Several studies have been conducted at UKZN and are discussed in the next few paragraphs. These studies covered visual impairments which focused on exploring physical and informational inaccessibility, labeling, insufficient awareness and education, inconsistencies in various faculties on the special needs and required support, insufficient technological accommodations, absence of textbooks in electronic format, negative attitudes, stereotypes and exclusion as a result of disability.

However, these studies did not focus on social exclusion amongst students with visual impairments at UKZN Howard College and Edgewood Campuses. Specifically, this study aimed to secure descriptions and explanations from students with visual impairments on their experiences of "othering", powerlessness and voiceless-ness within the family, mainstream school, the community and university. Of interest to the researcher was the notion of visual impairment and its related confinements especially in the relationship between literacy and visual impairment leading to economic exclusion and eventual poverty.

The study undertaken by Shunmugam (2002) (researcher with a visual impairment) at the UKZN Disability Support Unit at Howard College Campus revealed that students with visual impairments experienced academic barriers and limitations pertaining to information accessibility, absence of a digital library, stereotype attitudes and perceptions of disability by the wider university population. Other factors in this study referred to the absence of permanent support structures for students with visual impairments, anxiety and stress as a result of limited orientation around campus especially during their first year of study. Social exclusion as a concern was not explored in this study.

In another study by Padayachee/Naidoo (2005) the academic needs of students with visual impairments at UKZN Westville Campus were found to remain largely unmet, with recommendations for improving the provision of reading lists and modules in advance, enlisting the assistance of readers, note takers or tutors to assist students with visual impairments, information being in appropriate formats (large print, Braille, electronic), reserving front row seats for students with low vision and adjusting teaching strategies to include students with visual impairments. Again, the focus was on academic adjustment and performance of students with visual impairments from UKZN Westville Campus, rather than on social exclusionary processes experienced by these students.

Futshane (2009) also studied students with disabilities, at UKZN Howard College but this researcher focused on students with disabilities and employment and not on the social exclusionary processes per se.

The afore-mentioned studies conducted at UKZN are clearly limited in the specific area of social exclusion of students with visual impairments, a gap that is addressed in the present study.

Studies at other institutions of higher learning also saw a limited focus on social exclusion. A study undertaken by Matshedisha (2007) at the University of Witwaterstrand on the rights of students with disabilities in South Africa argued that students with disabilities experienced challenges with regards to access to Higher Education. This research confirmed that persons with disabilities experienced exclusion at all levels of education. Furthermore, Matshedisha (2007) contended that marginalization of persons with disabilities resulted from the process of societal stereotyping. This study also found that management did not adequately plan, implement and enforce policy for disability support services. Although the study focused on exclusion, it did not fully address the inside perspectives relevant to emotions, feelings and experiences of students with visual impairments in respect of the exclusionary practices they encountered in their social and university environments.

The present study aimed at increasing awareness of how students with visual impairments experienced social exclusion in the family, mainstream school, the community and the university and the manner in which “otherization”, powerlessness, voiceless-ness and poverty impacted on participants living and learning spaces.

Furthermore, the researchers interest in the topic arose as a result of engagement and interaction with students with visual impairments both at the Non Governmental Disability Sector and UKZN Edgewood and Howard College Campuses Disability Support Units. The researchers previous and present experience with visual impairments highlighted the manner in which persons with visual impairments became sidelined and deprived of opportunities of contributing to and making decisions for themselves with their families, in their communities and at university. The researcher became aware of the inside voices, emotions, feelings, challenges and shortcomings that students with visual impairments faced in social exclusionary processes imposed by dominant groups both in their social and university environments, which was the focus of this study.

In addition, this study realized that persons with visual impairments just did not see their oppression as a result of their disability. They appeared to be content as long as their basic needs were met i.e. food, receipt of disability grants, medication, shelter, water and sanitation. Other lived experiences were clearly also compromised such as their social lives, relationships with their families, relationships with sighted students, economic inclusion and residence life experiences, discussed in this study.

1.2. RESEARCH OBJECTIVES

The overall aim of this study was to explore social exclusion as experienced by students with visual impairments at UKZN.

The objectives pertinent to this aim were:

1.2.1. To explore challenges or barriers related to social exclusion in their social environment, external of the university.

1.2.2. To explore challenges or barriers related to social exclusion in their university environment.

1.2.3. To explore recommendations made by students with visual impairment in addressing social exclusion.

1.3. RESEARCH QUESTIONS

This research study aimed to answer the following questions:

3.1. What challenges or barriers related to social exclusion are experienced by students with visual impairments in their social environment, external of the university?

3.2. What challenges or barriers related to social exclusion are experienced by students with visual impairments in their university environment?

3.3. What recommendations are suggested by students in addressing and overcoming these challenges?

1.4. THEORETICAL FRAMEWORK: ANTI OPPRESSIVE THEORY

This study was guided by the Anti Oppressive Theory, which referred to disability as being one of the social divisions that experiences domination or impositions from superior groups. These superior groups suppress the voices and feelings of persons with disabilities which is a basic tenet of Anti Oppressive Theory.

Therefore this theory is relevant to this study as it addressed the oppression of students with visual impairments by hearing their voices, emotions and inside perspectives relevant to the social exclusionary processes. The phenomenon of social exclusion was also studied as abuse of power by dominant groups, the manner in which it violates human rights as well as how visual impairments created confinement.

According to the Shorter Oxford English Dictionary (1967: 1376), as cited by Dominelli (2002:7), oppression means “the exercise of power in a tyrannical manner, the cruel treatment of subjects, inferiority of sub-ordinate groups and the imposition of unjust burdens”. Dominelli (2002) recorded that oppressive relationships emerge, when strategic leadership does not account for the inclusion of certain social divisions e.g. race, gender, class, age, disability and sexual orientation, when apportioning power and resources. This unequal division creates a sense of exclusion from these power and resource based activities. Oppression compartmentalizes people into categories of domination or superiority that ignore the values, attributes and contributions of persons from the mentioned social divisions. This aspect is applicable to the present study which viewed the experience of social exclusion as imposed onto persons with visual impairments who are viewed as being different to the acceptable or dominant group. In the case of this study sighted persons being the dominant or acceptable group and the visually impaired community as the inferior or subordinate group.

In support of the above, Hughes (1999), as cited by Shera (2003) argue that social work practices view people as being equal and entitled to the same rights as all other individuals and hence there is need to accept and treat all social divisions no differently from the dominant cultural group. The Anti Oppressive Theory thus informs social work ideals. Social work acknowledges and accepts persons with disabilities as having different abilities and who must be included and respected for equal participation. According to Hughes and Paterson, (1997) as cited by Shera (2003), whilst goals and values remain unchanged in comparison to able bodied persons, a proactive response is required on the issue of eradicating oppression and discrimination against people with disabilities, this being the key motivation for the present study and in accord with Anti Oppressive Practices in social work.

Aside from this, one has to recognize that oppression can be a very painful process for both the oppressed and those opposing oppression. According to Dominelli (2002) oppression manifests itself in relationships with people in their actions and behavior towards others.

Some of the aspects addressed in this study identified challenges that students with visual impairments experienced in forming and maintaining relationships both socially and at university as a result of being oppressed, opposing oppression and accepting oppression.

Scholars such as Raniga and Kasiram (2010) support the above arguments by stating that Anti Oppressive Practices should challenge power structures, cultures and the economy. Amongst others, this study also aimed at understanding learning and living structures and economic disadvantage that contributed to social exclusion, with a view to recommending how these may be addressed for optimal social inclusion of students with visual impairments.

In accordance with Anti Oppressive Practices, people with disabilities worldwide are championing for their identities to be fully accepted in society, as people that can make meaningful contributions and a difference in society. This study provided evidence of how students with visual impairments are presently engaged in struggles to be viewed as equal partners in mainstream society. Wendall (1996) as cited by Dominelli (2002:48) allude to the “idealized perfect image” where able bodied people organize social relations and physical resources that prevent accessibility and integration by persons with disabilities. Oliver, (1991) as cited by Dominelli (2002) claim that societies perception of disability is responsible for turning disabilities into handicaps instead of treating these as factors to be taken on board in facilitating a future for persons with disabilities. The present study focused on challenges that students with visual impairments experienced in forming social relationships with able bodied persons which compromised their functioning on several fronts.

The mindset of persons with disabilities as being passive, dependant, disempowered and defective as seen by dominant groups set the pace for these dominant groups to be the order of the day. In Anti Oppressive Practices, Dominelli (2002:98) argues that this thinking is prevalent in societies perception of people with disabilities, as people who are incapable of making decisions and off course as people who need help from welfare authorities. Persons with disabilities are seen as people who cannot have control over their lives for improving the quality of their lives. This perception of disability, positions persons with disabilities apart from the dominant group, rather than dominant groups engaging and facilitating empowerment and capacity building with persons with disabilities. Hence this theoretical framework is useful, as it encapsulated the effect of impositions by dominant groups i.e. sighted persons on students with visual impairments at UKZN Howard College and Edgewood Campuses. Further, this study aimed to explore what participants endured as a result of their visual impairment, and how this experience curtailed their social and academic functioning.

In discussing Anti Oppressive Practices, Thompson (2001) proposed the PCS analysis (Personal, Cultural and Structural aspects of everyday life) which provides a framework to understand the effects of social divisions, the inequalities and power differences, oppression (hardship and injustices) and discrimination. Thompson (2001) argues that this is brought about by the dominance of one group over another which translates to the domination or oppression by non disabled persons over persons with disabilities. Contained in the discussion of Anti Oppressive Practices, is the understanding of marginalization of persons with disabilities regarding relationships on personal, family, community, organizational and structural levels. A key feature of this study related to challenges experienced by students with visual impairments regarding their social and university relationships. In relation to this, Clifford (1995) formulated anti oppressive principles to empower and build the capacities of identified groupings. These principles included linking personal and political biographies within a wider social context. In the present study the researcher attempted to understand the relationships that students with visual impairments shared with others outside of their immediate social circle, such as with their extended families, educators, community and with sighted students and academics at university whilst giving attention to contextual realities such as poverty, male hegemonic relationships and the oppression of women with visual impairments by sighted women.

Power as a social concept was used to explore the public and private spheres of a persons life that operates on a personal and structural level (Clifford 1995).

In relation to this, the study explored social exclusion and power imbalances as experienced in the family, the community and in living and learning experiences at mainstream school and university.

One of the fundamental principles underlying Anti Oppressive Practices according to Burke and Harrison (2005) is the act of challenging inequalities to create change and transformation at micro and macro levels. These challenges are painful for the group being challenged or the group that is challenging. The present study examined these different levels of challenges in accordance with Anti Oppressive Theory.

Attitudes of power are evident when responding to the needs of persons with disabilities, who are viewed as being dependant on able bodied persons. This disempowerment illustrates power relations. Persons with disabilities have resisted and challenged dependency by dominant discourses as outlined in the medical model of intervention. They experienced exclusion from matters that have had a direct impact on their lives viz. social, educational, political and economic resources as well as from defining or having a voice on what these resources should be like and how they could access these resources. These processes were seen to marginalize persons with disabilities who were seen as powerless and voiceless. This provided a view of intolerance rather than one of accepting them as equal participants or citizens in society, a voice that was explored in this study.

For the purpose of gaining a broadened understanding of Anti Oppressive Practices, the researcher positioned social exclusion, the act of “othering”, powerlessness and voiceless-ness and identity formation as exclusionary processes so as to effect a widened understanding of the inside perspectives, feelings and emotions that students with visual impairments have endured in the social exclusionary processes.

1.4.1. Social Exclusion

In this section, key aspects relevant to the topic were explored to offer a context to the study.

In using the Anti Oppressive Framework, the study researched social exclusion by hearing the voices and inside perspectives of students with visual impairments at UKZN Howard College and Edgewood Campuses.

Narayan, Patel, Schafft, Rademacher and Koch-Schulte (2000) and Klasen (1996) as cited by Shera (2003) all agree that ideologies of dominant groups creates oppression, rejection, inequality and marginalization, because persons with disabilities are not in a position to conform or are unwilling to conform and as a result cannot belong to or identify with the dominant group. These scholars further report that social exclusion focuses on difficulties, disadvantages, challenges and barriers experienced by certain groups, which prevent them from being engaged in equal and meaningful participation in the social, economic, cultural and political life of societies. This marginalization by dominant groups exacerbates oppression, rejection and inequality of persons with disabilities. Adams (1999) in Shera (2003) in fact state that, marginalized persons accept and exceed to the ideologies imposed by dominant groups and that these subordinate or marginalized groups accept the rules of dominant groups. This concern is explored in the present study, by using both individual and focus group discussions.

1.4.2. “Othering” as an Exclusionary Process

Exclusion is deeply entrenched in the “othering” process which speak to the “them-us” division or dyad. According to Dominelli (2002:44), the “othering” process categorizes persons as being ‘insiders” that is, those that are included as a result of their privileged status and “outsiders” that is those that are excluded or disadvantaged as a result denied of their personhood. According to Memmi (1965) as cited by Dominelli (2002) and Clapton and Fitzgerald (1996), these “outsiders” are subjected to violence, isolation, abuse and other atrocities. The “othering” process focuses on the “outsider” feeling excluded from the key elements of social life. It must however be noted that according to Dominelli (2002:46) the “othering” process is multidimensional and that any person from a social division can be “othered” simultaneously.

According to Clapton and Fitzgerald (1996) our body structures define who we are and our acceptance or non acceptance within societal structures. Certain bodies fall within the norm whilst others fall outside of or vary from the norm which is referred to as the “other”. In relation to “othering”, this study focused on participants inside perspectives about “othering”, so that and no matter what they achieve, society connects or defines them as being the outsider belonging to an inferior group.

1.4.3. Identity Formation and Exclusionary Processes

According to Dominelli (2002:47) “exclusionary processes and oppressive dynamics are linked to identity formation in all its complexities”. An oppressed persons worldview of herself is reactionary to the situation. Hence, this study is relevant in that it addressed the manner in which students with visual impairments are responded to by sighted persons in the creation of their identities. Persons with disabilities are presently engaged in struggles for their identities as equal partners to be accepted for participation in the mainstream of society for e.g. persons with disabilities challenge their exclusion and celebrate their identities through the International Day for Persons with Disabilities, The Employment Equity (1998) Act No 55, The UN Convention for the Rights of Persons with Disabilities (2006) and The Disability Rights Charter of South Africa (1991).

In relation to the Social Model of Disability and Higher Education structures via the throughput level (graduation outcomes) of students with disabilities Honorary Graduate Reverend Jesse Jackson called on graduates and academics to promote social and economic equality and address challenges that impact on growth and expansion for all (Graduates Urged to Use Skills to Promote Equality, 2010).

Young (2003), Shucksmith (2001), Dominelli (2002) and Shera (2003) agree that social exclusion is multidimensional in that it involves several factors that connect with and reinforce each other e.g. economic social exclusion, political social exclusion, spatial social exclusion, lack of access to the environment and information, limited access to medical provisions and housing and subjective social exclusion which penetrates culture and psyche that divides the individual from others and within one's self. Similarly, the UK policy debates as reported by Shucksmith (2001), discuss social exclusion three-dimensionally referring to:

1. Employment being viewed as the primary integrating force related to earned income, identity and a sense of self worth.
2. The causes of social exclusion being related to low income and the absence of or limited material resource.
3. The excluded being viewed as deviant from the moral and cultural norms of society and who display show and display a culture of poverty and dependency. They are also blamed for their own state of poverty.

Young (2003) also discuss social exclusion in relation to blaming the oppressed person for lack of motivation, having jobs that promote social isolation and active rejection.

1.5. VISUAL IMPAIRMENT IN THE CONTEXT OF SOCIAL EXCLUSION

Many people are either partially or totally blind. This vision loss may result from a wide range of natural or man made factors. Common eye diseases refer to trachoma, river blindness, cataracts, low vision, vision loss as a result of HIV and AIDS, retinitis pigmentosa, glaucoma, age related macular degeneration and diabetic retinopathy.

According to Belay (2005), The International Eye Foundation based in the United States of America, reported that globally there are currently 45 million persons with visual impairments and that every five seconds, at least one person in the world sustains visual impairment.

Having a visual impairment is a destructive blow to both the self image and the persons existence. At present persons with visual impairments are not only victims of their physical circumstances but also objects of both deliberate and inadvertent discrimination as discussed earlier. This study explored such hardships by participants.

In understanding visual impairments, the researcher used the following operational definitions applicable to this study.

Willison (2005) defines visual impairments to mean when glasses, lenses or other low vision aids does not assist to facilitate normal near vision. The term partially sighted is inclusive of the term blind which refers to a high degree of vision loss. As cited by Padayachee/Naidoo (2005:9), "visual impairments refer to a general term which covers a range of visual difficulties which includes blindness, legal blindness, partial vision, low vision and cortically impaired vision."
(www.bced.gov.bc.ca/specialed/ppandg/planning 10.htm.)

1.5.1. Definitions

Blindness

According to Fema (1999), there are many causes of blindness and visual impairments which include traumatic eye injuries, pathogenic infections and complications arising from progressive illnesses.

Legal blindness

As cited in Fema (1999:9), the term legal blindness refers to "the loss of visual acuity that prevents an individual from performing work that requires eyesight. In the United States of America, this is defined as corrected visual acuity of 20/200 or less, or a visual field of 20 degrees or less in the better eye". Persons with legal blindness have not lost their sight completely but have lost an adequate amount of vision and hence would be required to stand 20 feet from an object to have a good look at the object. Persons with normal vision could stand 200 feet away to view the object well.

Low Vision

Some visual impairment can be corrected with medication, surgery or glasses in an effort to restore normal vision. Other visual impairments persist due to permanent dysfunctions of certain structures of the eye. When all corrective measures have been found to be futile, then the remaining vision is termed low vision. Low vision can promote levels of dependence. (Help for People with Low Vision, South African National Council for Blind, Information Leaflet, Undated).

1.5.2. Some Types of Visual Impairments

Cataracts

A cataract is a gradual clouding of the eye lens, as supported by Fema (1999). This leads to blurred or dull vision. According to statistics from the World Health Organization, (Resnikoff, Pascolini, Etya, Kacur, Pararajasegaram, Pokharel & Mariotti 2004), as cited in Fight for your Sight, South African National Council for the Blind information pamphlet, cataract accounts for 39.1% of global blindness, making it the largest cause of blindness worldwide.

Refractive Errors

The irregular shape of the eye leads to the way light is focused in the eye, hence the term refractive errors. Myopia/near sightedness i.e. good close up vision and blurred distant vision and hyperopia/far sightedness i.e. blurred close vision and good distant vision and astigmatism i.e. the blurring of vision at close or distant range, are three types of refractive errors. As cited in Fight for your Sight, an information brochure developed by the South African National Council for the Blind (Resnikoff et al, 2004) argue that failure to correct refractive errors account for 18.2% of global blindness, which makes refractive errors the second largest cause of blindness in the world.

Glaucoma

This condition results from an increased pressure in the eye, which can damage the eye optic nerve and cause loss of vision and blindness. Glaucoma is a treatable condition and is the third largest cause of blindness worldwide (10, 1%) (Resnikoff et al, 2004).

Age-Related Macular Degeneration

This condition refers to a degenerative retinal condition affecting the macula, which is a small spot in the central area of the retina located at the back of the eye, resulting in progressive loss of central vision.

Resnikoff et al, (2004), as cited in the South African National Council for the Blind information brochure indicate that age related macular degeneration accounts for the fourth largest cause of world blindness (7.1%).

Diabetic Retinopathy

According to Resnikoff et al, (2004), as cited in Fight for your Sight, South African National Council for the Blind, information leaflet indicates that diabetic retinopathy is a condition associated with diabetes and persons with diabetes are at risk of developing diabetic retinopathy which is referred to as the disease of the blood vessels in the retina of the eye, which weakens, breaks down or becomes blocked.

Albinism

This is an inherited condition that results from a person not being in a position to produce normal coloring of the skin, hair and eyes (lack of pigment). This condition can be limited to the eye or may affect both the skin and eyes. (Albinism- A Manageable Condition, National Department of Health, Undated).

1.6. RESEARCH METHODOLOGY

The research methodology is summarized here to understand the research approach at the outset, but is explained in detail in chapter three.

This study was located within a qualitative framework which explored and promoted a guided understanding of social exclusionary processes as experienced by students with visual impairments in their social and university environments.

An exploratory design was used, this being relatively unchartered research territory. This enabled the researcher to gather as much information as possible pertaining to social exclusion among students with visual impairments from UKZN Howard College and Edgewood Campuses.

Semi structured individual interviews and focus group discussions were used to gain thick descriptions on how participants experienced the social exclusionary process. Individual interviews were first held followed by focus group discussions. Two focus group discussions were undertaken with one group from UKZN Howard College and the other from Edgewood Campus.

The target sample was 15 students with visual impairments with 10 students from UKZN Howard College and 5 students from Edgewood Campus for the individual interviews. Five participants from UKZN Howard College and 4 participants from UKZN Edgewood Campus participated in the focus group discussions.

The researcher obtained the written informed consent of all participants which was made available in Braille and large print.

1.7. SIGNIFICANCE OF THE STUDY

The knowledge gained from this study has value in that it provided an understanding of the painful experiences that students with visual impairments experienced in fostering inclusion within their families, mainstream schools, communities and in their living and learning spaces at university. With this understanding, services and policies to address the challenges of these students may be possible both at UKZN and other institutions of Higher Education.

Furthermore, the findings of this study will inform the South African National Council for the Blind, The World Blind Union and structures for and of persons with visual impairments about social exclusion as a form of oppression experienced by students with visual impairments at UKZN Howard College and Edgewood Campuses.

1.8. CONCLUSION

Persons with visual impairments experience hardships and sufferings as a result of their circumstances due to their disability. In addition they also become victims or objects of both deliberate and inadvertent discrimination as a result of the inferior status imposed upon them by non disabled persons or dominant groups which is highlighted in this theoretical framework. As a result of this in the course of their daily lives they become “othered”, marginalized, powerless, and voiceless and are seen as inferior. They are excluded from the way social relationships and resources are organized by dominant or superior groups. This study aimed to explore and hear the inside voices of such hardships and sufferings as perpetuated by social exclusionary processes.

The literature review in the chapter to follow highlights disability, human rights and inclusive education policies. Models of disability have also been captured in a way that demonstrates the ineffectiveness of the medical model of disability in emancipating and liberating persons with disabilities.

According to Dominelli (2002), Anti Oppressive Practices aim at creating meaningful social relations for marginalized and excluded people within a social justice and human rights framework.

To this effect the researcher acknowledges that Anti Oppressive Practices embrace holistic interventions by taking cognizance of the oppressed persons social and university context. Hence this study is relevant as it provides an inside perspective of participants oppression as experienced in their social and university environments.

CHAPTER TWO

LITERATURE REVIEW

“MY GREAT DANCE”

I am 30 years old
In social circles, my mother always aggressively said to me: “look upwards do not let people know that you are blind”,
If I did not pretend to be sighted, I was left behind all alone, abused, powerless, voiceless and “othered”.
As if I did not have enough to contend with!!!
Being all alone,
The absence of Ubuntu,
All alone with torn, unmatched clothing, dresses with holes large enough to view “my dance”
My great dance!!!!!!!!
Blindness “waltzing” merrily with poverty!!!!!
Life revolved around crying, silence, isolation, hunger, shame and humiliation
Just because I am blind, black, poor and powerless
Such is my dance, with no beginning and no end.

BY

ROSHANTHNI SUBRAYEN

“My Great Dance” is a poem written by the researcher to bring out the voice of the multi marginalities endured by females with visual impairments. In this, the researcher highlights the multi marginalities experienced simultaneously as postulated by Dominelli (2002), Shera (2002), Shucksmith (2001) and Young (2003), and to create “My Great Dance” which is understood in the following themes that were included in the literature review and the analysis in this chapter:

1. Sighted women oppressing women with visual impairments.
2. Powerlessness, voiceless-ness and “othering”.
3. Marginalization and discrimination as a result of poverty and visual impairment.
4. Painful experiences of loneliness, shame and humiliation.

5. Social exclusion being multidimensional.
6. “Othering” occurring simultaneously.

2. INTRODUCTION

The readings on social exclusion and visual impairments reflected one of the greatest challenges of modern life in many nations as the struggle against human rights violation and the oppression of persons with visual impairments. To counteract this struggle against oppression, clear mandates have been instituted by way of International, National and Local Declarations to facilitate the inclusion, emancipation and liberation of persons with disabilities into the mainstream of life. In spite of these anti oppressive instruments it is clear that organizational, societal and attitudinal barriers still exist in challenging anti oppressive, emancipatory, social justice and human rights work of and for the oppressed minorities. This is in agreement with one of the findings by Alcock (1999) as cited by Graham, Selipsky, Moodley, Maina and Rowland (2010) that the full inclusion and participation by persons with disabilities is still lacking and that this exclusion and marginalization widened access and participation for able bodied persons.

To further emphasize Anti Oppressive Practices, paradigm shifts in disability thinking became evident which saw the transformation of discourses from the medical to the social model of disability as discussed in this chapter.

In keeping with this, the researcher draws the attention of the reader to a critical analysis of a body of literature that explored issues that precipitated or contributed to keeping alive a complex web of multi marginalities which exacerbated social exclusionary processes among persons with visual impairments which became a life long reality.

Worthy of mention is a body of literature which engages with narratives from authors who are either blind or partially sighted Castellano (2011), Gilson (2006), Graham et al (2010) of whom Dr William Rowland is blind and Van Meygaarden (2005). These authors offer an inside perspective into debates around visual impairments, social exclusion and poverty.

Furthermore, this chapter encapsulated many innovative problem solving strategies which, if implemented aggressively can reduce the sufferings and oppression experienced by students with visual impairments both in their social and university environments.

2.1. LEGISLATIVE FRAMEWORK

International, national and domestic legislations provide a context for disability which serves to support and transform structures in society for the purpose of facilitating equity, access, success and retention and throughput, thereby promoting Anti Oppressive Practices. In support of this the key legislations mentioned hereunder play a pivotal role in promoting inclusion, non discrimination and equal opportunities relevant to persons with disabilities.

However, despite these legislative frameworks the inclusion, participation and access of persons with disabilities are affected by a wide range of historical, individual, social, educational and environmental factors that:

- Promote exclusion.
- Challenge personal life circumstances within their social networks with sighted persons.
- Create double, triple and overlapping marginalities all enjoying a simultaneous relationship e.g. living and learning experiences, poverty, females with disabilities and male hegemonic relationships, sexual exploitation and denial of participation by dominant structures.

Legislations of a general nature on disability are first presented followed by specific legislations on disability pertaining to Higher Education.

2.1.1. International Legislations

The United Nations Convention on the Rights of People with Disabilities (2006), Article 4 (1), The Vienna Declaration (1993) as cited in the Project Child Report (2010), Article 22 and the United Nations Convention on Human Rights (1948) all allude to the protection of people from unfair discrimination, promotion of the standard rules on the equalization of opportunities, equal enjoyment of all human rights, active and widened participation for the promotion of social progress and improved quality of life (United Nations Convention on the Rights of Persons with Disabilities, 2006; Project Child Report, 2010; Universal Declaration of Human Rights, 1948).

2.1.2. National Legislations

The Constitution of South Africa (1996) Act No. 108 addresses issues of equality and explicitly point out that discrimination against people with disabilities will not be tolerated. As evident in Chapter 2, Clause 9 of the South African Constitution (1996), there is a guarantee to equal access, full participation, overall protection and promotion of fundamental human rights for all. This study seeks to understand how this gap between the ideal in legislations and the actual may be bridged.

2.1.3. Other Legislations

Furthermore, The White Paper on an Integrated National Disability Strategy (1997), The White Paper on Special Needs Education (2001) and the Draft National Disability Policy (2007) all attend to the paradigm shift in disability discourses from a medical to a social model of disability. The social model speaks to human rights and equitable opportunities for access, inclusion and participation. A further emphasis is on public education and awareness raising, aimed at changing fundamental prejudices about disability in South African society.

2.1.4. Local Policies

The First Draft of the Disability Policy of the Hibiscus Coast Municipality (2009) recognized that disability be viewed from a human rights and developmental perspective which drew on Constitutional parameters. It is also an imperative that local disability policies be developed together with persons with disabilities thus keeping in line with the international slogan of disability - “Nothing about us without us” (Yeo and Moore, 2003:571). This, in the work of International Disabled Peoples Movement, means consultation and uninterrupted engagement with persons with disabilities from Government, The Private Sector, Disabled Peoples Organizations, International Organizations and Non Governmental Organizations (Yeo and Moore, 2003).

These policies refer to the empowerment, emancipation and liberation of persons with disabilities as crucial to achieve freedom from oppression, equal rights and self representation.

2.1.5. International Higher Education Declarations

World Declaration on Higher Education (1998)

Aside from the relevance of Article 26.1, of the United Nations Universal Declaration of Human Rights (1948), The World Declaration on Higher Education (1998) speak to the right to education and equal access to Higher Education. The World Declaration on Higher Education (1998) also supports this view that as a consequence, no discrimination can be accepted in granting access to Higher Education on the grounds of race, gender, language, religion or economic, cultural or social distinction or physical disability.

The Dar Es Salaam Declaration on Academic Freedom and Social Responsibility of Academics (1990*)* calls for equal access, participation and a right to wholesome education to enhance the full development of human potential. Affirmative action policies shall be instituted to redress historical and contemporary inequalities in relation to disabilities.

Furthermore, in Ontario, Higher Education Institutions embrace the Ontario Human Rights Code (2008) which speaks to anti discriminatory practices relating to the equal rights and opportunities and the dignity and worth of every person so that people can fully contribute to the development and well being of Ontario citizens.

2.1.6. Local Higher Education Disability Policy

The UKZN Disability Policy for Staff and Students (2004) recognized a set of objectives that focused on the realization of individual capabilities, full participation, accessible and safe environments, reasonable accommodation, access to curriculum and other activities, equitable representation for persons with disabilities, non discrimination and removing attitudinal and artificial barriers.

The researcher is of the opinion that all of these legislations and policies have brought global recognition to equal access, inclusivity, non discrimination, tolerance for diversity and equalization of opportunities in all aspects of the lives of persons with visual impairments. Furthermore, these legislations and policies have assisted to transform discourses on disability issues in an effort to emancipate and liberate persons with disabilities. This is worthy of mention and celebration!

However in spite of this, persons with disabilities are still excluded and marginalized in most facets of life's activities e.g. employment, education, social and personal relationships. By focusing on their real challenges and by working together in a way that embraces life long action through the principles of social work, specialized social work services, community family therapy and the Ubuntu Philosophy, we will be in a position to counteract oppressive experiences and replace this by anti oppression, liberation and full integration now and in the future. This requires considerable energy but is necessary in increasing opportunities for persons with disabilities to be recognized as productive and equal members of society. In this way dominant structures will be forced to embrace and engage with inclusion, access, participation and non discrimination.

In the following section, the researcher discusses literature on the models of disability which appear to directly affect policy and legislation formulation.

2.2. MODELS OF DISABILITY

It is evident that the mentioned legislations are drawn from discourses contained in the social model of disability which speaks to anti oppressive practices, emancipation and liberation of persons with disabilities. As a result definitions of disability have come to be shaped by the disability rights movements, which led to a greater understanding of disabilities and the ways in which people living with disabilities are marginalized and disenfranchised.

The impact of the medical model has posed a major challenge. This is supported by Graham et al (2010) who state that through advocacy it became clear that the medical perspectives of disability were inadequate in emancipating and liberating persons with disabilities. In addition the medical model did not give due recognition to discrimination and social exclusion that was seen to encapsulate negative social attitudes and cultural assumptions, environmental barriers, laws, structures and services, which resulted in economic, educational and social exclusion as is relevant to the theoretical framework. Rather, the medical model of disability outlines discourses on physical or mental deficit and or abnormality.

Furthermore, discourses on the medical model created spaces for "othering", powerlessness and voiceless-ness which appeared to contradict emancipation, empowerment, liberation and anti oppression.

It is safe to say then that the social model of disability which is discussed hereunder seeks to address anti oppressive, emancipatory, social justice and human rights practices. According to Patel (2005) as cited by Graham et al (2010) and Matshedisha (2007) the social model of disability addresses capabilities, the person's ability to make informed decisions that reflect their wants and needs, the development of people with disabilities and the transformation or re-positioning of societies attitudes to facilitate and maintain a livelihood based on human rights. Furthermore the researcher provided the opinion that the social model of disability shows zero tolerance for "othering", powerlessness and voiceless-ness.

Scholars such as Dominelli (2002), Matshedisha (2007), Padayachee/Naidoo (2005) and Willison (2005) all agree that the Social Model of Disability views disability as a result of barriers (social and attitudinal), challenges, disabling organizations, disabling environments and limitations imposed upon the person with a disability, preventing equal participation and integration in society.

The paradigm shift from the medical model to the social model of disability forms the cornerstone of present disability thinking which is discussed in this chapter.

2.2.1. The Medical Model of Disability

The issue of dependency, as a result of professionals working in institutions for persons with disabilities, is very often a challenge for persons with disabilities, and hence the term medical model of intervention. The researcher believes this to be a very disempowering concept for disabilities. It is here that decisions are made by the dominant group in the absence of persons with disabilities about programs or services required for their development. With reference to this, Oliver (1990), as cited by Dominelli (2002:99) argues that the medical model allows "professionals to make decisions for persons with disabilities, rather than making decisions with them" resulting in marginalization and denial of their basic rights and hence experience exclusion.

This is seen as going against the International slogan of disability, “Nothing about us without us” which encapsulates uninterrupted engagement and representation of persons with disabilities.

According to Dominelli (2002), these dominant groups otherwise known as the “insiders” are groups of persons who have characteristics that are seen as superior, dominant and normal. These traits are viewed as acceptable and worthy of emulation and praise and these dominant groups are not socially excluded nor isolated. Evidence of this dominance is to be found in the White Paper on Integrated National Disability Strategy (1997) which refers to the medical model of disability in terms of able bodied persons, at organizational or institutional levels providing and making decisions for people with disabilities. This suggests that the dependency created by the medical model disempowers and excludes persons with disabilities from full participation regarding their social, political and economic rights. Schneider (2006) cited by Graham et al (2010) noted that disability is related to constraining physical functioning that may often be the result of underlying medical conditions. Schneider (2006) further contended that one of the key problems with the medical model is that it stops at only assessing the medical condition or physical challenge without taking into account the social perspective of disability.

Willison (2005) in discussing disability issues in Higher Education with special reference to the University of Nottingham, agreed with Dominelli (2002) stating that the medical model sees persons with disabilities as being ill or sick. The overemphasis on medical conditions created scenarios of weakness and dependency and blamed the person with a disability for not being in a position to fully integrate in society, but no blame was placed on society for not accommodating or excluding persons with disabilities.

The present research gives a voice to students with visual impairments to address their marginalization/exclusion that is exacerbated by the medical model of intervention.

2.2.2. The Social Model of Disability

Literature on disability led to the conclusion that disability is a human rights and social justice issue as the social construction of disability prevented persons with disabilities from achieving equality and justice (Albert and Hurst, 2004). A further conclusion was that disability is a form of oppression on par with racism and sexism as described by the British Disabled Peoples Movement more commonly known as the Union of the Physically Impaired Against Segregation (Barnes and Sheldon, 2007). This movement contends that disability denoted the curtailing of activity caused by society's inability to include persons with disabilities in the mainstream of social activities (Barnes and Sheldon, 2007). The researcher agreed with this statement, as the work of disability movements positions itself in the social model of disability where persons with disabilities are disabled by a social system which excludes their participation. Hence disability is not an outcome of the body but of the way in which society organized itself, hence the social model addressed challenges experienced as a result of disability, oppression and exclusion. Alluding to this Howell and Lazarus (2003) and Hughes and Paterson (1997) refer to persons with disabilities as persons experiencing difficulties in attaining freedom from their oppressors.

With reference to inclusion of students with disabilities at Higher Education level, Howell and Lazarus (2003) indicated the need to transform the Higher Education system to accommodate a larger and more diverse student population. This included the systems capacity to respond to a greater diversity of learning needs, where learning needs refer to what each learner requires to participate effectively within the process of teaching and learning and thus have access to the process of knowledge production within the institution. The researcher believes that this may only be achieved through changes in the physical environment and paradigm shifts in the social construction of disability. According to Healey, Jenkins and Roberts (2001) if this is not addressed, disability will continue to be oppressive instead of placing value on diversity.

In addition, the social model of disability provides us with ammunition not only to challenge the discrimination and prejudice persons with disabilities face, but also to articulate the personal and painful experience of impairment. Recognition of difference is therefore a key part of the assertion of our common humanity and of ethics of care required to promote our human rights work.

McMain (2002) cited by Graham et al (2010) in their study of poverty and disability in Johannesburg found that social exclusion, marginalization and an attitude of pity towards people living with a disability still seemed to be prevalent. Graham et al (2010) further reported that the Constitutional Review Committee and the South African Human Rights Commission (2006) flagged intolerance, lack of awareness and knowledge about different disabilities, an inadequate rights based culture, non acceptance and invisibility of persons with disabilities, negative stigmas as enhancing the process of social exclusion and oppression. In not accommodating the social model of disability thinking the following factors exacerbated the social exclusionary process.

2.3. CONCERNS RELATED TO SOCIAL EXCLUSION

According to the Department of Social Development (2009) cited by Graham et al (2010) despite governments initiatives in transforming legislations and implementing structures the majority of people with disabilities still experience restrictions that marginalize and exclude them from society. These restrictive environments and challenges further exacerbated the social exclusionary process and are discussed hereunder.

2.3.1. The Personal Experience of Visual Impairment

Social exclusion attempts to make sense of multiple deprivations and inequalities experienced by people with disabilities. These multiple deprivations reinforce reduced participation, consumption, mobility, access and integration. According to Van Meygaarden (2005) the experiences of persons who are blind/visually impaired, are under explored and seldom heard as these persons are viewed as being incompetent, dysfunctional, inadequate, dependent and different and that the only attention persons with visual impairments attract from society is one of social stigma and stereotypes which reflects the personal reality of being visually impaired.

Reinhardt (2001) as cited by Van Meygaarden (2005) states that a newly blinded person may experience feelings of grief and despair over the loss of visual function, depression, excessive dependence, loss of self esteem, insecurity in new situations, the need for human contact and interaction, a marked loss of autonomy, and perhaps guilt for being a burden to family and friends.

Van Meygaarden (2005) also outlined the responses of persons with visual impairments such as blindness making certain tasks more difficult, depression, decreased morale, lowered self esteem, feelings of excessive dependence and non acceptance of support if he/she felt that he/she cannot reciprocate. To explain this further a person who is visually impaired who receives increased instrumental support, but who cannot provide the same instrumental support to others may instead offer emotional support as a means of returning the favour (George, 1986 as cited by Van

Meygaarden 2005). This difference in support may not always be appreciated and may constitute a source of stress for the person with a visual impairment.
Goldin (1984) adds that visual impairment is perceived as an annoyance as the person is not able to read print and not in a position to drive.

According to Heenan (2005), in a study undertaken at the University of Ulster in Northern Ireland, students were uncomfortable about the issue of disability and were unsure what disability actually meant. The majority of the students could identify with oppressive language relevant to disability but had difficulty in explaining why it was oppressive. Some believed that disability was based on inaccuracies and misunderstandings while others simply had very little knowledge on the subject of disability. A similar finding by Padayachee/Naidoo (2005) at the UKZN, Westville Campus, recommended a need to arrange workshops/programmes to educate and create awareness on disability issues with both academic and support staff so as to dispel any myths on disability. In addition the researcher believes that education and awareness on disability issues must be undertaken with sighted students as well.

Interesting studies by Emmet and Alant (2006), Graham et al (2010), Traustadottir (1990) and Wendall (1989), and reflected that women with disabilities suffer multi marginalities – that of being women in a male hegemonic society. The South African Integrated Disability Strategy (1997) also argues that women with disabilities experience more discrimination than able bodied women because their disabilities might prevent them from being able to live up to the cultural or societal demands and ideals of women, which mainly pertain to their roles as wives and mothers in the community.

Exclusion and social connectedness are constructed in the context of the lived experiences of people and groups and in particular those who view themselves as marginalized and oppressed. According to Bjarnason, (2002) Icelandic young adults with disabilities had problems largely due to social barriers, including parental overprotection, lack of peer group interaction and job opportunities.

Van Meygaarden (2005) in her research found that the onset of blindness of one family member disrupted family functioning to the extent where the family begins an adaptive struggle to regain equilibrium. Family reactions and feelings such as inability to deal with helplessness and dependence play a significant role in the functioning of a person with a visual impairment. Responses and reactions may include reducing the person with a visual impairment to a helpless, dependent invalid. Rosenblum (2000) too found that parents often treated their children with visual impairments differently from their siblings.

Van Meygaarden (2005) contend that families who react ineffectively may impede readjustment and success especially when one or both parents experience challenges in accepting their adolescent childs new status of vision loss which impacts on the adolescents ability to focus on a life with vision loss. In this instance one often wonders if there is the inability to cope with vision loss or the inability to accept vision loss that actually deters the person from adjusting to a life without adequate or no vision. Van Meygaarden (2005) clarifies that the families attitude towards the blind may determine a persons motivation and ability to tolerate emotional pain, irrevocable loss, and to accept major changes in their life styles.

Hence adjusting to vision loss can be difficult in the absence of family support. Families who communicated attitudes of essential worth and of readjustment may help to stabilize the individuals self concept, foster a positive attitude towards the future and maintain readjustment gains (Van Meygaarden, 2005). In support of this, Featherstone (1980) attributed much of the personal and vocational success of adjustment to visual loss and blindness to parental support, encouragement, positive reinforcement and positive attitude on the part of the family.

Thus Van Meygaarden (2005) concluded that the ability to cope with vision loss is dependent on ones social context and relationships more specifically in relation to the family as a support system.

According to Van Meygaarden (2005) the problem with visual impairment may not be the disease or the disability and may not reflect as medical, social, economic and legal factors. It may lie in the attitude of sighted persons towards the person with a visual impairment. Pity can be one of the strongest reactions of sighted people and can blind them to seeing the others unique characteristic

Burlington (1979) in Van Meygaarden (2005) expressed that the visually impaired persons attraction to the sighted world is not so much the advantage of vision, but rather a certain ambiance that surrounds the sighted as being active and spontaneous.

2.3.2. “Othering”, Powerlessness and Voiceless-ness

From the readings it appears that powerlessness, voiceless-ness and “othering” characterize the manner in which the human element in persons with disabilities was removed.

Balbo (1987), as cited by Dominelli (2002:9) states that oppression is “all embracing”, affecting all spheres of a persons life. One of the highlights of this study is to show how the experience of oppression filters and impacts on the holistic development of a person with visual impairment socially and academically. To counteract this Burke and Harrison (2005) declare that the key factor to anti oppressive practices is the ability to resist oppression. Zulu (2004:49) rightfully named accessible buses for persons with disabilities as “Sukuma” which in English translates to: “stand up and rise”. In relation to this study, the researcher interprets resistance to oppression and “stand up and rise” (Zulu, 2004:49) as irrespective of difficulties, social injustices, barriers and challenges, the voices, power and resilient spirit of persons with disabilities must be heard and felt by the dominant groups.

Alluding to dominant groups in the context of “othering”, powerlessness and voiceless ness, Narayan, Patel, Schafft, Rademacher and Koch-Schulte (2000) and Klasen (1996) as cited by Shera (2003) agree that ideologies of dominant groups give birth to oppression, rejection, inequality and marginalization. This is because persons with disabilities are unwilling or unable to conform to the standards set by dominant groups. These scholars further reported that social exclusion focused on difficulties, disadvantage, challenges and barriers experienced by certain groups, which prevented their voices from being heard. Adams (1999) in Shera (2003:8) stated that, marginalized persons accept and give in to the ideologies imposed by dominant groups and that these subordinate or marginalized groups legitimatize the rules of dominant groups. Hence in an effort to reduce or eliminate social exclusion, it is imperative for social workers to have a firm grounding of Theories on Anti Oppressive Practices, Social Justice, Diversity, Power Relations and Human Rights which is necessary in effecting social change, transformative thinking and disability renaissance.

Summers (2002) and Burke and Harrison (2005) say that power imbalances reflect oppressive practices and we must focus on fostering social change and transformation to redress the balance of power. Ignoring this may simply perpetuate inequalities and powerlessness of persons with disabilities.

According to Foucault (1967) as cited by Hughes and Paterson (1997) the ebb and flow of the process of "othering" is what imprisons persons with disabilities and this is what Foucault (1967) refers to as "the great confinement" (Hughes and Patterson, 1997:325) which highlights exclusion, oppression and inaccessibility.

2.3.3. Poverty

Ahmed Kimbugwe a person with a disability living in Kampala and the Kansanga family provides a thick description of disability and poverty as follows:

"*Poverty and disability are similar and mutual. If you are disabled you must be poor, because you are incapacitated and cannot look after yourself, yet the conditions around you (environment) may not be favorable. If you are poor, it is similar to being disabled in many ways-body and soul. You cannot feed yourself, and if you have children, they all become disfigured and physically disabled due to bad feeding. The next thing you see are jiggers in ones feet and fingers, followed by pauperism" (Lwanga-Ntale, 2003:8).*

Alcock (1993), Narayan, Patel, Schafft, Rademacher and Koch-Schultel (2000) and Thomas (2005), demonstrate the marriage or companionship between disability and poverty. In their studies they often refer to poverty in a partnership with disability or poverty and disability as mirror images. The researcher is of the opinion that these studies show disability and poverty as phenomena that must be viewed together rather than in isolation.

Elwan (1999), Emmet and Alant (2006*)* and Graham et al (2010) also found that the high incidence of disabilities in the Third World relate to poverty that is linked to environmental factors, disparities in economic, social, educational and political power associated with being poor which underscore high levels of illness, accidents and dependence on families and communities for support.

Rust and Metts (2006) state that social exclusion is a defining characteristic of poverty and its causal effects stem from factors related to inaccessibility to education and employment opportunities. In other studies undertaken by Eyben and Ferguson (2000) and Hulme, Moore and Shepard (2001) social exclusion is referred to as exclusion from mainstream social, economic and political opportunities in peoples life journeys and hence these households are frequently forced into the sphere of chronic poverty. A further interconnectedness between poverty and disability is highlighted by Hegarty (1995) in UNESCO studies that estimate that 98% of impaired children in developing countries are denied formal education, that they often receive "second" class treatment and lack confidence in themselves in trying to participate equally in society. This constitutes prejudice, discrimination and stigmatization. As adults, discrimination perpetuates exclusion from employment and income generating opportunities thus forcing persons with disabilities into a life of poverty and social exclusion that follow them throughout their lives.

Related to education, a prolonged academic career at school and higher education is as a result of enforced course loads per semester hence forcing learners and students to delay the completion of their schooling or tertiary education. These delays result in a loss of income and delayed exposure to the job market. This is consistent with Albert and Hurst's (2004) view that unequal participation creates conditions that result in persons with disabilities being among the poorest of the poor. Poverty and disability are in this sense locked in the embrace of a dance related to economic destruction.

Myrdal's (1944) study cited by Rust and Metts (2006) and Yeo (2005) too found a relationship between poverty, stigmatization and discrimination of people with disabilities which often led to a lack of opportunities, perpetuating poverty. Cultural factors in the African society further perpetuated the cycle of poverty. In relation to this Graham et al (2010) in their study of poverty and disability in Johannesburg, found that many African children living with disability enter a cycle of poverty at the onset of disability since, culturally they are considered to be burdens on their families, which further exacerbated stigmatization and discrimination.

Yeo and Moore (2003) in their study also found that children with disabilities will be less likely to be sent to school as parents believe that they may not cope, that they maybe ridiculed and that this may effect on the marriage proposals of their siblings and that able bodied siblings get preferences.

In developing countries in the Global South, non visibility of economic and social development is associated with widespread and seemingly intractable poverty related to wars, civil unrest, malnutrition, poor sanitation, education, homelessness, unemployment, and inaccessibility to labour market rights, lack of immunization, inadequate health care, few safety provisions and pollution (Albert and Hurst, 2004; Rousso, 2006 cited by Graham et al 2010; Rust and Metts, 2006 and Yeo, 2001 cited by Lustig and Strauser, 2004; and Yeo, 2006). These factors according to Emmet and Alant (2006) and Lustig and Strauser (2004) make people much more vulnerable to contracting a whole range of disabling impairments or increase the severity of pre existing disabilities.

Graham et al (2010) and Rust and Metts (2006) further contend that disability can perpetuate poverty due to expenses involved and that the greater one's poverty, the less one can spend on prevention of impairment and on its treatment thereby increasing risk of permanent impairment. These factors only serve to increase the process of "otheriing", which according to Dominelli (2002) dehumanizes people, leaving them with little opportunities to liberate themselves.

Albert and Hurst (2004), Graham et al (2010), Emmet and Alant (2006) and Lwanga Ntale (2003) also show that poverty and disability exist in a two - way relationship where they contend that disability increases the risk of poverty whilst poverty creates the conditions for increased risk of disability, in other words disability entertains poverty and poverty entertains disability.

In a study undertaken by Lwanga-Ntale (2003) a clear relationship was again established between disability and chronic poverty by groups of persons with disabilities in Mbarara, Kampala and Mukono in Uganda. This study found that the relationship between disability and chronic poverty are mutually reinforcing.

Albert and Hurst (2004) and Lwanga-Ntale (2003) assert that inequalities and discrimination faced by persons with disabilities can only be eliminated or reduced if society becomes truly inclusive. This inclusivity can only thrive by establishing a framework that is directed by anti oppressive and human rights practices.

2.3.4. Education and Living Experiences

During the past twenty years the international community has produced a number of human rights declarations and conventions to include amongst others, equal learning experiences for people with disabilities. In this regard The Salamanca Statement (UNESCO, 1994), The Education for All Movement (2000) as cited in The Better Education For All: A Global Report (2009), Skelton (1999) as cited by Howell and Lazarus (2003) and The United Nations Convention for the Rights of Persons with Disabilities (2007) all allude to the provision of quality education for all, improved and equal access, widened participation and that inclusive education be implemented and managed at all levels of the curriculum. If inclusive education cannot be implemented, then according to Howell and Lazarus (2003), the resulting exclusion means transgressions of the access imperative which is the denial of educational opportunities and equality. Clearly exclusions from the access and participation imperative negatively impacts on the success imperative.

In a study by Gidley, Hampson, Wheeler and Bereded-Samuel (2009) Australian Higher Education is based on concepts related to access, participation and success imperatives. This was believed to create a more comprehensive view of quality Higher Education. On the other hand Skelton (1999) as cited by Howell and Lazarus (2003) contend that we must consider the experiences and associated equity challenges endured by students with disabilities in Higher Education. Access to Higher Education cannot be separated from the exclusionary experience of Higher Education for students with disabilities.

Steff, Mudzakir, Andayani (2010) in their study on students with disabilities at State University UIN in Indonesia found that education must be made accessible to all human beings regardless of differences which could be attended to by non discriminatory attitudes displayed by academic staff.

Tertiary institutions need to ensure inclusion, equal access and full participation of students with visual impairments, which is the key concern of the present study.

Farmer, Riddick and Sterling (2002) as cited by Steff, Mudzakir and Andayani (2010) positions the participation imperative at three levels which is the individual, institutional and ideological level. The individual level refers to the personal experiences of students and their inclusion within the university. The institutional level is linked to the organization of the universities and colleges to facilitate provision of services to support the academic journey of students. Finally, the ideological level focuses on rights, policies and equal opportunities in supporting access and entitlement to education.

Fuller, Healey, Bradely and Hall (2004) agree that there must be equal opportunities and empowerment of students with disabilities (ideological level) and that our interest in inclusion must encompass hearing the voices of students with disabilities (personal level) by listening to learning experiences in higher education (institutional level).

Studies of influence undertaken by Odendaal-Magwaza & Farman (1997) state that the eligibility for Higher Education for students with disabilities in South Africa has been and continues to be influenced by perceptions of their capabilities. Their study showed that students with disabilities were denied access to particular courses because, they were not given recognition of their capabilities to meet their course requirements especially with courses entailing fieldwork, the study of graphic material, the use of particular equipment and courses which required extensive interaction with the public (Odendaal-Magwaza & Farman, 1997).

In view of the access and participation imperative not being met, Howell and Lazarus (2003) recommend a widening of the access and participation imperative to allow for the transformation of the Higher Education system to include a larger and more diverse student population.

In a study undertaken in Scotland, Tinklin, Riddell and Wilson (2004) investigated the impact of multiple policy innovations on the participation experiences of students with disabilities through student case studies where they found a discrepancy between policy and practice evident in barriers to choice of institution and course modules, physical inaccessibility and curriculum inaccessibility.

The evidence and commitment of policy frameworks that bind these imperatives to Higher Education should create a just and equitable Higher Education environment for students with disabilities but the researcher argues that if they are to have meaning for students with disabilities, more careful dialogue, consideration, planning and implementation needs to be given to barriers that restrict access and limits participation of students with disabilities.

According to Baron et al. (1996) as cited by Hal, Healey and Harrison (2002) in a study of disabled students in Scotland, found evidence of reluctance to disclose disabilities on application forms or to staff at Higher Education Institutions. This was both because the medical categories of disability on applications had little relevance to students social and educational needs and went against their social identities, and because there was a fear amongst students that disclosure might jeopardize their applications. They also found that certain disciplines were not made accessible to students with disabilities than others.

Irrespective of these imperatives as outlined above, Matshedisha (2007) in a study at the University of Witwaterstand, located four challenges that students with disabilities experience at institutions of Higher Education. These challenges refer to:

- A legacy of exclusion at all levels of education.
- Discriminatory attitudes which promotes marginality.
- Failure, oversight or ignorance to formulate and implement policy for disability support services at most Higher Education Institutions and
- The lack of political commitment from government officials to expedite the process of widening access.

On the other hand Howell and Lazarus (2003) found that in their study at the University of Western Cape that Higher Education can either promote existing inequalities or prohibit existing inequalities of which the latter is important in improving the skills and knowledge base of students with disabilities.

As cited by Hall, Healey and Harrison (2002), Poussu-Olli (1999) found that in Finland inaccessibility to certain disciplines for persons with disabilities was also evident. Hence, some disciplines showed a higher intake of students with disabilities than other disciplines. This study further reported that admission rates was high in the social sciences, especially social, political and economic sciences, legal science and humanities, and lower participation rates were noted in disciplines including languages, physical exercise, arts and crafts, medicine and geography.

A further factor that exacerbated exclusion at a university level is linked to the schooling system in South Africa. According to Howell and Lazarus (2003) inequalities in Higher Education can be linked to those that have shaped the schooling system in South Africa. At this level education was shaped on categorizing learners into dominant mainstream schooling and those with special needs, who were unable to fit into the dominant, mainstream schooling system. As a result of the lack of support and resources at schools for learners with special needs, the number of learners with disabilities accessing post secondary educational opportunities was affected. The Council for Higher Education point out that even if 10% of learners with disabilities presently in the school system were to enroll at Higher Education, this would represent a significant challenge for institutions at levels of infrastructure, support services and learning and teaching (CHE 2001:27 as cited by Howell & Lazarus, 2003). This supposed ineligibility can be directly linked to the dominant discourse of disability and special needs which was seen as the basis for a segregated and inadequate schooling system. Whilst Higher Education has not been separated into special and ordinary institutions, the dominant medical discourse of disability and its attention to individual deficit has placed the emphasis on the nature of the students impairment and the extent to which the impairment is perceived to limit particular capabilities, including academic pursuits.

Howell and Lazarus (2003) further contend that the barriers to accessing Higher Education in South Africa are exacerbated by inequalities evident in Higher Education itself. The impact of other barriers within Higher Education institutions (attitudes to disability and learning, academic curricula, the physical environment of institutions, the organizational environment, the provision of teaching and learning support and academic development programs, the allocation and distribution of resources and the role that Higher Education plays within society as a whole) continue to limit the ability of these students to participate equitably in the teaching and learning process.

In an effort to promote the inclusion of students with disabilities in Higher Education, The Equal Status Act (2000) provides a clear mandate in the Disability Support Services Report (2011) for disability support services at the University College Cork in Ireland i.e. the University must institute what is required to accommodate the needs of students with disabilities by providing special facilities in circumstances where without these, it would be impossible or unduly difficult to avail of the service i.e. education. Furthermore this Equal Status Act (2000) states that an educational establishment shall not discriminate on the grounds of disability in relation to admissions, access to the curriculum and participation. An aspect of being proactive in hearing/experiencing the voices, power and resilient spirit of students with visual impairments is addressed by Mathenjwa (2002) in Padayachee/Naidoo (2005), wherein tertiary institutions ought to increase the marketability of these students by building their academic capacities and skills.

Regarding women with disabilities, Russo and Jansen (1998) and Traustadottir (1990) in their study found that Higher Education continues to be a challenge for women with disabilities in that they face additional barriers of being channeled into traditional female fields by school counselors and they are likely to encounter even greater obstacles than non disabled women if they attempt to pursue a career in a male dominated profession. In relation to this Howell and Lazarus (2003) state that if equity in Higher Education is to be a reality for all existing and prospective students with disabilities, then we need to transform structures in society and the visions of our institutions to reflect proactive stances in undertaking their core business.

A further challenge encountered by students with disabilities in Higher Education is related to their living experiences. Negative self image, perhaps expressed in feelings of personal unattractiveness, an awareness of being different in socially disadvantageous ways and a limited experience of physical activity, often associated with dependence on sighted others, are just some of the ways in which young persons with visual impairment have identified their sense of isolation in a world designed by the seeing for the seeing.

Gilson (2006) who is blind undertook a study at the University of Hong Kong and found that residing at university exposed students with disabilities to numerous obstacles especially with Hong Kong having a mountainous terrain, posing numerous safety and physical environmental challenges. In addition to this Gilson (2006) found that access to some of the dormitories remained difficult, a person would need to negotiate a few steps or perhaps use a portable ramp. Elevators did exist once you were inside the building. This study also found that students who found loud noises bothersome may experience great difficulties locating quieter places to live. Because carpeting is rarely used, apartment buildings and dormitories often reverberate with the echo of slamming doors, all of which created difficulties for students with disabilities.

On the contrary Castellano (2011) who is also visually impaired, found in her study that Lancaster University has a sophisticated and encouraging set-up for persons with disabilities. This set-up translates to having student helpers, community volunteers, strong linkages between the university and local social workers and advanced assistive technology on campus. Helpers assist with activities of daily living e.g. food preparation, cleaning of residences, purchases of food and assistance by social workers with regards to orientation, mobility and provision of low vision equipment. Castellano (2011) contends, that this has facilitated her independence and success in her art work studies, orientation and mobility, daily living skills and ability to travel.

The researcher is of the opinion that a sophisticated and encouraging set-up for persons with disabilities, is similar to operationalizing the Ubuntu Philosophy that takes into consideration a persons unselfish ability to respond to the needs of others thus assisting to rebuild and re mould their lives for inclusion and normality.

Barnes and Mercer (2005) found that an innovative range of identified specialized support services, designed and managed by persons with disabilities would enhance independent living. Alluding to this, activists with disabilities (Barnes and Mercer, 2005) argue that for independent living to be effective and meaningful there must be acceptance that:

1. All human beings irrespective of the nature and severity of their disability are of equal worth and hence have an equal right to be included for participation in mainstream living.

2. Irrespective of the nature and severity of their disability, persons with disabilities must be given the same opportunities to be empowered to make their own choices and exercise control in their everyday lives.

The researcher believes that these points allude to “Nothing about us without us” (Yeo and Moore, 2003:751).

2.4. THE WAY FORWARD

2.4.1. A Paradigm Shift

The International definition of social work calls for the social work profession to focus on transformative thinking relevant to principles of anti oppression, social justice and human rights for the emancipation and well being of service users. This can be promoted by using Theories of Anti Oppression, Social Justice, Human Rights, Human Behavior and Social Systems as service users are always in interaction with their environments (Sewpaul and Jones, 2004). This provides us with a platform to correct discrimination and to work towards a world of anti oppressive practices. The following core purposes of social work have been identified arising from the international definition of social work as contained in The Global Standards Document (Sewpaul and Jones, 2004) i.e. to:

1. Facilitate the inclusion and protection from exploitation of persons who are marginalized, socially excluded, disposed, vulnerable and at risk.
2. Address and challenge barriers, inequalities and injustices that exist in society.
3. Enhance peoples well being, stability, harmonious and mutually respectful societies and promote development, human rights and stability that promotes human rights.
4. Engage in advocacy relevant to local, national and international concerns.
5. Engage in social action to effect change by critiquing and eliminating inequalities.

Clearly social workers and other related professionals need to proactively address the gaps between the ideal and practice, this being a key objective of this study.

Studies of influence by Burke and Harrison (2005), Ferguson and Lavalette (2006), Hughes (1999) as cited by Shera (2003), Mullaly (1993) and Rojano (2004) and show that social work should be grounded in humanitarian, social equality and justice, transformation at micro and macro levels, anti oppressive doctrines, survival, improved mental health, co operation and collective orientation and paradigms in disability thinking to make persons with disabilities realize and deal with suffering and violation. Social workers have the responsibility of engaging in the lived experiences of the oppressed, vulnerable and disadvantaged whose lives are characterized by deprivation, poverty and social exclusion. These ideals cannot be compromised by values of inhumanity, inequality and exclusion which marginalize persons with visual impairments who experience “othering”, powerlessness and voice less-ness. The call for social work once again is to empower, liberate and institute social change of and for the oppressed and vulnerable masses inclusive of persons with visual impairments.

The pain, powerlessness, voiceless-ness and the humiliation suffered by persons with visual impairments mean that as social workers we must aggressively take people out of a life of oppression, violation and exploitation and address structures that perpetuate these violations, exploitations and oppressions. The researcher believes that this constitutes social change and Anti Oppressive Practices. As social workers we must establish social conditions in which people are treated and respected as equals regardless of their disability. Social work is a unique profession, which has the potential to significantly add to the debate on paradigm shifts in disability thinking. The social work history, the International definition of social work and the ethical code of social work practice all point to a strong commitment to defend those who cannot defend themselves from harmful practices perpetuated against them by those in positions of power.

According to Hughes and Paterson (1997) there must be a rethink of how our society and politics continue to profile people living with a disability as the “other” thereby constraining their ability to participate fully in society. This redress will ensure that our political, social, educational and physical landscapes change as people come to realize that to exclude people living with disabilities is to miss out on the potential meaningful contributions they can bring for the betterment of our society. In the absence of this redress, Fahmy (2008) asserts that persons with disabilities are being shut out from society.

Dominelli (2002) a notable writer in the field of anti oppressive social work theory and practice state that social work commits itself to enhancing the lives of vulnerable persons and that we must challenge existing structural inadequacies by mobilizing for transformation to bring to the surface social equity. Without this action social work becomes meaningless as social pathologies would be exacerbated. This study attempted to bring to the surface the voices of marginalized students with visual impairments in an effort to address exclusions and social pathologies that they may have experienced.

In addition to the interventions and policies mentioned earlier, the researcher also believes that inequality, oppression and the marginalization of students with visual impairments may be addressed by adopting the “Ubuntu” philosophy..

2.4.2. The Ubuntu Philosophy

The White Paper for Social Welfare No. 24, Chapter 2 (1997) alludes to the spirit of individuals caring for fellow humans by way of mutually supporting the well being of individuals in a given society. In this way individuals express humanity and oneness through their bondage with others. Peuplesawa.Com (2008:1) expressed Archbishop Desmond Tutu’s sentiments relevant to Ubuntu which stated that “A person with Ubuntu is open and available to others, affirming of others, does not feel threatened that others are able and good, for he or she has a proper self assurance that comes from knowing that he or she belongs in a greater whole and is diminished when others are humiliated or diminished, when others are tortured or oppressed”.

Kasiram, Engelbrecht and Landau (2009), stressed that in the African context, it is important to use values reflected in the Ubuntu Philosophy where the structure of the extended family as a unit is respected and the tradition of sharing and caring honoured. and which serves as important tools to reconstruct individuals, families and communities. Community as context can never be ignored in South Africa or any part of the world.

Samkange (1980) cited in Peuplesawa.Com (2008) highlight that by remolding the humanity of others, ones humanity is affirmed by way of mutual respect and further affirmation is felt when one opts for the preservation of life over wealth. This view has important significance for both operationalizing Ubuntu and for community family therapy which are key issues that may positively impact on life for the student with visual impairments.

According to Wikipedia in Rwanda, Uganda, Tanzania and Burundi, Ubuntu means human generosity, consideration and humanness towards people and humanity. These societies appeal to others to respond humanely and be generous towards others and that an affirmation of our humanness is when we acknowledge that of others.

In other words, Ubuntu is a traditional African philosophy that offers us an understanding of ourselves in relation to the world. According to Ubuntu Philosophy there exists a common feeling between us all and it is through this common feeling and through our interaction with others that we discover our own human qualities. As the Zulus would say, "Umuntu Ngumuntu Ngabantu", which means that a person is a person through other persons. We affirm our humanity when we acknowledge that of others (Wikipedia:2).

This principle and philosophy may well serve to address issues pertaining to participation, liberation, positive living experiences at student residences, enhanced relationships with sighted persons in the family, mainstream school, the community and at university.

2.5. CONCLUSION

This review covered a wide range of issues including social relationships, powerlessness, poverty, voiceless-ness and "othering" experienced in the social and university environments in relation to visual impairment. These issues demonstrate how wide the gap is between legislated ideals and actual experiences.

Graham et al (2010) clearly state that despite the extensive policy landscapes intended to support people with disabilities, there exists a gap between policy and experience. It is for this reason that further information is required in order to ensure that the challenges that people living with disabilities in some of the poorest areas are addressed.

Based on the discussion above it is clear that disability needs to be understood within the context of a multidimensional approach which recognizes that factors related to disability e.g. poverty, ‘othering”, powerlessness, voiceless-ness, marginalized living and learning environments constrain the individual’s ability to effectively deal with their life long reality of visual impairments.

CHAPTER THREE

RESEARCH METHODOLOGY

3. RESEARCH METHODOLOGY

This study used the qualitative approach and aimed at providing thick descriptions and interpretations of social exclusion as experienced by students with visual impairments at UKZN Edgewood and Howard College Campuses.

Scholars such as Denzin and Lincoln (2000:391), Babbie and Mouton (2006:646), Terreblanche, Durrheim and Painter (2008) and Mouton (2001:188) agree that qualitative researchers attempt to study human action in the form of thick descriptions which bring to the surface a voice related to personal feelings, subjective experiences, perceptions, social situations and phenomena from an insiders perspective. These insider perspectives go beyond mere fact and surface experiences. They represent detail, context, emotion, and the web of social relationships that join persons to one another. It plugs history into significance of experience.

This study ensured that through the process of semi structured and focus group discussions, participants were studied in terms of their own definition of their world (insider perspectives) and their subjective experiences that revealed the complex, painful and oppressive experiences that they endured in the social exclusionary process associated with their visual impairments. According to Mouton (2001) these are advantages of the qualitative paradigm.

The study design was exploratory as the researcher intended retrieving as much rich information as possible. The researcher agrees with Babbie and Mouton (2006:80) who comment that, studies that are of an exploratory nature usually led to “getting to know what is happening” and understanding the journey of these happenings. In relation to this, the study allowed the researcher to explore and understand the ways in which participants experienced social exclusion.

According to Struwig and Stead (2003:7) “the major part of exploratory research is the development, clarification of ideas and the formulation of questions”. In relation to this study, the researcher was in a position to clarify ideas through probing via semi structured interviews and focus group discussions.

The researcher hopes that through this exploration, the findings will provide further insight and understanding regarding the repercussions of social exclusion. Furthermore, the findings are expected to provide meaningful recommendations for possible implementation at UKZN and other institutions of Higher Education, The South African National Council for the Blind, The World Blind Union, schools for learners with visual impairments and external structures of and for persons with visual impairments.

3.1. METHODS OF DATA COLLECTION

In exploring and understanding the effects of the social exclusionary process, the researcher used both semi structured individual interviews and focus group discussions to collect data.

Fifteen students with visual impairments were selected to be participants in the individual interviews and focus group discussions. The individual interviews were the first phase of data collection and thereafter in the second phase focus group discussions were introduced for validation/illumination of information from the individual interviews. All individual interviews and focus group discussions were tape recorded. The justification for this data collection plan ensured that these two data collection methods complemented and illuminated the findings so that ultimately rich data and thick conclusions were drawn. Furthermore, the focus group discussions did not only validate the information from the semi structured interviews but served to clarify responses from the individual interviews that warranted clarity and elaboration.

Two students were randomly selected to pre test the interview schedule. This assisted the researcher to change initial ideas and refocus on some questions in the individual interviews. There was no need to have questionnaires in Braille, electronic format, audio recorded or large print, as the researcher used oral interviews and recorded participants feedback herself.

The researcher was mindful of the criteria when selecting participants for the individual and focus group interviews, which according to Babbie and Mouton, (2006) refer to thorough enculturation, current involvement and adequate timing.

In relation to this study, the researcher used thorough enculturation, current involvement and adequate timing to suit the context which is elaborated upon hereunder.

1. Thorough enculturation allowed for existing and very recent students with visual impairments to be interviewed as they may have had exposure or engagement in social exclusionary processes.
2. Participants who are current students or whom were very recent students at UKZN Howard College and Edgewood Campuses.
3. Adequate time was given to crucial respondents.

Kvale (1996) as cited by Babbie and Mouton (2006) provided details on the seven stages to be implemented to complete the interviewing process, of which the researcher took cognizance of and used in this study.

1. Thematizing which considered the purpose of the interview and clarification of the concepts explored.
2. Designing by creating a process to meet the needs and purpose of the study taking into account ethical dimensions.
3. Interviewing i.e. undertaking the actual interviews.
4. Transcribing or writing a text of the actual interviews.
5. Analyzing of collected data to arrive at a meaning in relation to the purpose of the study.
6. Verifying of the materials.
7. Reporting, which align to extracted data retrieved from individual and focus group discussions.

3.1.1 Semi Structured Interviews

According to Babbie and Mouton (2006), within the qualitative paradigm, individual open ended interviews are the most frequently used method of collecting information which allows for:

1. Participants to speak for themselves and
2. Redesigning of questions throughout the study.

According to Sukhraj-Ely (2009) and Krueger (1994), in semi structured interviews participants are asked prepared questions in a systemic and consistent manner. This allows for multiple, well thought off perceptions, responses and ideas that will promote emotionality and feelings and will also allow for responses to be made outside of the confines of the question.

For the purposes of this study, the researcher developed a set of questions that was prepared in advance. These semi structured individual interviews widened participants access to comment and share with the interviewer their emotions, feelings, perceptions and inside perspectives on how they experienced social exclusion. The researcher asked the questions and wrote the responses hence questionnaires in alternate formats were not necessary.

3.1.2. Focus Group Discussions

According to Denzin (1989a) as cited by Mouton (2001), groups have their own identity in terms of structure and meaning and a group discussion focuses on access to the participants level of meaning. Focus groups can also function to clarify or re-evaluate previous responses from individual interviews that require elaboration. The researcher used focus group discussions as a source of clarity seeking and thickening descriptions i.e. the same students with visual impairments from UKZN Howard College and Edgewood Campuses who were interviewed individually were brought together for focus group discussions to further explore their social exclusionary processes. A pilot study was absent in this phase of the discussions.

The two focus groups comprised of 4 participants from Edgewood Campus and 5 participants from Howard College Campus with common characteristics of being visually impaired and having student status at either UKZN Howard College or Edgewood Campuses. This carefully planned discussion, through the nurturing of perceptions and points of view, provided information about the groups perceptions, insider perspectives, emotions, feelings and attitudes about their experiences in the social exclusionary process. The researcher was able to identify their reality in terms of their own definition of how they as a group experienced social exclusion. Participants influenced and interacted with each other and as a result the journey of the discussions was influenced. This required of the researcher to keep discussions as per her planning strategy and stay focused. The researcher's interviewing skills and experience in facilitating focus group discussions greatly enhanced the process of continuously keeping the group in check.

These focus group discussions allowed the researcher to generate and collect information as group members were placed in natural, real life situations. Krueger (1994) mentions that focus groups are characterized by in depth and well thought of discussions so as to extract views, feelings and experiences on the topic under discussion in a non judgmental way. Struwig and Stead (2003: 99) further state that "social sciences have also used this method to explore areas where little is known or where the views of a certain sample (such as a particular culture, age group, disability or gender) need to be obtained. As in this study, the sample being visual impairment.

According to Krueger (1994) focus groups have several advantages and for the purpose of this study, the researcher wishes to mention the following two advantages:

1. It is a socially oriented research procedure. In this study the group members were influenced by comments of each other and tended to make decisions after listening to other members of the group. It allowed the researcher to observe interaction amongst group members, which according to Krueger (1994) is a process that qualitative researchers are interested in, namely interaction, attitudes and experiences of participants.
2. The format of focus group discussions allows the moderator to probe and explore issues that was unexpected.

In relation to this study, it was however noted that, responses from the group depended on what was actually mentioned by other group members. This allowed the researcher to observe the group's participation or listen to their inside voices, feelings, emotions and personal perspectives of the manner in which the social exclusionary processes affected their daily lives in the context of their social and university environments.

The researcher, through a carefully planned format used the types of questions as mentioned by Krueger (1994), which follows.

1. Opening questions whereby the participants quickly identified themselves.

2. Introductory questions enabled the researcher to provide a general introduction of the aim of the study and allowed participants to reflect on past experiences in relation to social exclusion. This helped to stimulate discussion and interaction, although not much interaction was necessary as group members from the respective campuses knew of each other as they were from either UKZN Howard College or Edgewood Campuses.

3. Transition question were aligned to the critical questions. The transition questions were put in a way that helped participants to broaden their thinking of the topic.

4. Key questions were used to drive the study in an effort to meet the aims of the study.

5. Ending questions required of the participants to reflect on previous comments. Participants were given the opportunity to state their final views on critical areas of concern and identified important aspects that required attention. The researcher provided a short oral summary of the key questions and important ideas that emerged from discussions. In view of there being sufficient remaining time, the researcher asked finally if any important issues have been left out.

3.2. SAMPLING

The careful selection of crucial participants ensured that the researcher focused on retrieving as much in depth rich information as possible.

In view of this the researcher used the following sample:

- Students with visual impairments, due to the nature of their disability and their reliance on what they hear as opposed to sighted persons who would use normal sight and hearing to formulate ideas, impressions and thought. The researcher did not consider age, year of study, field of study, undergraduate or post graduate status, one particular visual impairment, visual impairment since birth, onset of visual impairment later in life, race, religion, historical backgrounds or gender as these factors were not deemed important in reaching the goals of this study. The common factor of all respondents was visual impairment, either total blindness or partial vision and their student status at UKZN Howard College or Edgewood Campuses.
- Students with visual impairments from UKZN Edgewood and Howard College Campuses.

The non probability sampling method ensured that units of analysis were deliberately selected to focus on the purposes of the study.

In the first phase (using individual interviews), convenience sampling was used:

- Due to the accessibility and location of the participants, and according to Dawkins (1991) as cited by Sukhraj-Ely (2009), convenience sampling entails choosing individuals that the researcher can easily access. In this study the researcher opted to choose students with visual impairments from UKZN Edgewood Campus, where the researcher is employed at the Disability Support Unit as a Disability Support Officer and UKZN Howard College Campus, as the researcher was previously employed at the Disability Support Unit. Furthermore, the location of the campuses was accessible to the researcher.
- The researcher was in a position to be knowledgeable on the characteristics of the representative sample because of her previous experience of working with students with visual impairments both at KZN Society for the Blind and at UKZN Howard College Disability Support Unit and present experience of working with students with visual impairments at UKZN Edgewood Campus Disability Support Unit. The researcher invited students who satisfied the purposes of the study, to participate in this research. The first 15 students who agreed to be interviewed, formed the sample for phase one of the study.

In the second phase of the study (with focus groups) convenience and availability sampling was used since those who were interviewed were invited to participate in the focus group discussions.

3.3. DATA RETRIEVAL AND ANALYSIS

The researcher used discourse analysis, as it allowed movement from beyond what is obvious to what is less obvious and yet to the completely obvious to empower the researcher to redefine or re construct the meaning of all things. Thus one can understand that discourse analysis refers to the analysis of communication, dialogue or communication. It must however be mentioned that according to Babbie and Mouton (2006), discourse analysis concerns itself with language that:

1. Is interpreted beyond the boundaries of a sentence or utterance.
2. Examining interrelationships between language and society.

3. Engages in dialogue properties of everyday communication.

The specific data collection procedures employed in the study allowed for these three concerns to be easily addressed and reported during the analysis phase of the study.

Further, reporting of the data from participants from both the individual and the focus group discussions was retrieved via tape recordings and transcripts. This research used original transcripts and focus group discussions in relation to existing literature. These tape recordings and transcripts:

- Provided the researcher with a beginning.
- Served as public records to the scientific community.
- Were replayed for authentication purposes. The researcher, in retrieving data was not limited to the original transcripts.
- Gave the researcher further opportunities for the conversation to be made sense off as sequences of utterances were realized and inspected.

Data analysis basically refers to the researcher's ability to organize the collected data in a meaningful and organized way that will help facilitate the interpretation of the accumulated data. In relation to this, Vithal and Jansen (1997) recommend three steps in data analysis, which the researcher applied to the qualitative paradigm which follows:

Scanning and Cleaning of Data

The raw data was firstly transcribed, arranged and organized for analysis by reading of the data, scanning for incomplete, inaccurate, inconsistent and irrelevant data, as well as to organize collected data into relevant categories.

Organizing the Data

The researcher arranged the data into a manageable format or into groups in terms of descriptions, common words, phrases, themes, or patterns. The information was then categorized accordingly into smaller relevant pockets of information.

Re presenting the Data

Re presenting the data provided meaningful summaries/interpretations and took the form of tables, selected quotations from responses to a question in the individual and focus group interview.

Data analysis, re arrangement of data, summaries and interpretation of data allowed the researcher to identify important homogenous perspectives or information from both the individual and group discussion perspective, relevant to the social exclusionary process.

3.4. TRUSTWORTHINESS

According to Lincoln and Guba (1985) the key principle of good qualitative research lies in trustworthiness. The basic tenet of trustworthiness is the ability of the researcher to indicate that the findings of an inquiry are worth paying attention to or worth taking account off. Hence, qualitative studies can only be transferable if it is credible, transferable, confirmable and dependable.

Qualitative Notions of Objectivity

The researcher mentions the qualitative notions of objectivity used in this study.
Research by Babbie and Mouton (2006) on qualitative notions of objectivity clearly indicates that the following be respected in undertaking qualitative research.

Credibility

Credibility is achieved through the following procedures:

1. Prolonged engagement which refers to being visible in the research until data is saturated.
2. Persistent observation by consistently viewing interpretations in alternate ways in the process of analysis.
3. Peer debriefing which was undertaken with a colleague who was outside the context of the study and who has a good understanding of the context of the study. This debriefing ensured objectively reviewing information and analyzing it.

4. Member checks were maintained by making reference to the source of information and checking on the interpretations. Literature by Babbie and Mouton (2006) suggest that this is aimed at ascertaining the intentionality of the respondents, to make amendments in case of errors, assess the overall adequacy of information retrieved and as well as to add on other information.

Transferability

Transferability suggests the manner in which the findings can be applied to other contexts or with other respondents. According to Lincoln and Guba (1984) as cited by Babbie and Mouton (2006), the following are strategies for transferability and which the researcher considered when undertaking this study. Thick descriptions whereby the researcher gathered in depth, detailed descriptions of the social exclusionary processes as experienced by students with visual impairments at UKZN Howard College and Edgewood Campuses and as a result the aims of this inquiry were met. These in depth detailed descriptions concluded with in depth detailed reports, which provided the reader with an opportunity to make a judgment of whether the findings can be applied to another context or with other respondents. This information was reported in extensive detail, with accuracy, so as to allow judgments about transferability to be made by the reader.

Dependability

A study must show that if it were to be repeated with the same or similar participants in the same or similar context its findings would be similar. According to Babbie and Mouton (2006) there cannot be credibility without dependability and that a demonstration of credibility is sufficient to show the existence of dependability.

Confirmability

This refers to the degree to which the findings are derived from the focus of the inquiry and not the prejudices of the researcher, and was achieved when a thorough literature search and supervision of the project, was undertaken.

3.5. RELIABILITY

A pilot study was undertaken with 2 participants to ascertain the reliability of the instrument. Evidence available to date (Babbie & Mouton, 2006); Struwig & Stead, 2003) and Neuman 2003) as cited by Padayachee/Naidoo (2005) suggest that instruments used in a pilot study, determine the participants understanding and usefulness of the questions which enhances the reliability of an interview schedule. This enabled the researcher to make minor amendments in terms of rewording two questions in the instrument prior to finalizing the interview schedule used in this study.

3.6. ETHICS IN DISABILITY RESEARCH

According to the National Disability Authority, guidelines for disability research as cited in RESPECT, (2003) ethics in disability research must encapsulate the following, which was respected in this study:

1. Equality and human rights for persons with disabilities.
2. Well being and avoidance of harm.
3. To ensure competence, the researcher used her extensive knowledge and experience in the field of visual impairments.
4. In individual interviews and focus group discussions with participants, the research project was justified in a way that it contributed positively to improve human rights, inclusion and social justice for students with visual impairments.
5. Sensitivity was ensured by the researcher on the participants history of social exclusion. The researcher ensured that participants were involved in meaningful ways by obtaining thick descriptions of their social exclusionary experiences, both in their social and university environment.
6. Participants were included only on the basis of informed and voluntary consent. Contents of the informed consent forms were explained to each participant for both the individual and focus group interviews.

7. The dignity of the participants was respected throughout the research project, with confidentiality and privacy being ensured at all times. The researcher re iterated on the use of data for the stated purpose of the study.

8. Careful consideration was given to information accessibility with regards to the informed consent forms. These documents were made available to participants in either Braille or large print. Signing of the informed consent forms was undertaken with the aide of a signature guide which is an assistive device used by persons with visual impairments to aid with signatures.

9. Physical accessibility of the individual and focus group discussions were carefully considered.

3.7. ETHICAL CLEARANCE

Ethical clearance was secured from UKZN to conduct the study. Confidentiality and anonymity was respected at all times and no names were used in the reporting process. The researcher obtained permission of the students to participate and also informed participants of their liberty to withdraw at any stage of the research project. The researchers work was supervised and monitored by Prof. Madhubala I. Kasiram of the Faculty of Humanities: School of Social Work and Community Development at UKZN Howard College Campus.

3.8. LIMITATIONS OF THE RESEARCH

1. Research was undertaken at two UKZN universities namely Howard College Campus and Edgewood Campus, limiting the scope for generalization.

2. Research was confined to visual impairments and thus the findings cannot be generalized to all disabilities/areas where exclusionary practices prevail. This is probably an advantage in that it will specifically relate to this sector of exclusion i.e. visual impairments, as it will offer a rich understanding of the topic under study, without dilution.

3. Human error can occur during analysis. According to Narayan et al (2000), data coding and its accuracy may differ from one coder to another.

4. The researcher had diminished control in the group discussion as opposed to the individual interview.

5. As a result of the researcher's previous employment at UKZN Howard College Disability Support Unit and present employment at Edgewood Campus Disability Support Unit, the researcher was familiar with respondents in the sample. Anonymity could not be maintained as

some of the participants were known to the researcher. Some respondents could have felt uneasy about interacting with the researcher on their lived experiences relating to the social exclusionary processes. This challenge was overcome by the researcher emphasizing the purpose and aim of the study, and how this inquiry and recommendations from participants could support present and future students with visual impairments. At all times the researcher re iterated on the issue of confidentiality and the use of data for the stated purpose of the study.

CHAPTER FOUR
ANALYSIS AND FINDINGS

4. INTRODUCTION

The penultimate chapter of this dissertation contains an analysis of data derived from using a qualitative research methodology. Thick descriptions of social exclusion were explored amongst students with visual impairments. In the first phase (individual interviews) convenience sampling was used whilst in the second phase (focus group discussions) both convenience and availability sampling was used as the participants were easily accessible to the researcher.

The research tool being the individual interviews was undertaken with fifteen students with visual impairments (10 students from UKZN Howard College and 5 students from UKZN Edgewood Campus). Interview schedules used in the interviews were re designed after a pilot run as the researcher found an overlap of some questions. Some questions had sought similar responses and as a result, the interviews became long, hence some adjustments were necessary.

Participants invited to the individual interviews were invited to the focus group discussions. Of the 10 participants from UKZN Howard College only 5 participants attended the focus group discussions with 1 student leaving without reason before termination of the focus group discussion. This participant appeared to be tired and uninterested in these discussions.

Of the 5 participants from the individual interviews at UKZN Edgewood Campus 4 participants attended the focus group discussions. The length of the individual interviews ranged from approximately 40 – 90 minutes whilst the time utilized in the two focus group discussions ranged between 120-150 minutes. The focus group discussions validated information obtained from the individual interviews in that similar responses to that of the individual interviews were noted.

This study was guided by the Anti Oppressive Theoretical Framework since it explored issues pertaining to domination by superior groups, “othering”, social exclusion and binary inclusions and exclusions. The themes were formulated in accordance with the overall objectives of the study outlined in chapter one.

The personal profile of the participants was presented quantitatively with brief narratives of their age and gender, marital status, education, nature of their disability and information accessibility at university.

The key critical questions explored in both the individual interviews and focus group discussions were:

1. What challenges or barriers related to social exclusion were experienced by students with visual impairments in their social environment, external of the university?
2. What challenges or barriers related to social exclusion were experienced by students with visual impairments in their university environment?
3. What recommendations were suggested by students in addressing and overcoming these challenges?

Subtitles were used under each critical question to bring out the insider perspectives of social exclusion as experienced in the social and university environments of the participants. Conclusions and recommendations are discussed in the final chapter.

4.1. PERSONAL PROFILE

The personal profiles of the participants are presented in the form of tables and discussions. The results of both blind and partially sighted students from UKZN Howard College and Edgewood Campuses are presented together.

Age and Gender

Nine males and 6 females were interviewed with ages ranging from 17-above 29 years old..

Table 1 Age and Gender

AGE	MALE	FEMALE	TOTAL
17-20	2	1	3
21-24	2	3	5
25-28	2	-	2
29-Over	3	2	5
TOTAL	9	6	15

Table 1 summarizes the distribution of the ages of the participants with the highest number of participants coming from the 21-24 and 29 and over age group whilst the smallest number of participants fell within the 25-28 age groups.

Some of the personal details shared with the researcher are discussed hereunder to provide a context and background of the participants.

One male participant who was born with partial vision entered university 10 years after completing his Grade 12. This participant was unsure if the university environment would provide reasonable accommodation and had concerns of coping at university.

Some participants upon completing Grade 12 had to first enter the access program. This program is a bridging program for students who have experienced challenges in meeting the requirements for admission into an academic program. This could be one of the reasons for students with disabilities spending many years at university.

Many students with disabilities completed Grade 12 much later in their lives. This was attributed to ignorance and barriers at school, dominance of the medical model of disability, transport inaccessibility and ignorance about disability support at university. This could be due to society not viewing disability from the perspective of the social model of disability which is grounded in Anti Oppressive and Human Rights Theories.

According to Keil (2004) in the Education and Employment Research Report there is an absence of consistency in transition planning from school to Higher Education in Wales. Wright (1997) as cited by Keil (2004) argues that entrance into the adult world for persons with visual impairment may be frustrating and challenging. Hence the researcher argues that this could be one of the reasons for students with visual impairments entering Higher Education later in life.

One participant became visually impaired much later in life and saw university as the only option to emancipate and liberate himself.

Marital Status

In as much as 13 participants had indicated that they were single, some of them had children out of wedlock.

Table 2 Marital Status

Single	13
Married	2
Divorced	-
Separated	-
Widow/Widower	-
Total	15

This study recorded that 13 participants never married whilst 2 were married, one of whom inherited diabetes retinopathy long after his marriage whilst the other was born with partial vision.

Education

This study records that the experiences of participants enrolled at mainstream schools differed from that of those who attended schools for learners with specialized needs.

Table 3 Education

Tertiary Institution	Mainstream Schooling	LSEN Schooling	Total
UKZN Howard College	4	7	11
UKZN Edgewood Campus	5	-	5
Total	9	7	16

Nine students attended mainstream schooling of which 4 were students from Howard Collage and 5 from Edgewood Campus. The remaining 7 students attended schools for Learners with Specialized Needs (LSEN schools) and lived at boarding establishments at their respective schools.

One participant became visually impaired long after completing his mainstream schooling. A note is that the total number of participants recorded here was 16 as 1 participant attended both mainstream school and a school for Learners with Specialized Educational Needs.

Disability

The nature of disability amongst participants addressed visual impairment which included both total and partial vision loss.

Table 4 Nature of Disability

Partially Sighted	11
Blind	4
Total	15

Of the 15 participants interviewed, 11 of them had partial vision, 2 of whom were albinos. One student with partial vision had two degenerative eye conditions which classified her as legally blind but for the purpose of this research has been included in the partially sighted category as she has a minimum degree of vision.

Information Accessibility

This information was established in the manner in which participants preferred to access their information for academic purposes at university.

Table 5 Information Accessibility

Braille	Electronic (JAWS)	Audio Recordings	Large Print	Sighted Reader
3	5	-	10	-

Three participants with total vision loss accessed both the Braille and the JAWS program (Job Access with Word). None of the participants used audio recordings or sighted readers.

Information was made accessible via the reformatting program for all participants by way of Braille, the Jaws program which is a voice synthesized program and large print depending on the visual needs of the participants. Nine partially sighted students requiring large print used the zoom text program which enlarges all computerized text. Having access to computer adaptive software ensures independence and academic support relevant to information accessibility which is important for widening access, participation and success at university.

The themes arising from the individual interviews are discussed hereunder. These themes refer to:

- Abuse of Power by Dominant Groups.
- Violation of Human Rights and
- Visual Impairment as a Confinement.

4.2. ABUSE OF POWER

This study found that 80% (12 participants) endured abuse of power on a social level and interestingly 80% (12 participants) of them experienced this cruelty at a university level as well.

In this study the researcher considered the social level to incorporate the family, mainstream school and the community. Here participants experienced multi dimensional and multi structural abuse at either the family and mainstream school level, family and community level, mainstream school and community level or at all three levels. However 20% (3 participants) did not experience abuse at family, mainstream school and community level.

Findings relevant to abuse of power at a university level suggests that dominant groups at university i.e. sighted students and academics have contributed to students with visual impairments experiencing abuse of power. However, here again the findings of this study show maltreatment by sighted students and academics as participants endured exploitation by both sighted students and academics.

The findings of this study also showed that the process of “othering” created avenues for experiences of powerlessness and voiceless-ness in the family, mainstream school, community, amongst sighted students and academics at UKZN which is elaborated in the following quotes from participants:

"I just do not care when I am 'othered" I just do not feel worth it. Life is about socialization and yet I am excluded and that is why I find no reason to live. It is just not worth it to live".

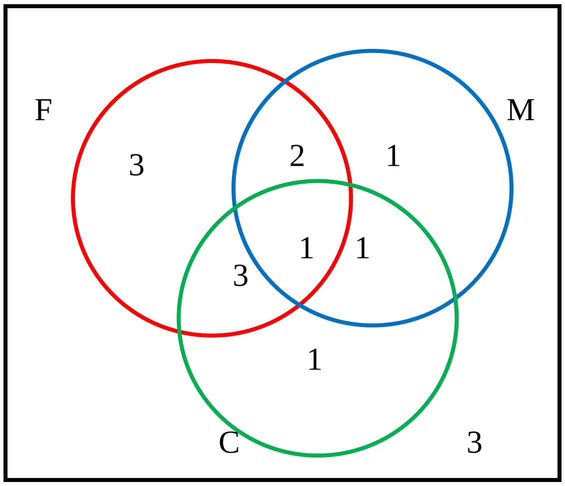
"I do not go out often and grew up in a way to be out of society this is how my mother grew me up and this is why I do not like being with other people".

"I feel very let down because of society's attitudes, it brings me down, I feel stupid and everything that I say is wasted. My self esteem goes right down. Even at student residence meetings I just keep quiet as the last time when I gave comments they all laughed at me".

It was felt that these disparaging remarks left participants feeling personally assaulted, insulted, humiliated and ridiculed.

4.2.1. ABUSE OF POWER ON A SOCIAL LEVEL

DIAGRAM 1: ABUSE OF POWER ON A SOCIAL LEVEL: FAMILY, MAINSTREAM SCHOOL AND COMMUNITY.



KEY: F - Family
M - Mainstream School
C - Community

Diagram 1 speaks to the multi structures i.e. the family, mainstream school and the community that contributed to the abuse of power in the participants social environment.

With reference to the above diagram, this study found that 12 participants experienced abuse of power in the family, at mainstream school and in the community, hence social exclusion is multi structural.

The findings further highlight that some participants endured abuse of power in mainstream school and in the family meaning parents, siblings, grandmothers and extended family.

Only 1 participant spoke about abuse of power both in the community and mainstream school.

In their individual interviews participants expressed experiencing abuse of power in the community and family. These participants saw the community as being their extended family and likened their existence in relation to the Ubuntu Philosophy meaning, a person is who he is because of the genuineness and humanness of other people. They explained that there was no Ubuntu in their communities and that their communities did not provide assistance, care, empathy and support to persons with visual impairments. This issue of the absence of Ubuntu was further supported in the focus group discussion which is elaborated in the following words expressed by the group:

"You get people that don't care, they only care about themselves. Ubuntu depends on the place you are in and the kind of people that are in that place. Some of them have a lot, some people do not have anything and some people only care about themselves".

In the focus group discussion participants felt that Ubuntu was absent, and will be absent forever. This was also discussed by Kasiram and Thaver (2010) where participants in their study referred to Ubuntu as being dead.

Only 1 participant experienced abuse of power at all 3 levels.

Participants expressed that they were often treated like children, excluded from the decision making process at a family, mainstream school and community level. Labelling on a social level was found to be common amongst participants who were called names like *"hey wena", "blind man", "cock eyed", "fix your eyes", "you are clean as you do not use a white cane", "inferior* *person", "incapable", "living at residences for nuns"* and "you cannot see because you look at older persons private parts".

Discussions pertaining to labeling were also a common feature articulated in the focus group. Participants felt that disability was given a low status by sighted persons who also showed pity on them. Society defined what was normal and abnormal and disability was given an abnormal status. Due to this, participants had to be very selective in the manner in which they engaged with able bodied persons. Automatically "othering" crept in as being visually impaired made the person feel that he/she was different from others. The values upheld by able bodied persons led persons with visual impairments to feel excluded.

These findings are consistent with research undertaken by Van Meygaarden (2005) that marginalization is as a result of disability whereby the person with a disability is not taken seriously. This led to a feeling of being wounded right from the inside. This feeling of being hurt from the inside was further perpetuated when a person with a disability was disregarded in society and seen as being less than other persons. Hence the researcher concluded that "othering" was multi structural and commenced at the level of the family and then enters into other structures such as the extended family, mainstream school and the community.

- Family

From diagram 1 it was evident then that the abuse of power was strongest at the family level. Participants expressed a sense of being prejudged by their family members and viewed as incapable of decision making, unlike other able bodied family members.

This was reiterated in the focus group that when a family member had a disability, decisions were always taken on their behalf as though they did not have the mental capacity to take decisions. It was thus expected that these imposed decisions did not allow the person with a disability to own the decision as it may be ill informed. It was also found that younger siblings comments were valued more than theirs, leading to belittlement and a belief that being visually impaired meant being different from the other family members.

This was what the researcher termed automatic marginalization in the family, since ignoring the presence, capabilities, contributions and existence of the person with a visual impairment in the family was viewed as being habitual and a normal phenomenon.

Participants revealed that none of their family members had acknowledged or showed any interest in their good scholastic results. A general lack of interest and support by their families continued into tertiary education. Participants reported that their families preferred it if they stayed at home rather than received an education. They also felt that if they did not have a visual impairment, their families would have been excited and supportive at the prospect of entering Higher Education and that they would have shown more interest and motivated them to study courses like Engineering.

These feelings were confirmed in the focus group where siblings career choices were a priority and not theirs. The family believed a person with a disability must be homebound and collect a State Disability Grant. Participants in the focus group mentioned that the extended family would also pass oppressive comments that were more hurtful than the nuclear family by stating that:

"It would be a waste of money for him to go to university, he is going to fail and he is not going to manage".

This is consistent with Oliver's (1990) findings as cited by Dominelli (2002) regarding decision making as per the medical model of disability.

Hence it became evident that this process of "othering", powerlessness and voiceless-ness found a strong foundation in the family which radiated outwards into the mainstream school and the wider community. The researcher believes that oppression cuts across all social systems. The effects of this double marginality i.e. of having a visual impairment and being oppressed opened avenues for persons with visual impairments to be abused and marginalized by dominant groups very easily.

"Othering" by family members is illustrated in the following quotes from individual interviews:

"For the past 44 years my disability followed me everyday. I am an outsider at home and feel like hanging myself. Othering is very painful and it is not worth living. It is very painful to live like this. Society has impaired me. I cannot take it anymore".

"When I make comments I am told to shut up".

"I do not feel belonged in my family".

Similarly in a study undertaken in Cameroon, (Mayer, 2007) it was found that more than 9% of persons living with disabilities also faced discrimination and exclusion from participation within their own families. They also expressed being victims of oppressive or derogatory remarks and attitudes e.g. being labeled as being of no use and unpromising by their families.

This research also revealed expectations by sighted family members that females with visual impairments must stay at home to do the household chores.

- Mainstream School

Diagram 1 illustrates the number of participants that experienced abuse at the mainstream school level.

Painful memories of emotional and physical abuse at mainstream schooling associated with visual impairments were expressed by participants. This was due to challenges experienced in the classroom because of their visual impairments. Physical abuse by sighted learners and teachers took the form of hiding or being smacked in the presence of other learners and being poked with the metal cap of a pencil on the chin. This physical abuse was related to educators ignorance about visual impairments and the participants inability to access information on the chalkboard or flash cards.

Some responses describing psychological and emotional torment were:

"Due to my visual impairment I could not see the fractions on the chalkboard because of this I was always given a tight smack by the teacher in presence of other learners; the teacher knew that I had a visual impairment".

"My primary school teacher defined me by how I looked. I was always referred to as "blind man". Academically I suffered, lost out in my life in a huge way; I failed 2 years at school. I was considered to be weak and not capable. Going to school was a torture and fear. I often

wondered did I really deserve to be on this earth, I questioned my existence, I had thoughts of running away to a place where it would not be painful for me".

Participants reported humiliation, torture and victimization and internalized these feelings. They did not express their feelings at school as they believed that they were different and so deserved to be undermined all the time. When television programs were being discussed at school, 1 participant reported that he could not make contributions. As a result he was excluded from class discussions by sighted learners and even if he participated he was asked to *"shut up"*. Sighted learners always said *"you are visually impaired you cannot make comments or oppose our ideas".* This alienated and excluded him.

The focus group also corroborated with the individual interviews as participants expressed experiences of exclusion during biology practical lessons. They explained that to avoid any damage and breakage of equipment by learners with visual impairments, the teacher would just give a mark without them doing the practical work. This led to sadness and anger. Not being able to copy from the chalk board was also cited as being very stressful and frustrating.

Participants also reported being dissuaded from being class representatives as sighted learners believed that having a visual impairment did not put one in a superior position and that feedback to the class was feared to be inaccurate.

However the focus group did not bring out the aspect of physical abuse as the participant who mentioned this phenomenon was not present at the focus group discussions.

Other similarities relevant to abuse of power mentioned in the focus group referred to sighted learners having the notion of being superior and able and learners with visual impairments as being inferior and not capable as is relevant to the theoretical perspective in this study. This resulted in loneliness and isolation, and in reading and studying alone. This was further exacerbated by being treated badly and discouraged by teachers.

It was noteworthy that participants who received their schooling at schools for the visually impaired did not report on experiencing this form of abuse as everyone understood and accepted their visual impairment and possible limitations as a result of their visual impairments.

The findings of this study are similar to the study undertaken in Cameroon (Mayer, 2007) where 10% of learners with disabilities were often isolated and maltreated by their teachers and fellow learners and reported as being less important or sub human.

Ferrall (2007) reported that placement is not just about providing reasonable accommodation but also about equal access and participation in the social life of the classroom. Ferrall (2007: 3) referred to this as “visual cultural imperialism” where sighted persons impose their worldviews on others which is oppressive, lacks equality and is potentially destructive to empowering and emancipating learners with visual impairments.

The researcher concluded that ignorance about challenges experienced at mainstream school by learners with visual impairments led to dominant groups abusing their sighted status which contributed to the process of “othering”, powerlessness and voiceless-ness.

- Community

In accordance with the principles of Ubuntu the community should be viewed as being part of the family. Participants reported that the spirit of Ubuntu was absent in that persons with visual impairments were often clearly “othered” and marginalized in the community.

This is similar to findings by Kasiram, Engelbrecht and Landau (2009), Kasiram and Thaver (2010) and Samkange (1980) as cited by Peuplesawa.com (2008) who also noted that a spirit of community care did not prevail in real life.

The majority of the participants felt that the inferior status they were given by society did not prioritize persons with visual impairments as capable.

Participants reported being judged and belittled by sighted persons at a community level, hence participation was narrowed as peers did not believe that persons with visual impairments were mentally capable in any way. Thus a person with a visual impairment was judged by their visual impairment first.

In another facet of abuse of power by dominant groups participants felt that sighted persons believed that persons with visual impairments must use an assistive device such as a white cane to assist with mobility and orientation which participants did not agree with. In the absence of the white cane they were viewed as being *"clean"* meaning able bodied.

In this regard Bagotra, Sharma and Raina (2008) discussed that some persons with visual impairments preferred not to use a white cane as rehabilitation ensured that they use their other senses for orientation and independence.

This issue of assistive devices was further corroborated in the focus group. Sighted persons showed disbelief in visual rehabilitation aiding with orientation and mobility. If there is a visual problem, sighted persons want to see you experiencing visual disorientation. This then made them believe that one had a visual problem.

The researcher believed that the sighted world is ignorant about rehabilitation of persons with visual impairments. With visual rehabilitation, orientation and mobility, a person with a visual impairment can lead a normal life.

This frustration of not using an assistive device was reported by a participant in the individual interview as follows:

"Sighted students feel ashamed of me. Because I do not wear assistive devices I am accepted but when they know that I have a visual impairment then they will say that I will not be able to handle the situation due to my visual impairment".

"People in the community treat us badly. The Sukuma bus is for persons with disabilities, yet I am not allowed to use this bus. The conductors or driver will say- "you are not allowed to use the Sukuma bus as you look clean", where is your white cane. I feel like committing suicide because of societies attitudes".

Participants also expressed that their challenges were not only with the absence of the white cane or spectacles but with seating, information accessibility, driving, reading, unemployment and other activities of daily living. One participant felt that this was largely due to societies reliance on the medical model of disability which led to frustration, dependence, anxiety and powerlessness.

Further reports were that the bank tellers do not give the correct amount of money being withdrawn. Participants were requested to go back to school due to not being in a position to complete the withdrawal form. Similar experiences were also reported at supermarkets when assistance was requested, the normal response was *"go and look for it yourself".* Participants reported that they were laughed at by the community, persons would not join groups that they are in. Furthermore sighted students had the belief that as a person with a visual impairment it was believed that you should not consume alcohol or dance.

In general then the status awarded to persons with disabilities was low. This is elaborated in the following quote from an individual interview:

"The community gives disability a low status. I am not taken seriously by the community. My contributions are never supported by the community. When I make comments I feel useless. No recognition is given to my comments. "Othering" is felt at the community level".

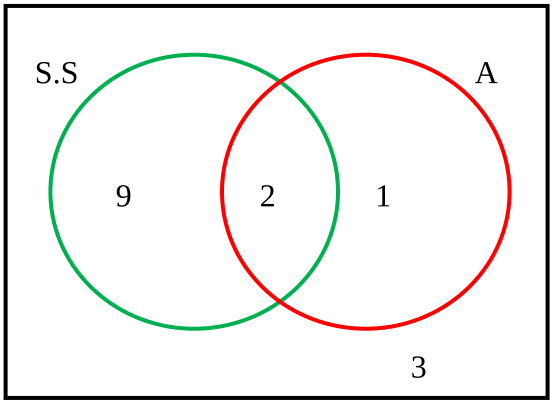
The above then provides evidence that people with visual impairments were discriminated against and endure abuse of power from dominant groups at a community level which aligns with the Anti Oppressive Theory Thus the Ubuntu philosophy at the community level was absent. The researcher concludes that if the Ubuntu spirit and an ethic of care were strongly felt in the community then perhaps the level of cruelty felt at the family level would also possibly decrease. But one wonders if the reverse is true with care commencing in the family and being experienced in the community as well.

Participants in the focus group agreed that people in the community were very self centred. They explained that sighted community officials manipulated processes to benefit themselves. These community officials did not think about marginalized persons and sharing with these persons to improve their lives.

4.2.2. ABUSE OF POWER AT A UNIVERSITY LEVEL

Diagram 2 illustrates how participants viewed abuse of power by sighted students and academics at university level.

DIAGRAM 2: ABUSE OF POWER AT UNIVERSITY LEVEL: SIGHTED STUDENTS AND ACADEMICS.



KEY: S.S - Sighted Students
A - Academics

Diagram 2 shows that 9 participants experienced abuse of power by sighted students, 1 participant by academics, whilst 2 participants experienced abuse of power by sighted students and academics. Three participants were not affected in this manner.

This abuse was experienced in the form of sighted students not allowing students with visual impairments to undertake leadership roles, disrespect for challenges as a result of visual impairment, exploitation, capitalization, domination and imposition of attitudes which finds relevance to the theory used in this study.

- Academic Exclusions

The feeling of loneliness and abandonment was felt when participants had to work alone resulting in feelings of being the outsider. This resulted in the “them and us” undertones being felt. This exclusion was experienced during group work especially with reading, biology practical lessons and mathematics.

Even when they provided correct answers sighted students were unbelieving:

"You said that you are visually impaired then how can you see that".

Sighted students were negative towards students with visual impairments and very often only wanted their points to be considered showing their domination.

One participant expressed that sighted students came with the mentality that:

"She is blind; let's ask her a stupid question".

The present study led to exclusion from establishing and maintaining academic relationships with sighted students because of judgments and derogatory comments made by sighted students.

The study by Matshedisha (2007) too reported on patterns of exclusion, inbred attitudes and stereotypes that perpetuate the sidelining of persons with disabilities in Higher Education.

This study also noted that participants experienced abuse of power by academic staff. Academics very rarely asked the student with a visual impairment questions and even if academics asked them questions their responses would not be acknowledged. Provision of reasonable accommodation was less favoured by academics.
This was evident in the following response:

"There is no excitement with my answer, as a result I do not participate, as my suggestions are never accepted by the lecturer".

One participant reported feeling *"shattered from the inside"* as he was not accepted to pursue his dream of becoming an educator. He was told that he would not be able to write on the chalkboard due to his partial vision. Even his application for social work was declined as there were concerns about how he was going to undertake driving for field work.
Another participant reported on the lecturer's disinterest in getting to know about her disability, thus not facilitating her academic progress in any way.

- Abuse of Power at Student Residences

Participants reported exploitation at student residences especially when students with visual impairments received their disability bursaries or required assistance with daily living activities e.g. cooking, laundry and shopping. Automatically sighted students took advantage of them by pretending to be supportive, friendly and even going to the extent of inviting them out to night clubs just for their money. They exploited students with visual impairments by stealing money from them, for their own meals and alcohol. Sighted students insisted on rewards or money for tasks they were helped with.

The focus group validated the comments made by the participants in the individual interview regarding abuse of power by sighted students at student residence. They explained that when a student with a disability received his/her disability bursary then immediately sighted students become your friends to *"sponge"* off them.

These experiences resulted in feelings of powerlessness and voiceless-ness as a result of abuse of power by sighted students which was also discussed in the focus group. Participants said that they had to be very selective and careful in the manner in which they engaged with able bodied people for fear of being exploited.

Mullaly (1993) too acknowledges that everyone suffers from challenges and shattering experiences, but what construes oppression is when humiliation, hurt and pain is afflicted on a particular group of people as in the case of participants in this study.

As this study noted that the abuse of power and violation of human rights imposed by the dominant group on students with visual impairments systematically reduced the participants and made them feel inferior.

Participants verbalized the following in an effort to reveal how reduced and belittled they felt.

"You are blind and you are drinking, then the sighted student will comment that they are going to the club and want to be with you, we want to have fun with you. This is when the sighted student will make you spend on them. After a few days you will hear the student with a visual impairment saying that "I am getting broke because of other people or that my money is being stolen".

"When you ask for assistance then you must give something in return, this is a dominant feature at student residence e.g. food, money, purchase clothing on your fashion account or they will say" how is your fashion account ".

"The sighted student will pretend to love you or make you feel loved or even let you know that someone is there for you, but this is just not the case as the sighted student is manipulating and capitalizing on the student with a visual impairment for their gains".

Other issues relevant to abuse of power referred to exclusion from student residence meetings, notices at student residences not being in accessible format, absence of integration at student residence events, sighted students making decisions for students with disabilities and being excluded at social events as explained below:

"At my student residence I am the only person with a disability. Due to my visual impairment, I am slow at social events. When I assisted with serving food at these events people will say "take a hike" and am asked to sit down. I feel stupid because they think that I am dumb. These dominant groups do not approve of my disability as I must work at the pace of non disabled students or take a hike".

In the life cycle of blindness, persons with visual impairments have been taught to be helpless, incompetent and inferior and this comes with consequences. Low expectations about abilities of persons with visual impairments flow directly from and accompany feelings of negativity and inferiority.

Participants reported that residences for students with disabilities were referred to as *"nursing homes, tunnels, institutions, hospitals or homes for nuns".* Sighted students believed that female students with disabilities living at these residences do not have boyfriends and hence live a life of celibacy.
This labeling led to situations of feeling demoralized and different and exacerbated the "othering" process.

Students also endured derogatory remarks from sighted students who commented on smells emanating from residences that accommodated students with disabilities. This was revealed in the following made during the individual interview:

"Residences for students with disabilities are smelly and yet the same cleaning chemicals are used at all student residences".

This ill treatment by sighted students left the participants feeling inferior and de valued as disability was likened to something that has a bad odour so that one had to create a distance from persons with visual impairment.

This was also discussed in the focus group where residences for students with disabilities smelt like hospitals yet the same cleaning chemicals were used for all residences. Participants felt that just because it was known that students with disabilities live at certain residences this comment was said. Yet at these very residences if able bodied persons did not know of students with disabilities being accommodated here, smell would not matter. This they believed provided pathways for disability to be viewed as an illness and as being inferior.

4.3. VIOLATION OF HUMAN RIGHTS AT A UNIVERSITY LEVEL

International, National and Local legislations all speak to issues relevant to protection against oppression, the worth and dignity of a person, respect, tolerance, inclusion and widened participation which is located within the Anti Oppressive Framework.

In this study the voices of the participants highlighted sexual exploitation and disrespect for difference by sighted students as phenomena that contributed to the violation of participants human rights.

One participant experienced the violation of her human rights at all three levels i.e. by being sexually exploited, excluded from participation and being shown disrespect for her visual impairment by sighted students.

Violation of human rights in terms of disrespect for difference was experienced by 10 participants, whilst 5 participants endured being denied participation by sighted students either at student residences, biology practical lessons, group study or reading groups.

As this is a qualitative study, it was important to hear how participants felt about the violation of some of their human rights. The themes that unfolded were:

1. Sexual Exploitation and
2. Disrespect for Difference by Sighted Students.

4.3.1. Sexual Exploitation

Central to the Human Capabilities Approach is not dying prematurely, or before one's life is so reduced that it is not worth living. The respect for our body speaks to women being protected against violence, enjoying opportunities for sexual satisfaction and for making decisions relevant to reproduction (Nussbaum, 2002).

The following responses from some participants suggest a violation of their human rights or a violation of the human rights of other students with visual impairments in sexual and interpersonal relationship encounters.

The following was mentioned by some participants on their knowledge of students with disabilities being exploited for sex.

"I am powerless to practice safe sex".

"Sighted students exploit persons with visual impairments especially albino's, for sex as they are curious to know whether persons with visual impairments "taste" differently during sexual encounters".

"A female with a visual impairment will get all excited when she has a date with a sighted person, she will thereafter find that she is pregnant and that the sighted partner has disappeared".

"Sighted persons have a tendency to assess your personality and if you are found to be easy going then they will ask you for sexual favours".

Unfortunately, sexual exploitation was not discussed in the focus groups. Possible reasons for this could be that those participants that shared experiences of sexual exploitation in the individual interviews were absent in the focus group or the researcher sensing discomfort and thus not prompting further discussion.

These responses clearly violated and denied a person their basic human rights which according to the United Nations Declaration on Human Rights (1948) and Section 10 of the South African Constitution (1996) referred to respect and protection of ones dignity. The researcher believed that this violation occured because it benefited the agent or dominant group to believe that persons with visual impairments can serve as a "ready supply of labour" (Mullaly, 1993:158) to be subservient to the dominant group.

Emmet and Alant (2006), Graham et al (2010), Traustadottir (1990) and Wendall (1989) as cited by Dominelli (2002) also discuss domination by able bodied persons and male hegemony as exacerbating womens oppression in society.
Participants endured multi marginalities and prejudices over and above sexual exploitation namely poverty and economic exclusion.

This is elaborated in the following statements by participants:

"I became pregnant and a nurse asked me how I became pregnant, as I am visually impaired. I felt bad at this comment".

"I went to campus clinic for some pills. At the clinic they asked me why I need the pill as I am visually impaired and not supposed to have the pill".

4.3.2. Disrespect for Difference by Sighted Students

This study confirmed that participants were shown disrespect due to their visual impairment. This disrespect for difference was evidenced in use of the disability computer LANs, computer assisted technology and the absence of other reasonable accommodations. This resulted in non participation, exclusion, the "them and us syndrome" and the sidelining of the voices of students with visual impairments.

- Computer Assisted Technology

In view of specialized computer assisted technology required by students with visual impairments, separate computer LANs are dedicated to able bodied students and separate computer LANs for students with disabilities. Participants reported that able bodied students use the disability computer LANs when their LANs were full and in addition will switch off the JAWS program/settings used by blind students to suit their needs. When these able bodied students complete their work at the disability computer LANs, they walk out without adjusting or resetting the computer programs required for information access by persons with visual impairments. This resulted in incomplete work, frustrations and delays in submissions. Participants expressed disbelief at being excluded and disrespected by sighted students from their own computer LANs.
A further concern was that sighted students would take up space at the disability computer LANs and as a result computers were unavailable for students with visual impairments. This resulted in students with visual impairments begging for space to use the computer.

In the focus groups participants also vocalized frustration and viewed sighted students as selfish and disrespectful. To add insult to injury these sighted students brought their friends to use computers and printers in the disability computer LANs. Sighted students would get angry and abusive when asked to leave the disability computer LANs. Participants further reported that the University was ignorant about this despite having managers to regulate the proper use and repair of computers in all but the disability computer LANs. Students with disabilities have been told that a manager cannot be appointed to the disability computer LANs as it is too small.
These frustrations were depicted in the following statements:

“We cannot even use the disability computer LANs as sighted students will use our LANs when their LANs are full. They will occupy our spaces and turn off or change the JAWS or Zoom Text program/settings and as a result we cannot complete our work or experience delays in submitting our work”.

“I cannot stay at student residence over weekends to do my work and use the library as it is too noisy. In view of my degenerative visual condition I rely on my sense of hearing and hence use the JAWS program. When I tell sighted students to lower their voices as I am using the JAWS program, in return they will say, “What is JAWS, what is JAWS”?

Matshedisha (2007) also referred to barriers students with disabilities experience in preventing access to participation in higher education. This is a violation of a person’s human rights as access, participation and inclusion were denied.

One participant in both the individual interview and focus group referred to the term *“inclusive discrimination”* which the participant explained as the university including students with visual impairments with resources but simultaneously excluding and discriminating against them due to these resources not being made accessible.
The following statement referred to *“inclusive discrimination”:*

“This shuts you down and makes you believe that you are at the bottom of the queue. You just have to soldier on. It demoralizes you. You may think that you are active but you just become deactivated. What is the use I may as well not be part of society with all its opportunities, it crashes you. This is a life long struggle there is no end, you cannot give it a time period because continuously every year and every time there will be challenges and an accumulation of problems, you will just have to go on”.

This was highlighted in the focus group as well where participants agreed that *“inclusive discrimination*” exists at the university. With regards to reasonable accommodation participants believed that consultation with students with disabilities was necessary.

- Absence of Reasonable Accomodation

Participants expressed that structural inaccessibility further exacerbated the academic exclusionary process which in the researcher's opinion promoted a narrowed focus on academic access and participation. These findings were further validated in the focus group discussions which referred to:

- Absence of voice recorders in lifts as Braille signage was insufficient since this *"did not provide an indication at which level the lift stops. Very often you can get off at the wrong level and get lost".* Participants were thus rendered powerless and voiceless by sighted persons, the University policy and planning structures which made decisions for persons with visual impairments.
- Absence of lifts in some buildings impacted on punctuality or non attendance at lectures.

One participant who is blind was nominated to serve on the SRC. Reasonable accommodations were not instituted for this participant. As a result the participant could not make valuable contributions, with sighted students not having faith that a student with a visual impairment could make valuable contributions. This participant expressed how oppressed, marginalized and discriminated he felt. In his words he experienced *"hell and trauma*". He further reported that at the SRC level the *"them and us"* syndrome is acutely prevalent.
This is indicated in the following statement.

"If I did not have a visual impairment I would not have been treated badly at SRC level. SRC is regarded as representing some students and not all students".

The issue of reasonable accommodations was also discussed in the focus group.

It is evident then that disability is really a cycle of turbulence. Society does not realize the amount of pressure a person with a visual impairment has to endure to overcome societal and architectural barriers imposed by dominant groups. Yet dominant groups have the tendency to label and name disability as the problem rather than structures in society that perpetuate this oppression.

Participants further reported that this turbulent cycle of oppression did not stop at the social and university level but permeated into the workplace to further devastate their lives. Their future too was perceived as bleak.

The abovementioned practices are not in keeping with the World Declaration on Higher Education (1998), Article 26.1 of the Universal Declaration of Human Rights (1948), the United Nations Convention on the Rights of Persons with Disabilities (2006) and the international slogan on disability “Nothing about us without us” which alludes to equal access, anti discriminatory practices and consultation and uninterrupted engagement of persons with disabilities.

Hence it is the researcher’s intention to provide recommendations that will address strategies to widen access, participation and inclusion so as to avoid a situation of nihilism meaning hopelessness.

- Denial of Participation by Sighted Students

Participants in both the individual interviews and focus group reported experiencing exclusion at lectures and in study group work, as discussed earlier.

One participant expressed feeling very excluded and discriminated against because it seemed that only sighted students had contact with the lecturers. This participant relied on her sense of hearing to capture the essence of the lectures. She had to constantly inform sighted students to lower their voices as she had to use her sense of hearing to stay connected at lectures. She explained:

“As a person with a visual impairment I rely on my sense of hearing at lectures, sighted students are noisy. When I ask them to tone down they will say that this university is not for blind people”.

Students with visual impairments preferred to study alone instead of being part of a group. The researcher asserts that dominant groups as in this context of sighted students did not understand the challenges experienced by students with visual impairments in group study, hence exclusion was inevitable.

This was aptly described as:

"I feel the vibe in group work. I do not feel confident; I do not think that I am good enough to make responses that will be accepted".

"It is very painful as I would like to form a study group with sighted persons because I have visual problems. Because of this I will not be able to be part of a study group because sighted students regard me as a negative person as I cannot observe as they observe".

This study also found that leadership positions taken on by the participants were limited as sighted persons expressed their lack of confidence in their leadership activities. The following alludes to this:

"I was elected as a class representative in 2010. They said that I have a problem with my eyes and hence cannot be a leader. The class asked me to step down as a leader and this did not make me feel normal".

"I was nominated as a class representative and one of the nominees mentioned my visual impairment and as a result no one voted for me. They found that I will not be able to attend meetings and will not be able to represent the class. A sighted student was chosen to represent the class. This made me realize that sighted students do not know about visual impairments. If this ever happens again I will take a stand and make my voice heard".

This is consistent with Graham et al (2010) that the medical perspectives of the disability model did not refer to discrimination and social exclusion as a lived experience encountered by persons with disabilities, but emphasized physical/mental deficit or abnormality.

It is evident then that students with visual impairments endured oppression as a result of their visual impairment and hence there needed to be a paradigm shift from the medical model to the social model of disability. As Willison (2005) rightfully argued that the medical model of disability was to be blamed for these exclusions and non participation.

Furthermore, legislations as per Articles 3 and 7 of the United Nations Declaration of Human Rights (1948) out rightly condemn disrespect for life relevant to torture, cruelty, inhuman or degrading treatment.

4.4. VISUAL IMPAIRMENT AS A CONFINEMENT

Hughes and Paterson (1997) mention that according to Foucault (1967) persons with disabilities are imprisoned and are refused entry, opportunities and access to what is enjoyed or made available to the dominant groups.

This study found that participants expressed their visual impairment as confining or limiting them on experiences relating to academic development, living at student residences and poverty alleviation and prevention.

One participant explained that:

"Visual impairment is a confinement, it channels your behaviour. It tells you where to sit and what you can do and what you cannot do".

Participants discussed visual impairment as confining their academic development. They discussed feeling abandoned, doing things on their own, working on their own and sighted persons not understanding reasons for requesting assistance.

They explained how their visual impairment disorientated them during reading as time was required to refocus when reading. This is how one participant put it:

"When I look away from my notes I need time to refocus as I do not know where I stopped. Not being able to focus and light, affects my reading badly".

"When I study maths I need the use of my eyes. We use rows 1, 2 and 3 when doing maths manipulations. I need to manipulate the rows to get the correct answer and as a result of my visual impairment I mix up my rows and my answers are wrong".

"Even when information is reformatted, the normal text will say see page 6 but when reformatting is done either to Braille or JAWS the page numbers change, and when we go to page 6 that particular set of information is not on page 6 but rather on a page further on and hence it is difficult to make references".

What defined a person with visual impairments as being different from others is the way society has normalized them. Through this study it became evident that disability, as confinement, channels behaviour or activities, disability dictates what you can and will be able to do.
This is what the researcher referred to as automatic "othering" as these situations make you feel and behave differently and channeled your behaviour to take on the characteristics of the outsider.

A further view held by participants was that the dominant values of sighted persons created exclusionary processes resulting in needing to develop specific ways of engaging with sighted students. Thus participants reported choosing to exclude themselves from group study as they were always judged by sighted students. It was evident then that visual impairment led to confinement.

Furthermore this study noted that disability confined participants to choices of modules/degrees since some are simply too visual e.g. media studies, as one participant reported that:

"Exclusion is experienced in courses and nothing is being done to accommodate us. They say that we cannot do media studies because it is too visual and that we will not cope. It is just a matter of not wanting us in media studies. They can give us copies of CD's to listen in class we can then take this home and get someone to explain to us".

Another participant was interested in information technology but due to the severity of her visual impairment, she had to choose a different module.

Disability as a confinement and its impact on academic development was also discussed in the focus group with reference to similar challenges such as information accessibility, inaccessible venues, lifts that do not work discriminatory attitudes by sighted students and not getting assistance in the library and returning with no book.

This exclusion of participation from preferred modules/courses is also discussed by Odendaal-Magwaza and Farmen (1997) and Hall, Healey and Harrison (2002).

Visual impairment as a confinement was validated in the focus group as participants expressed distancing themselves from sighted students. This was further expressed in the questions asked by participants such as:

- *"How do persons with visual impairment live throughout the day"?*
- *"How do they interact with people"?*
- *"Do they really deserve to be here"?*
- *"How do they eat"?*
- *"Who bathes them"?*

These questions revealed that participants in the focus group felt that this was about "othering" as all persons have a right to want the same things but because you have a visual impairment you cannot have it. Even with regards to disability as confinement, participants expressed that Ubuntu was absent.

4.4.1. Marginalized Living Experiences at Student Residences

Living experiences also confined participants hence exacerbating their social exclusion. One participant reported sharing a room with 3 other sighted students who refused to believe that he had a visual impairment. He was forced to sleep without studying as these sighted students refused to have the light on whilst the participant was studying. He could not study in the designated study room as bulbs required replacement.

Participants expressed further confinement relevant to marginalization at student residences referring to:

- Sighted students leaving the kitchens very "*messed up*" and as a result of the visual impairment it became difficult to work in the kitchen. Good food is mixed up with dirt. As one participant mentioned that "*It is difficult to work like this as I cannot see the mess".*

- Sighted students will drop water on the floor; due to visual impairment this cannot be seen. One participant reported being terrified of falling as a result of wet floors.
- Toilets are messy and dirty and at night the electricity stops, as a result this participant did not even know when he has used a clean or messed up toilet.
- The laundry is upstairs; participants reported stumbling down the stairs with clothing in the laundry basket. This exacerbated dependency on sighted students for the use of the laundry. Without assistance, washing of their clothing remained a challenge. Due to sighted students leaving their clothing in the washing machine or dryer and going shopping, participants did not see this and as a result, all the laundry was mixed up and sighted students assumed it being stolen by students with visual impairments.

These experiences left participants feeling de-humanized and locked up by their visual impairment, disrespected, angry and frustrated. This clearly indicated an imprisonment culture created by visual impairment, sustained and maintained by the dominant group.

Participants reported on the following:

"I live in a residence for able bodied students and have not made my voice heard. I am very uncomfortable here. Due to my visual impairment I break things very easily and this residence is not spacious enough for students with disabilities. I pleaded to change my residence but the superintendent just gave me hell. I do not have friends here".

"The laundry needs upgrading, all the old machines when replaced goes to the disability laundry this shows that students with disabilities are second class. There are 2 TV rooms, 1 for able bodied students and another for students with disabilities. The disability TV room has wheelchair access and we have old TV'S and do not have control over what we watch on TV as only the main TV room has DSTV. Our programs are controlled by able bodied students in the main TV room. As a result we become powerless and have to watch the programs that able bodied students watch".

This marginalization and denial of basic rights has been documented by Oliver (1990) as cited by Dominelli (2002).

The following also represents how social exclusion as a result of visual impairment led to confinement:

"At student residence you are differentiated according to ability. We are excluded from groups of students that come from privileged environments. Besides having the model C versus the rural schools we have the able bodied students versus students with disabilities groupings. Students with disabilities are automatically put into the rural schools groups as we are not supposed to be with students from privileged environments".

This was further elaborated on in the focus group where students with disabilities were confined to inclusion only with students from rural based schools. Students from ex Model C schools were regarded as privileged and did not understand that students with disabilities are human beings. These students just did not care about challenges experienced by students with disabilities.

"I am furious about the living arrangements at university as the house committees do not want to combine residence functions with residence that accommodate students with disabilities. It is believed that if we join them on a social level then they will look funny as we are different in appearance. House committees see themselves as being elitist and that if they mix with students with disabilities they will lose their status and look clumsy".

These findings resonate with the writing of Narayan et al (2000:229), Klasen (1996) as cited in Shera (2003) who agree that ideologies of dominant groups give "birth" to oppression, rejection, inequality and marginalization, because persons with visual impairments are not in a position to conform or are unwilling to conform and as a result cannot belong to or identify with the dominant group. These scholars further reported that social exclusion focused on difficulties, disadvantage, challenges and barriers experienced by certain groups, which prevented them from being engaged in equal and meaningful participation in the social, economic, cultural and political life of societies. Adams (1999) in Shera (2003:8) in fact stated that marginalized persons accept and "give in to" the ideologies imposed by dominant groups and that these subordinate or marginalized groups legitimatize the rules of dominant groups.

In this regard it is evident then that visual impairment as a confinement is not only experienced in the family, educational and community structures but is also viewed as a confinement in terms of classism. Visual impairment as a confinement defines the class and geographical structures in terms of exclusions and inclusions, as experienced in the participants lived experiences.

4.4.2. Confinement as a Result of Disability and Poverty

This study found that disability and poverty were related since participants reported that disability entertained poverty as it opened pathways for unemployment, begging, experiencing transport constraints, deprivation of education, strained marital and family relationships and dependency on employed family members for finances. The finding that poverty entertained disability was discussed in terms of inadequate health care resources and absence of nutritious food exacerbating the challenges experienced by visual impairment.

This study found a dualistic or parasitical relationship between disability and poverty i.e. disability provoked poverty and poverty provoked disability in a reciprocal relationship. This is in keeping with studies undertaken by Lwanga-Ntale (2003) and Rust and Metts (2006), Thomas (2005), Alcock (1993) and Narayan et al (2000) who reflected on the companionship between disability and poverty.

Some of the responses cited by participants indicating the relationship between disability and poverty referred to:

- Inability to gain employment as a result of visual impairment. Employers did not believe in the capabilities of persons with disabilities. This contributed to one of the reasons why persons with disabilities are very poor. It was further suggested that without opportunities for employment, a person with a disability will never have the opportunity to break the cycle of poverty. Eight participants feared that due to their disability they will be unsuccessful in gaining employment.

- One participant reported that when her visual impairment status was disclosed on her curriculum vitae this immediately deprived her from getting to the interview stage as *"prospective employers believe that due to having a disability the brain does not function- so how can you achieve"?*
- Both the individual interviews and focus groups emphasized poverty and how it produced unemployment and financial dependence on the family.

In the focus group, participants vocalized their fears relating to visual impairment and unemployment and the relationship between visual impairment and poverty. This was evident in responses that alluded to:

- Dependency on transport.
- Employers sidelining persons with visual impairments in the open labour market.
- Dependency on family for their basic needs.
- The continuing cycle of poverty leading to a life of begging. Participants believed that eventually their children will be exposed to a life of begging.
- Suffering of the entire family especially children.
- Stress as a result of a *"hand to mouth"* existence.

Participants expressed that persons with visual impairments who succeeded are those with financial stability. Without financial stability the chances of success were bleak as the purchases of specialized equipment e.g. computer adaptive software and reading magnifiers are almost impossible. Participants further believed that even with a PhD, the likelihood of employment was greatly diminished. Very often even if employment was obtained, it is usually one of a low paying job with transport constraints.

As one participant reported that:

"Very few persons with visual impairments get permanent positions. Usually we get low paying jobs, transport is so expensive. We will usually have to take the Mozzie cab. One moment you think that you are going forward i.e. you have a job but the same job pushes you back into a cycle of poverty".

Participants further reported that experiencing poverty as a result of visual impairment reduced a person to the status of being a child who has to go to his parents for assistance all the time. The same has been documented by Thomas (2005).

This was how one participant felt:

"Even if you need something it is like being a child where you have to go and ask your mother and father all the time. "I am going to university can you spare me R10". You have to ask all the time. This affects me as I have two children- I do not even have money to buy sweets for my children. This makes me feel useless and senseless".

This study also provided evidence of the relationship between poverty and disability in the following expressed concerns.

Deterioration of vision due to the unaffordability of glasses, other assistive or optical aids to assist with independence was prevalent. As a result one participant struggled at school which impacted on his academic performance and was stripped of leadership positions and was not in a position to complete his tests and examinations. Further, his social relationships suffered.

It is evident then that disability does not only lead to poverty but that disability and poverty provided prompts that erode the social and educational life of a person with a visual impairment.

Experiencing poverty as a result of disability reduced participants to a state of uselessness. This cycle of financial dependence cannot be prevented. Due to unemployment there was an expectation that their children will be exposed to begging. The researcher argues that this perpetuates the vulnerability of children. Furthermore if you are married, this suffering was extended to the marital and parental subsystem.

These findings suggest that disability leading to poverty extended beyond individual suffering and infiltrated into the family unit, a sentiment reiterated by Lwanga-Ntule (2003). Poverty following them in the future was feared.

The following is what participants reported on in relation to poverty and visual impairment in the future:

"It scares me at times what will happen when I am totally blind: were I am going to be: were will I work: how will I get to work. This is what scares me will there be work for us - imagine a blind teacher teaching a class of sighted students - I may know my knowledge but I have never seen a blind teacher teaching a class of sighted learners. What can I really do without my eye sight? I think: why the hell I am here, why am I here at university. It gets me down because I do not know why I am really here".

"Home and university smell of poverty. Poverty and disability is linked. On campus you sleep without food, then you go home and there is no food, you come back to campus and there is no food. It is the same thing".

One participant explained that poverty began when as a child you have a visual impairment. Parents felt ashamed to send their child with a disability to school. These children were always kept inside and as a result the child was never educated. This is similar to findings by Yeo and Moore (2003). These children received grants which were never used for their needs. As a result the child ended being powerless with no education and ill treated in the community.

This finding also emerged in the focus group. In addition to school fees, extra money was required to pay towards boarding fees and assistive and or optical devices and because this is unaffordable many parents opt to keep their child with a visual impairment at home. As a result the child would not receive quality education and was doomed to a life of poverty and no future.

Furthermore, participants expressed that due to being visually impaired a child cannot readily seek a transfer to mainstream school equipped with relevant technology for learners with visual impairments. There was a constant struggle with accessible transport in rural areas. As a result of this, these children were left to stay at home with no opportunities of breaking the cycle of poverty.

This was consistent with findings related to multi marginalities by Yeo and Moore (2003). Disability and poverty clearly indicated the multi marginalities and prejudices that persons with visual impairments endured as a result of the reciprocal relationship between disability and poverty. These factors further entrenched social exclusion, marginalization, powerlessness, voiceless-ness and “othering” of persons with visual impairments.

4.5. CONCLUSION

The findings of this study clearly indicated that social exclusion as a phenomenon was experienced by students with visual impairments in their social and university environments. Furthermore the dominant groups at UKZN, family, mainstream schools and the community have all reproduced and contributed to participants experiencing social exclusion in the form of abuse of power, violation of human rights and visual impairment as a confinement which forms the core of the Anti oppressive Theory.

As Mullaly (1993) stated, oppression does not happen by chance. The oppression agenda is created and executed by dominant or superior groups who will continuously reproduce oppressive stances.

The researcher hence concluded that dominant groups as in this instance sighted persons, thrive or attach themselves to persons with visual impairments to execute or find gratification in their role as oppressive opportunists or oppressive parasites.

The findings of this research suggest that visual impairment must not only be viewed as abuse by dominant groups, violation of human rights and visual impairment as a confinement but as visual impairment being a vicious cycle as well. It permeates social, personal, financial, educational and legislative boundaries. There is no escape from this exclusion and oppression is likened to life long incarceration of the person with a visual impairment.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5. INTRODUCTION AND OVERVIEW OF FINDINGS

According to Dominelli (2002), the basic tenet of Anti Oppressive Theory is to create meaningful social relations for marginalized and excluded people within an anti oppressive framework that addresses full and equal participation, access and inclusion at all levels. To this effect the researcher noted that Anti Oppressive Practices embraced holistic interventions by taking cognizance of the oppressed person's environment within which this study locates their social and academic lives. Hence this study is of relevance as it provides an inside perspective of social exclusion as experienced in participants social and university environments.

This study provided evidence to show that persons with visual impairments endured exclusions, poverty, abuse, violations and confinements perpetuated by social structures e.g. family, mainstream schools, community and university. These social structures ought to physically include them but in reality widens the social exclusionary process. This study showed the sequential movement of the social exclusionary process within the family, mainstream school, community and the university as experienced by persons with visual impairments. Hence the researcher argues that social exclusion in addition to it being multi dimensional as documented by Dominelli (2002), Shera (2003), Shucksmith (2001) and Young (2003), is also multi structural.

The overall conclusion provided by the researcher is that persons with visual impairment are not the cause of their oppression but rather that it is the physical, emotional and social construction of visual impairment by sighted persons where social exclusion finds its roots. This research also found limited adherence or attention to legislations pertaining to disability, intolerance, human rights and social justice issues.

This qualitative study explored and heard the inside voices of such violations as perpetuated by social exclusionary processes. The data analyzed in this study was derived from an interview schedule with 15 participants and focus group discussions with 9 participants from UKZN's

Howard College and Edgewood Campuses. Most participants had varying degrees of partial vision and some participants were blind.

The main objectives of the study are repeated below.

5.1. RESEARCH OBJECTIVES

The overall aim of this study was to explore social exclusion as experienced by students with visual impairments at UKZN.

The objectives pertinent to this aim were:

1. To explore challenges or barriers related to social exclusion in their social environment, external of the university.
2. To explore challenges or barriers related to social exclusion in their university environment.
3. To explore recommendations made by students with visual impairment in addressing social exclusion.

In this chapter, challenges and conclusions are discussed in accordance with the themes. However specific recommendations pertinent to specific themes and overall recommendations are discussed together at the end to avoid undue repetition. These recommendations were derived from what participants suggested and from the researcher's critical analysis.

5.2. CHALLENGES, CONCLUSIONS AND RECOMMENDATIONS

Several areas of challenges were uncovered in the participants social and university environments which referred to abuse of power, violations of human rights and experiences of visual impairment as a confinement.

Conclusions, participant recommendations and recommendations by the researcher will be discussed under the main objectives of the study.

5.2.2. ABUSE OF POWER

The researcher found that in addition to abuse of power by sighted persons being multi dimensional (Dominelli, (2002), Shera, (2003), Shucksmith, (2001) and Young (2003) it was also seen as being multi structural in that social exclusion had the power to deposit itself in structures pertaining to the family, mainstream school, community and the university. The abuse of power in these multi structures is what the researcher concluded as being structures perpetuating oppression or cyclic oppression. Thompson (2001) in his PCS (Personal, Structural and Cultural) Model of oppression provides evidence of this.

This study found that the incidence of abuse of power in both the social and university environment was found to be high with both the social and university environment showing equal but different experiences of abuse of power (abuse of power experienced by 80% of the participants in both social and university environment).

5.2.2.1. ABUSE OF POWER ON A SOCIAL LEVEL

- Family

The researcher found that the roots for social exclusion were deeply embedded in the family structure and hence social exclusion was first embraced or experienced at this level. To explain further this research found that oppression started off with the parental sub system and moved to the sibling sub system, showing further movement into the extended family and friendship subsystem. In view of this the researcher is of the opinion that social exclusionary processes within the family portrayed a sequential movement or was systemic in nature. As a result family relationships were eroded; decision making powers by the person with a visual impairment were lost and emotional abuse was experienced. It was evident then that there was a strong presence and influence of the medical model of disability in the family system. Hence the researcher concluded that automatic marginalization and automatic "othering" was prevalent here as without any effort, the person with a visual impairment embraced social exclusion as inescapable. The researcher argues that automatic marginalization and automatic "othering" perpetuated by the family inevitably led the family to believe that visual impairment be associated with incapability, emotional and financial abuse (disability grants), ineducability, abnormality, isolation and inferiority. Van Meygaarden (2005) also found that families reaction to visual impairment may impede success and create avenues for stigma and stereotyping of persons with visual impairments.

Studies by Emmet and Alant (2006), Graham et al (2010), Traustadottir (1990) and Wendall (1989) as cited by Dominelli (2002) confirm that women with disabilities experience oppression as a result of domination by men. However, this study found that abuse of power within the family highlighted the reality of sighted women oppressing women with visual impairments. As Dominelli (2002) asserts that marginalized persons can be "othered" simultaneously, as in this study, Women and visual impairments. It can be concluded then that it is not only able bodied males that oppress women with visual impairments but that able bodied females also oppress women with visual impairments. The researcher further believes that the defining characteristic of oppression for the able bodied female oppressor was visual impairments.

- Mainstream School

This research found that the mainstream school as a social structure hosted social exclusion which perpetuated humiliation, emotional and physical abuse victimization, non participation, labeling, rejection, isolation and academic failure. These factors left learners with visual impairments feeling "othered", powerless and voiceless which shows relevance to the Anti Oppression Theory.

This study further found that Ignorance about reasonable accommodations as in information accessibility and alternative teaching strategies in classroom instruction left learners with visual impairment to endure emotional and physical abuse as well. In view of this it was clearly evident then that sighted educators and learners assumed the status of the dominant group also known as "insiders" as mentioned by Dominelli (2002). These sighted educators and learners used their "insider" status to prevent learners with visual impairments from experiencing equal access and participation. This dominance and abuse of power also prevented learners with visual impairments from feeling safe and secure in an environment that is supposed to nurture and respond to challenges in a way that builds upon their capabilities, worth and dignity.

The researcher argues then that if this abuse of power is not halted at a mainstream school level, then the opportunities for dominance may be carried through any other social structure such as university or the workplace. This conclusion is supported by findings by Howell and Lazarus (2003). The researcher argues that in spite of this dominance, limited adherence to or lack of attention by educators to the intrinsic value of the social model of disability, legislations pertaining to human rights, disability and inclusive education policies appear to be directly linked to the social exclusionary process.

This research adopts and supports an inclusive education approach to education as supported by The White Paper on Special Education (2001) which documents inclusionary processes in education.

- Community

It was clearly evident that oppression did not miss an opportunity to infiltrate into the community which is a social structure that was viewed as being like family. This research found that participants endured marginalization, discrimination, "othering", powerlessness and voicelessness in terms of decision making and participation to promote community upliftment and success. This research also found that the community showed further ignorance, disbelief and suspicion about visual impairments in the absence of the white cane. The absence of the white cane resulted in persons with visual impairments as being *"clean*" and not deserving of the special Sukuma bus which is an accessible transport facility for persons with disabilities. In view of this the researcher assumed then that the use of a white cane by persons with visual impairments was associated with dirt.

The researcher concluded that this intolerance, disrespect and violation is largely due to limited awareness and education on the value of visual rehabilitation as well as limited attention given to the legislative dimensions of The United Nations Convention on Human Rights (1948), The United Nations Convention on Disability (2006), and The South African Constitution (RSA, 1996) all of which being located within the anti oppressive, human rights and social justice framework.

This research found that it was not only the family structure but the community health structures where female health professionals oppressed women with visual impairments regarding their reproductive rights and consented sexual relationships. This was seen as perpetuating discrimination, isolation and exclusion from health structures that were supposed to promote health education, counseling and support. As with the family structure, this finding supported the view then that it was not only able bodied men but able bodied professional women who contributed to furthering the process of social exclusion and submissiveness that women with visual impairments endured. There is evidence to reflect on a relationship between females with visual impairment and social exclusion as perpetuated by sighted females.

5.2.2.2. ABUSE OF POWER AT A UNIVERSITY LEVEL

- Academic Exclusions

It was gleaned from the findings of this study that academic exclusion as a result of sighted persons viewing visual impairment as a reason for exclusion led to judgmental attitudes, disrespect for worth and dignity, rejection, fear of maintaining and establishing relations, loneliness, isolation, abandonment, embarrassment and exclusion from academic structures viz. group work and group study which gave rise to the "outsider status". The dominant status of sighted persons was used as a powerful tool in fragmenting the academic lives of students with visual impairments. Hence disability was given a low, inferior and abnormal status by sighted students.

This was largely due to ignorance about visual impairments, the prevalence of the "them and us" hierarchy and the impact of the medical model of disability. Sighted persons related visual impairments to incapability and developed structures and resources around them to only accommodate sighted persons. Once exclusions were established and maintained then it became easier for sighted students to pass derogatory comments that served to humiliate, frustrate and anger students with visual impairments.

Aside from sighted students, academics also contributed to the process of "othering", powerlessness and voiceless-ness. This was done in the form of excluding students with visual impairments from academic participation, non compliance with reasonable accommodation and their disbelief in the academic potential of students with visual impairments. This is contrary to Higher Education policies as per The University of KwaZulu Natal Disability Policy for Staff and Students (2004), Education for Human Emancipation as mentioned in The Dar Es Salaam

Declaration on Academic Freedom and Social Responsibility of Academics (1990), the Equal Status Act (2000) as mentioned in the Disability Support Services Report: University College Cork in Ireland and The World Declaration on Higher Education (1998). This was largely attributed to their ignorance about visual impairments and reasonable accommodations. Limited interest was shown by academics to form an academically inclusive relationship with students with visual impairments in an effort to create an environment of access, participation, non discrimination, academic success and equity. This finding was consistent with findings by Howell and Lazarus (2003) and Steff, Mudzakir, Andayani (2010).

The researcher argues that the dominant discourse on ablism is responsible for the social exclusionary process.

- Abuse of Power at Student Residences

As with learning experiences, living experiences also provided opportunities and avenues for disability to be viewed from the standpoint of a low status. Again exploitation “othering”, powerlessness and voiceless-ness were noted as contributing to the social exclusionary process.

One of the major challenges experienced with abuse of power at university referred to students with visual impairments being referred to as being positioned low in the hierarchy of humanness (Van Meygaarden, 2005). Exploitation was further noted in sighted students enjoying pretentious relationships with persons with visual impairments for the purposes of using these students for money, food and clothing accounts. Sighted students used their sighted status to control and have power over the student with the visual impairment. The researcher noted that this evidence showed an absence of an ethic of care and the spirit of Ubuntu at student residences. The genuine human relationship was absent. Students with visual impairments found that they always had to be careful when selecting sighted friends for fear of being emotionally and financially abused. It was evident then that even the aspect of labeling as a result of visual impairment was felt on a personal and residential level as well. Having a visual impairment defined their negative living experiences at student residences as these residences were labeled as being smelly with female residences being likened to a nunnery.

As this study noted, students with visual impairments were automatically marginalized and grouped with students who came from rural schools. In view of this class binary the researcher concluded a relationship between disability and classism pertaining to well resourced and under resourced schools. In exploring living experiences at student residences, the overall conclusion was that sighted persons were socialized into believing that persons with disabilities were defective and must belong to under resourced structures in society.

The dominant positions occupied by sighted students were further elevated in their belief that UKZN was only for sighted students and not for students with visual impairments. The researcher viewed this as automatic marginalization and automatic “othering” of students with visual impairments which also prevailed in the family, mainstream school and community. Again in this regard the researcher concluded an association between visual impairments and automatic marginalization and automatic “othering” relevant to participants lived experiences at student residences.

In view of the negative living experiences of students with visual impairments at UKZN, the researcher agrees with Castellano (2011) who is also visually impaired, on sophisticated and encouraging set-ups to aid with activities of daily living. The researcher concludes that if this sophisticated and encouraging set-up is instituted at UKZN in consultation with students visual impairments, then experiences of exploitation, marginalization and “othering” maybe minimized.

5.2.3. VIOLATION OF HUMAN RIGHTS AT A UNIVERSITY LEVEL

Challenges, conclusions and recommendations with reference to sexual exploitation, disrespect for difference and denial of participation by sighted students also point to social exclusion as experienced by students with visual impairments in the university environment.

5.2.3.1. Sexual Exploitation

This research found that persons with visual impairments were exploited for sex to satisfy the curiosity of able bodied men. Issues pertaining to sexuality and sexual abuse of women with disabilities have also been documented by Russo and Jansen (1998) and Traustadottir (1990). Women with visual impairments were found to be easy targets for sex, they were excluded from making decisions pertaining to their right for protected sex, abandonment after sexual encounters and having to cope with unwanted pregnancies. Bold, energetic personalities of women with visual impairments were construed as personalities that were flirtatious and therefore it could be concluded that male hegemonic relationships have caused females to be oppressed at a sexual level. The researcher concluded that these multi marginalities created avenues for women with visual impairments to lose their power and influence over making decisions about their own lives. This study supported the link between sexual exploitation and visual impairments.

5.2.3.2. DISRESPECT FOR DIFFERENCE

- Computer Assisted Technology

The researcher found that the lack of control and management by the university over the disability computer LANS left students with visual impairments feeling violated as this facility was abused by sighted students. This was perpetuated by the non visibility of management structures to regulate the proper use of this facility; ignorance by the sighted community on specialized computer adaptive facilities used by students with visual impairments and segregated computer LAN facilities for students with disabilities. This "*inclusive discriminatory*" practice, only served to widen the process of "othering", powerlessness and voiceless-ness.

This may be seen as a contributing factor to lower rates of retention, throughput and success amongst students with visual impairments; hence access and participation were denied which went against the call of the United Nations Convention on Human Rights (1948) and the United Nations Convention on Disability (2006).

A further finding of this study referred to ignorance and or intolerances of computer assisted technology (zoomtext and JAWS programs) used by students with visual impairments to access information. To the researcher this seemed to have contributed to the process of "othering", powerlessness and voiceless-ness of students with visual impairments.

- Inadequate Reasonable Accommodations

This research found that the inadequate supply of human resources as in orientation and mobility instructors, structural inaccessibility referring to lifts without voice synthesizers and inadequate information accessibility at SRC level for a SRC member with a visual impairment exacerbated the social exclusionary process. This finding is of concern as it created openings for "othering", powerlessness and voiceless-ness which may have impacted on retention, throughput and graduation outcomes for students with visual impairments. Hence being visually impaired represents a vicious cycle in that all efforts would not be sufficient to overcome challenges pertaining to reasonable accommodations imposed by dominant groups. It can be concluded then that the disrespect for difference pertaining to reasonable accommodations exacerbated the outsider status by not adequately responding to the needs of students with visual impairments.

The researcher argues that the international disability slogan "Nothing about us without us" which supports consultation and representation of persons with disabilities must be given the same prominence regarding legislations pertaining to disability, human rights and the social model of disability. The researcher thus recommended that the starting point for this must be the inclusion of "Nothing about us without us", disability and human rights legislations and the tenets of the social model of disability in all disability advocacy and training programs being undertaken at educational institutions, communities and organizations of and for persons with visual impairments. This would align with the World Declaration on Higher Education (1998), The Dar Es Salaam Declaration on Academic Freedom and Social Responsibility (1990), inclusive education policies, The Constitution of South Africa (1996), Employment Equity Act (1998), social model of disability and disability and human rights legislations. Burke and Harrison (2005) also support the notion of challenging inequities for social transformation.

- Denial of Participation by Sighted Students

This study revealed that the medical model of disability and ignorance about visual impairments denied students with visual impairments the right to effectively participate in group study, group reading, leadership activities and lectures. This perpetuated conditions leading to non participation, isolation, abandonment and lack of confidence. In view of this it can then be stated that sighted students have internalized that students with visual impairments did not have the capability to effectively participate and represent sighted students. Hence the researcher believes that characteristics for inclusion was determined by sighted students without recognizing the need to integrate, capacitate and support the inclusionary processes.

5.2.4. CONFINEMENTS AS A RESULT OF VISUAL IMPAIRMENT

This theme referred to challenges, conclusions and recommendations made by students with visual impairments with reference to marginalized living experiences and poverty as a confinement in their social and university environments.

5.2.4.1. Marginalized Living Experiences at Student Residences

This research found that students with visual impairments at student residences were grouped with able bodied students from rural schools. The Union of the Physically Impaired Against Segregation found disability to be a form of oppression on par with racism and sexism whilst this study found visual impairments to be a form of oppression on par with classism (Barnes and Mercer, 2005). Able bodied students viewed visual impairment as disadvantage and for this reason would confine them into class structures that have a low socio economic profile with little resources. This type of confinement further entrenched the social exclusionary process characterized by "othering", powerlessness and voiceless-ness. It is evident then that a relationship between visual impairment and class structures does exist.

Arising from further analysis of this study it was found that students with visual impairments experienced "othering", powerlessness and voiceless-ness relevant to socialization, disproportionate allocation of laundromat equipment by student housing and lacked control of choice of television programs. These exclusions governed by sighted students meant that inclusion of students with visual impairments diminished their group status and the benefits of being the dominant group. This is similar to conclusions made by Narayan et al (1999) and Klasen (1996) as cited by Shera (2003).

This experience perpetuated the confining or channeling effect of visual impairment. It was evident from the findings that the visual impairment incarcerated and created a life long imprisonment culture where freedom, inclusion, equality and emancipation were hardly embraced. The researcher proposed that unless students with visual impairments were given the same status and equal opportunities as able bodied persons, the social exclusionary experience will not change. The researcher argues that the medical model of disability and ignorance of legislations pertaining to disability and human rights produced marginalization and an "insider-outsider" status.

This study also found that labeling was associated with confinement and this labeling exacerbated de humanizing conditions for students with visual impairments. As with the family, mainstream school and the community the spirit of Ubuntu was absent. The principle of care is similar to Castellano's (2011) notion of sophisticated and encouraging set-ups and Barnes and Mercer's (2005) findings on the importance of equal participation, equal rights and opportunities in caring for persons with disabilities. The researcher concluded that experiences of being marginalized support social exclusionary processes at a social and university level.

5.2.4.2. Confinement as a Result of Visual Impairment and Poverty

This study found a connection between disability and poverty which the researcher referred to as a dualistic parasitical relationship as each phenomenon is dependant on and gives birth to the other. Similar studies by Elwan (2006), Emmet and Alant (2006*)*, Graham et al (2010), Lwanga-Ntale (2003), Rust and Metts (2006), Thomas (2005) and Yeo and Moore (2003) also noted this relationship.

- Disability Entertaining Poverty

Illiteracy

This study found that children with disabilities were deprived of opportunities to attend school because families feared additional costs such as school fees, boarding fees, transport costs, specialized computer adaptive software etc. Hegarty (1995) and Yeo and Moore (2003) too found that children with disabilities will be less likely to be sent to school or will be denied formal education.

In view of this the researcher found that deprivation of early education limited early socialization, skills development, participation in an enabling environment and opportunities for further education. These were factors that allowed for poverty to be passed across generations.

Hence it can be said that a relationship exists between visual impairment and poverty producing illiteracy.

Literacy

This research found that social exclusion as a result of visual impairment to be a poverty trap as even with access to tertiary education and higher education qualifications participants were trapped into situations of poverty, whilst Rust and Metts (2006) found that poverty stemmed from factors related to inaccessibility to education. This study also found that literacy coupled with visual impairment produced poverty through economic exclusion.

This study found that persons with visual impairments with Higher Education degrees experienced extreme difficulty in finding employment in line with their Higher Education qualifications. As a result participants returned to university to undertake post graduate studies as the disability bursary provided some respite from poverty. This study also found that having a visual impairment diminished participants chances of being shortlisted for job interviews due to disclosure of their visual impairments on their curriculum vitae. Therefore the researcher declared that disclosure of the visual impairment and ignorance of visual impairments by prospective employers are factors that push persons with visual impairments further into the poverty trap. The researcher concluded that this economic exclusion as a result of visual impairment inevitably led to social exclusion and social immobility which perpetuated the cycle of oppression.

Other Factors Perpetuating Poverty as a Result of Visual Impairment

This study provided evidence that irrespective of levels of literacy, being visually impaired promoted poverty through financial reliance on family and spouse which impacted on family members financial reserves, reliance on others for transport, fear of assuming a beggar status, fear of children assuming a beggar status due to parents' visual impairment and inability to purchase computer adaptive software and other optical aids. This finding is similar to the findings by Rust and Metts (2006) regarding economic reliance of persons with disabilities on their family and community. This study showed that the poverty experience is cyclic and exclusionary in that it commences with the parents and filters through to their children. Furthermore exclusion from community structures entrenched the poverty experience and this experience moved on to associate itself with the university experience and when university life ended, poverty followed the person with the visual impairment back into the family and community structure. Hence the cycle of poverty is vicious as postulated by Myrdal (1944), as cited by Rust and Metts (2006), and Yeo and Moore (2003). The researcher argues that poverty is double binding in that participants felt confined as a result of their visual impairment and poverty experiences that were seen to be oppressive and exclusionary. This is what the researcher refers to as turbulence in the cycle of oppression.

- Poverty Entertaining Disability

This research found that poverty situations resulted in visual impairment because of inadequate and inaccessible health care facilities, not being able to access transport to health care facilities due to financial constraints, absence of nutritious food and inadequate finances to purchase spectacles.

Thus visual impairment and poverty is core to the social exclusionary process. This is consistent to what Emmet and Alant (2006) and Lustig and Strauser (2004) state.

The researcher concluded that visual impairment and poverty was dualistic and held the same prominence in creating, maintaining and exacerbating the social exclusionary process.

5.2.5. RECOMMENDATIONS

5.2.5.1. PARTICIPANTS AND RESEARCHERS RECOMMENDATIONS

The following recommendations were made by participants. The researcher conflated suggestions from different themes in order to present a whole, composite picture of these suggestions, and also offered her own critical comments.

1. Anti oppressive education and empowerment with families, schools, communities and universities should embrace a multi disciplinary approach to minimize the social exclusionary process and promote social transformation as expressed in the social model of disability thinking. This may rejuvenate the Ubuntu Philosophy and promote an ethic of care within the family, mainstream school and the community. Of importance is that healing and support must commence from the family structure and move outward into the mainstream school, community and university.

2. Training of professional and paraprofessionals must be grounded in the anti oppressive, human rights and social justice paradigms.

3. Structures addressing social exclusion need to be developed for service delivery to the family, mainstream school, the community and university. There must be active networking, collaboration and partnerships with service providers in the field of eye care support services, support groups and role models within the field of visual impairments. This is an ideal forum to share ideas and transform disability thinking through disability and human rights legislations and for adopting the social model of disability in consultation with persons with disabilities.

4. Sophisticated and encouraging set-ups as outlined by Castellano (2011) should be introduced at mainstream schools, in the community as part of community based rehabilitation and universities to

address retention, participation, information accessibility and educational equity.

5. Engagement with disability research is important to develop and enhance disability services and policies with the key focus of building a better society for people with disabilities. In addition the researcher recommends that further research could also document the lived experiences of sighted professional and paraprofessionals involved in the social and visual rehabilitation of persons with visual impairments.

6. The Government has to create a separate portfolio to address disability issues without conflating disability with womens and childrens issues. The very nature of their disability and it's vulnerable status requires a separate and dedicated effort to give credence to their vulnerable and marginalized positions in society.

7. Community based rehabilitation like orientation and mobility instruction, activities of daily living skills, Braille literacy programs, basic family and community building skills must focus on inclusion and equal participation.

8. Students with visual impairments must develop a sense of assertiveness and self confidence in advocating and lobbying for their right to reasonable accommodation, inclusion, equal participation and respect. In order to promote advocacy and lobbying the UKZN Disability Support Units service delivery must be grounded within an Anti Oppressive Approach and must include active alignment with disability, human rights, inclusive education policies and the social model of disability. Other supportive services at tertiary institutions countrywide could adopt a similar approach.

9. In addition to these suggestions, the researcher recommends the need for UKZN Disability Support Units to institute social skills enhancement training programs for students with visual impairments to address disability, human rights and inclusive education legislations, the social model of disability and programs pertaining to self esteem, self confidence, leadership, advocacy skills development, peer relations, sexual rights, communication skills and conflict management and resolution.

The researcher agrees with Thompson's (2001) model of empowerment training (Personal, Cultural and Structural Levels otherwise known as PCS) that allude to personal skills development for self confidence and self esteem augmentation. The Cultural level addresses oppression and experiences thereof. The Structural level addresses a persons right to inclusion through advocacy and lobbying for disability renaissance. Participants further recommended that during orientation week first entry students with disabilities should receive exposure to this social skills enhancement training program.

10. "Nothing about us without us" is the International disability slogan which speaks to consultation, engagement and representation of persons with disabilities. This slogan needs to be adopted in relation to the following aspects as recommended by participants.

- Inclusive computer Lans,
- Universal design for persons with disabilities,
- Equal representation on house committees and SRC.
- Increased representation at Government level

11. UKZN's Teaching and Learning Offices must create avenues or offer incentives for academics to be empowered and trained on disabilities with relevance to reasonable accommodation (physical, information and structural accessibility), teaching strategies for persons with visual impairments and anti oppressive education.

12. The UKZN Disability Policy for Staff and Students (2004) requires adjustment and implementation in consultation with the Disability Support Units and students with disabilities. This should address issues pertaining to access, retention and throughput, physical, social and information inaccessibility and other forms of social exclusion experienced in the university environment.

13. The researcher recommends that in addition to education, social skills empowerment training and advocacy to prospective employers on disability and human rights legislations,

vigorous attention to the social model of disability and active planning for job placements together with UKZN's Career and Counselling Unit may narrow the poverty trap.

5.2.5.2. RESEARCHERS RECOMMENDATIONS.

The researcher acknowledges that anti oppressive practices embrace holistic interventions. To achieve this, the oppressed students social and university contexts must be considered, acknowledged and be used as a base for social and academic transformation.

In view of this the researcher provides additional recommendations that may be useful in enhancing service delivery, formulating new policies and future research into the field of visual impairments.

- SERVICE DELIVERY

1. Social Work Service Delivery

Feminist Social Work

Women with disabilities experience multi dimensional marginalities based on gender and visual impairment. In view of this it is essential to introduce and combine feminist social work with the social model of disability as a form of social work practice that takes the experiences of oppression, "othering", powerlessness and voiceless-ness of females with visual impairments as a starting point of social enquiry. This will assist in providing specialized supportive interventions to enable women with disabilities to deal with their personal and private troubles related to oppression.

Community Family Therapy

Kasiram and Thaver (2010) propose that a community based action plan to address poverty is central to meaningfully prevent and treat poverty, marginalization and mental health concerns.

Of relevance is Rojano's (2004) Community Family Therapy Approach that encapsulates personal growth, economic development, leadership training and transformative capabilities of poor families not only as service users but as empowered citizens within that community. This approach combines family therapy techniques with developmental and motivational theories, community mental health, social work, and economic development and community mobilization strategies.

The client and the citizen therapist become engaged with transformation and maturation, collaboration with community resources for support, leadership development and civic action through the client becoming a "citizen therapist" (Rojano, 2004:73). Relating to this study the application of this paradigm and the concept of the client becoming the support network are suitable for disability interventions at student residence level to identify and address issues perpetuating the social exclusionary process. This transformative form of therapy together with UKZN Disability Support Units must address issues pertaining to re-instating the spirit of Ubuntu i.e. to organize the student residence community as a family to develop an ethic of humane generosity and respectful humane relationships that will free students with visual impairments from marginalized, discriminatory and oppressive living experiences at student residences. Kasiram, Engelbrecht and Landau (2009), stressed that through the spirit of Ubuntu, the remoulding of community as family is possible.

Narrative Family Therapy

Narrative Family Therapy developed by Michael White and David Epston (Vahed, 2010) is built on the notion that "the person is not the problem but the problem is the problem" (Wikipedia:1) which is applicable for therapeutic work with families, schools, communities and Higher Education Vahed (2010). This approach will allow for persons with visual impairments to name their dominant stories and experiences, in the context of this study refers to abuse of power, violation of human rights and visual impairment as confinement. This form of therapy can help persons with visual impairments to be released from their labels and reclaim their self esteem and self confidence and realize that they or their visual impairment is not the problem but rather that the social exclusionary process is the problem.

2. Governmental and Non Governmental Organizations

The Constitution, mission and vision statements, business and service plans of Governmental and Non Governmental Organizations providing services for and of persons with visual impairments must draw on the Constitution of South Africa (1996), disability and human rights legislations and the social model of disability to promote anti oppression, social justice and human rights. This will allow for equal participation and citizenship of their beneficiaries.

3. Funding

Funding must be made available from the Departments of Education, Health, Transport and or Social Development for the purchase of assistive and optical devices, computer assisted technology, devices, poverty reduction initiatives, inexpensive and accessible transport systems.

4. Other

Accelerated learning programs i.e. short courses for educators and university staff on academic support services and teaching strategies for persons with disabilities at schools and Higher Education.

- POLICY DEVELOPMENTS

1. Expansion of the core curriculum at Higher Education institutions to address disability as a diversity issue through a credit bearing disability studies module. This disability studies module should encapsulate the definitions of disability, types of disabilities, International, National and Local legislations, models of disability and the positioning of disability in the context of discourses of the social model of disability. This module must further explore conceptual frameworks that positions disability within an anti oppressive, human rights, social justice, ecosystems, power relations and gender framework.

2. The Faculty of Education at UKZN should consider compulsory teaching practice placement of all student educators at schools for learners with special needs for orientation, exposure and experience to effect the management of disability in the classroom.

3. The new Education Curriculum and Assessment Policy for learners should address disability as a separate learning area with its own learning outcomes.

4. UKZN must develop policy guidelines or a step wise approach for the assessment and management of students with disabilities experiencing the social exclusionary process.

5. Active implementation of the UKZN hungry students policy in an effort to alleviate poverty and hunger at university.

6. Segregated residential facilities for able bodied students and students with disabilities engineer segregation and allude to the medical model of disability thinking. UKZN should consider instituting policies that address inclusive living spaces at student residences. This will ensure integration, respect for difference and widened access and participation.

7. Critical social transformation at UKZN must address disability in relation to gender, employment and classism. This could help to transform hegemonic ideologies of the sighted university population in relation to disability.

- FUTURE RESEARCH

1. Ethnographic studies produce thick descriptions. This form of research in the context of disability will provide a full landscape of the lived experiences of both the oppressed and the oppressor in a way that other methods of research will not. This discourse will allow for the identification of gaps and challenges on the construction of disability especially within the framework of the family where social exclusion finds its roots. In this way the insider perspectives or voices of persons with and without visual impairments will be genuinely represented to be used as an instrument for social change and transformation.

2. This study focused on the lived social exclusionary processes pertaining to both males and females with visual impairments. It also found that social oppression is also an engendered phenomenon hence feminist critical research pertaining to visual impairments must be undertaken by putting gender at the forefront of social enquiry to more fully represent the voices of women with visual impairments.

3. Research pertaining to hegemonic ideologies of the sighted female oppressor and the manner in which visual impairments perpetuated the oppressive relationship with females with visual impairments.

4. Further research could examine the role of poverty reduction work in the context of disability and if poverty reduction work is meeting the needs of people with disabilities in reducing their experiences related to poverty.

5. Scholarly work to be undertaken on both off campus and on campus student residential facilities to promote social cohesion and transformation of the existing dominant ideologies of able bodied students at student residences.

5.2.6. CONCLUSION

The following narrative titled *“hey wena*” represents the exact voices of the participants, highlighting their pressures and pains from social exclusion. In this narrative the researcher uses poetic lines and creative writing skills as insider perspectives of participants painful memories, hurtful emotions and shattering experiences of dancing with the social exclusionary process from childhood to university. This study sought to expose and address these painful experiences.

hey wena!!!!

I have a beautiful name but was always called “*hey wena, hey wena*”. I believed that my name was *“hey wena”.* This confined me to a life of inferiority.

As a herd boy, I could not see the cattle straying away and was severely beaten by family and the community. The community said that I am visually impaired because I looked at the private parts of older persons.

The Sukuma busses are for persons with disabilities. I do not use a white cane and am told “You are clean, you cannot use this bus”. My visual impairment is equated to filth.

Even at university I am a *“hey wena”,* I get all excited; I feel superior and powerful when a sighted student at university helps me, Then I receive my disability bursary, the thunder of exploitation bangs into my ears only to hear "*hey wena",* how is your fashion account, give me some food, money or we can go to the club together and have some drinks".

Always ALONE, alone, alone .... fading into a world of double darkness…my death sentence,
Just because *"hey wena"* is visually impaired!!!!!!!!!!!!!

Dedicated to the participants in this study whose resilient spirit is worthy of praise and emulation.

BY
ROSHANTHNI SUBRAYEN

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7.1. ANNEXURE 1

INDIVIDUAL INTERVIEW SCHEDULE

TO EXPLORE SOCIAL EXCLUSION AMONG STUDENTS WITH VISUAL IMPAIRMENTS AT UKZN EDGEWOOD AND HOWARD COLLEGE CAMPUSES

A. PERSONAL PROFILE OF RESPONDENTS

1. Age

17 - 20	21 - 24	25 - 28	29 and over

2. Gender

Male	Female

3. Marital status

Single	Married	Divorced	Separated	Widow/widower

B. EDUCATION

1. Secondary schooling

Mainstream	LSEN

2. Tertiary education

Howard College	Edgewood Campus

C. DISABILITY

1. Visual impairment

Blind	Partially sighted	Born blind	Blind later in life

2. In what format do you access your information?

Braille	Electronic	Audio recordings	Large print	Sighted reader

3. What does visual impairment mean to you?

D. CHALLENGES EXPERIENCED IN YOUR SOCIAL ENVIRONMENT

Social Relationships

1. Discuss your relationships with family members.?

2. Discuss challenges experienced in forming and maintaining relationships with sighted students?

Powerlessness and Voiceless - ness

1. Comment on powerlessness and voiceless ness as it may affect you:

“Othering”

1. How do you as a person with a visual impairment feel about being known as the “other” person or the “outsider”?

2. What is your experience of possible exclusion you may experience in your study groups, academic development programs, sports and SRC structures?

3. What is your experience of exploitation and marginalization by other students or residence assistants at student residence?

Poverty

1. Research indicates that disability “dances” with poverty. What is your experience? Explain.

CHALLENGES EXPERIENCED IN THE UNIVERSITY ENVIRONMENT

Learning Experiences

1. Explain with reasons, “no matter what I achieve at university, it is tainted by having a label of impairment/being inferior”? How does this apply to you?

Living Experiences at Student Residences

1. Explain your experience of possible exclusion at social events at student residence?

2. What is your experience of undertaking leadership roles and responsibilities at residence?

3. Explain your experience of “voiceless ness” relating to improving residence life?

4. Explain how you feel about “others at residence making decisions for you, because you are seen as being ‘incapable” as a result of your disability?

____

5. Explain residence access for you and provide details on laundry facilities, kitchen facilities, ablutions and recreation/study rooms?

____

F. RECOMMENDATIONS

1. What are your suggestions in addressing social exclusion relevant to:

- Family

____

- Community

____

- University

____

- Learning experiences and

- Residence life

2. Any other recommendations.

7.2. ANNEXURE 2

FOCUS GROUP DISCUSSION

1. Discuss your social relationships with sighted persons within family, community, university and peer group structures?
Compare and contrast the dynamics of these issues and other possible explanations for these differences.

2. How voiceless and powerless are you in these relationships?

2. Discuss how you have to “partner or dance” with visual impairment and poverty?

3. Discussion on the advantages and disadvantages of your living experiences at university? Then discuss ways to address these difficulties.

4. Discussion on your learning experiences at university?

5. Any other recommendations.

7.3. ANNEXURE 3

INFORMED CONSENT FORM

Please note that informed consent forms will be made available in alternate formats viz. Braille, electronic, large print or audio recorded, depending on the participants information access needs.

I am the Disability Support Officer at the UKZN Edgewood Campus pursuing a Masters degree at the School of Social Work and Community Development at the University of Kwa Zulu Natal, Howard College Campus. I am currently undertaking research for my dissertation which will focus on exploring the social exclusionary process among students with visual impairments at UKZN Howard College and Edgewood Campuses.

My supervisor/project leader for my dissertation is Prof. Madhubala Ishver Kasiram from UKZN Howard College Campus – School of Social Work and Community Development. Prof Kasiram can be contacted at 031-2607443. The following represents a brief overview of the nature of the study.

1. PROJECT TITLE

Exploring social exclusion among students with visual impairments at UKZN Howard College and Edgewood Campuses.

2. STATEMENT OF THE PROJECTS AIMS

To explore social exclusion in relation to students with visual impairments at UKZN Howard College and Edgewood Campuses.

3. CRITICAL QUESTIONS

This research study will aim to answer the following questions:

3.1 What challenges or barriers related to social exclusion are experienced by students with visual impairments in their social environment, external of the university?

3.2 What challenges or barriers related to social exclusion are experienced by students with visual impairments in their university environment?
3.3 What recommendations are suggested by these students in addressing and overcoming these challenges?

4. In view of the purpose of this study, you have been identified as a key participant to partake in individual interviews and focus group discussions to obtain information that will meet the aims of this study. The duration of the individual interview will be for approximately 45 minutes whilst the focus group discussion will last for 3 hours. These interviews and focus group discussions will be taped for the purposes of compiling a report on the findings of this study. You will be given the opportunity to forward recommendations for transforming the social exclusionary process. All interviews will be conducted by the researcher and information retrieved will be confidential. Upon completion of the research, your responses will not be made accessible for public viewing. There will be no payment or reimbursement for your participation in this study. As a voluntary participant, you have the right to withdraw from the study at any time without being prejudiced. Anonymity of the participant will be ensured at all times, no names of participants being mentioned in my final report.

I……………………………………………….. (full name) hereby confirm that I understand the content of the document and the nature of the research project and consent to participate in this project. I fully understand that I am at liberty to withdraw from the project at any time should I so desire. Please print your name and sign to confirm your participation in this study.

Thanking you for participating in this study.
Yours sincerely,

ROSH SUBRAYEN: RESEARCHER

Kindly sign below.

Name:………………………………

Signature:………………………….

Signed on this ……………………………day of ………………………….2011.

Signature of witness:

1. ………………………………….

2. …………………………………..