Gender, Disability and Access to Education in Tanzania

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The candidate confirms that the work submitted is her own and that appropriate credit has been given where reference has been made to the work of others.

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Dedication

This work is dedicated to my late sister and friend, Renelice Macha, and to the future, Glory, my daughter.
Acknowledgements

In this world, one cannot live as an island without the help of others. Thus, we all need one another’s support and encouragement in order to live a more fulfilling life.

To start with, I thank God for all his blessings in enabling me to do a PhD and even seeing me through to its completion.

I most sincerely thank specific charities; churches, organisations, societies, families and individuals who provided moral and great financial support in making this research study a success. Special thanks to Mary Boyd, Liz Fennel, Roy and Mary Willies for their most invaluable efforts in coordinating donations from members of Britain Tanzania Society (BTS). I shall forever be grateful to all those BTS members for their joint financial contributions.

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I would also like to thank two UK based charity organisations, that is; David Anderson Africa Trust (DAAT) and Snowdown Award Scheme for providing the necessary funds to expand my research to a second research area i.e. Tabora.

I thank all my research key informants for their central role in providing data for the study. Special thanks go to those visually impaired women in Dodoma and Tabora for their immeasurable collaboration and willingness to share their most personal life experiences.

My heartfelt gratitude goes to two research assistants, Henry M. Wimile and Mood Kajembe for their most treasured support during the whole period of study. Its success is owed to their encouragement and persistent firmness in influencing my decisions especially during the fieldwork.

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While I appreciate the contribution, support and encouragement of the above named individuals and organisations, I wish equally to acknowledge that there are many more people who in one way or another contributed to the success of this work. Due to space limitation, I am not able to mention them all by their names. I extend my heartfelt thanks to all. The thesis' strengths derive from all these people, its weaknesses are mine.
Abstract

The ultimate aim of this empirical study has been to investigate the obstacles visually impaired women in Tanzania face in their struggle for accessing and gaining education. It explores issues of culture, gender, disability, education and development, and examines the ways these interact with one another in shaping the lives of the women under discussion. These issues are conceptualised to establish the theoretical framework of the study. The epistemological and ontological position of the social model of disability has guided the conceptualisation and analysis of the problem under review. Using this model, this study critiques the way in which society perceives disabled people in general, and disabled women in particular. The social model approach emphasises a need to move society's perception of disability away from the medical model approach, which individualises disability.

There are two main reasons for my choice of topic for this investigation. Firstly, the research is as much about my own experiences as it is about other visually impaired women. It is argued that the way the identity of visually impaired women is socially constructed, drawing on cultural understandings, social/economic and political barriers and society's negative attitudes towards sex and impairment, has served to inhibit their access to education. Secondly, I decided to research gender disparities in the provision of education for visually impaired persons because it has never previously (to my knowledge) been on research agendas of academics or disability activists in Tanzania.

In setting the scene, the thesis starts by justifying the need for researching the problem of inaccessibility of visually impaired women to education in Tanzania. Semi structured interviews were used to generate the primary data for the study. 58 visually impaired women and 26 parents/guardians participated in the research, as well as other 36 key informants. Research findings reveal various obstacles visually impaired women in Tanzania encounter in their struggle for accessing and gaining education. These include cultural, social, economic, political and physical
difficulties. The findings further highlight outcomes of the educational obstacles on the lives of visually impaired women; reviewing the coping strategies they use in their struggle for survival, and record their views about the ways their education could be improved. The study concludes by suggesting key issues for the way forward. Recommendations directed to all involved in the provision of education for visually impaired women are oriented toward changing attitudes and ensuring that education is their human right and not a matter of charity.
Table of Contents

Dedication ......................................................................................................................... ii
Acknowledgements ........................................................................................................ iii
Abstract .............................................................................................................................. v
List of Tables and Figures ......................................................................................... xi
Abbreviations ................................................................................................................ xiii

CHAPTER 1 .......................................................................................................................... I
GENDER, DISABILITY AND ACCESS TO EDUCATION IN TANZANIA ................... I
Introduction ................................................................................................................... 1
Background .................................................................................................................. 1
Aims of the Study, Nature of Investigation and Research Questions ..................... 1
Context ........................................................................................................................... 4
Personal Experience .................................................................................................... 5
Theoretical Standpoint .............................................................................................. 10
Conceptual Framework ............................................................................................. 13

CHAPTER 2 ........................................................................................................................ 21
METHODOLOGY ............................................................................................................. 21
Introduction ................................................................................................................. 21
Current Perspectives in Doing Disability Research .............................................. 21
The Research Design ............................................................................................ 23
Sampling and Data generation Techniques ........................................................... 24
Sample Population .................................................................................................... 24
Sampling Techniques ............................................................................................... 26
Data Generation ......................................................................................................... 32
Interviews ..................................................................................................................... 32
Building up Reciprocity with Participants ............................................................... 33
Advantages .................................................................................................................. 35
Disadvantages ............................................................................................................. 35
Observation .................................................................................................................. 36
Survey of Documentary Evidence ........................................................................... 36
Qualitative Data Analysis ......................................................................................... 37
Difficulties Experienced on the Research Period .................................................. 40
Summary and conclusion ......................................................................................... 43

CHAPTER 3 ........................................................................................................................ 45
GENDER, DISABILITY, EDUCATION AND DEVELOPMENT: .......................... 45
EMERGING EXPERIENCES FROM SELECTED COUNTRIES ............................. 45
Introduction .................................................................................................................. 45
Deviance and Cultural Construction of Sex and Impairment .............................. 47
Gender ......................................................................................................................... 51
Gender and Development ......................................................................................... 54
Gender and Disability ............................................................................................... 56
Gender, Disability and Development ..................................................................... 58
# Table of Contents

Education..................................................................................................................... 67  
Women's Access to Education in Sub-Saharan Africa ........................................ 71  
Gender Disparity in Special Needs Education in Sub-Saharan Africa ............. 76  
Summary and conclusion ......................................................................................... 85  

## CHAPTER 4

**EDUCATION FOR VISUALLY IMPAIRED PERSONS IN TANZANIA WITH A GENDER PERSPECTIVE**

Introduction .................................................................................................................. 88  
Country Profile ............................................................................................................ 90  
Overview of Tanzania's Educational System .......................................................... 91  
**Educational System** ................................................................................................ 91  
Indigenous Education ................................................................................................. 92  
**Colonial Education** ................................................................................................. 93  
Post-Colonial Education ........................................................................................... 100  
The Introduction of Structural Adjustment Policies (SAPs) and their Effects on Education Sector Reform ........................................................................... 107  
The Provision of Education for Visually Impaired Persons in Tanzania .......... 111  
Conceptualising Gender Bias in the Education for Visually Impaired Persons in Tanzania .................................................................................................................... 118  
Structural Adjustment Policies and Their Impact on the Education for Visually Impaired Women ............................................................................................................. 124  
Summary and conclusion ....................................................................................... 129  

## CHAPTER 5

**OBSTACLES ENCOUNTERED BY VISUALLY IMPAIRED WOMEN IN GAINING EDUCATION IN TANZANIA**

Introduction ............................................................................................................... 132  
Deviance Theory as Applied to the Wagogo and Wanyamwezi Cultures ...... 133  
A Normal Woman in the Cultures of Wagogo and Wanyamwezi ....................... 134  
The Concept of Body Image in the Cultures of Wagogo and Wanyamwezi ...... 136  
Engendered Roles and Cultural Practices in Wagogo and Wanyamwezi .......... 139  
Traditions and Customs ........................................................................................... 139  
Division of Labour ..................................................................................................... 141  
Inheritance and Ownership of Property .................................................................. 143  
Overprotection of Visually Impaired Girls within Families ................................. 149  
Economic Hardships within Families ...................................................................... 152  
Sexual Violence and Early Pregnancies .............................................................. 155  
Long Distances to Schools and Poor Infrastructures ......................................... 159  
Detrimental Impact of School Practices and Services ....................................... 160  
Teachers Attitudes and Unfriendly School Environments .................................... 160  
Lack of Special Needs Education Facilities ........................................................... 164  
Problems at the Policy Level .................................................................................... 172  
Effects of SAPs ........................................................................................................ 173  
Lack of Special Needs Education Policy ............................................................. 174  
Summary and conclusion ....................................................................................... 175  

## CHAPTER 6

................................................................................................................................. 177
OUTCOMES OF EDUCATIONAL OBSTACLES, COPING STRATEGIES AND NEW PATHWAYS TO EDUCATION IN TANZANIA

Introduction ............................................................................................................... 177
Outcomes of Educational Obstacles ..................................................................... 178
Illiteracy and Ignorance ............................................................................................ 178
Unemployment .......................................................................................................... 182
Poverty ....................................................................................................................... 187
Economic Dependency ............................................................................................. 189
Under-nutrition ........................................................................................................... 190
Inadequate Clothing ................................................................................................. 192
Inadequate Housing ................................................................................................. 192
Inaccessibility of Health Care .................................................................................. 194
Gender Violence ....................................................................................................... 195
Coping Strategies ..................................................................................................... 197
New Pathways to Education ................................................................................... 200
Inclusive Education ................................................................................................... 202
Role of the Society in Inclusive Education ............................................................. 203

CHAPTER 7 ...................................................................................................................... 209
THE DESIGN AND IMPLEMENTATION OF EDUCATIONAL REFORMS WITH RESPECT TO VISUALLY IMPAIRED WOMEN IN TANZANIA: THE WAY FORWARD
Introduction ............................................................................................................... 209
Contextualising the Social Model within the Study ... 209
Gender and Disability Issues Emerging from the Findings in Relation to Education and Development ........................................................................ 210
Main Policy and Research Issues Emerging From the Study ... 216
Special Needs Education Policy ............................................................................. 217
Adult Education Policy of 1970 ................................................................................ 220
Universal Primary Education (UPE) Policy of 1977 .............................................. 221
The Policy of Expulsion and Exclusion of Pregnant School-Girls as implied in the 1978 Education Act ................................................................................................... 222
Cost Sharing Policy of 1995 .................................................................................... 224
Conclusion ................................................................................................................. 226
The way forward ....................................................................................................... 227

APPENDIX 1: INTERVIEW STRUCTURE FOR VISUALLY IMPAIRED WOMEN ........... 235
APPENDIX 2: INTERVIEW STRUCTURE FOR PARENTS/GUARDIANS ....................... 240
APPENDIX 3: INTERVIEW STRUCTURE FOR VILLAGE HEADS/ELDERS ................. 243
Personal Data ............................................................................................................. 243
APPENDIX 4: INTERVIEW STRUCTURE FOR HEADS OF SCHOOLS ......................... 245
Personal Data ............................................................................................................. 245
APPENDIX 5: INTERVIEW STRUCTURE FOR CLASSROOM TEACHERS ................. 248
APPENDIX 6:
INTERVIEW STRUCTURE FOR OFFICIALS IN THE MINISTRY OF EDUCATION AND CULTURE .......................................................... 250
APPENDIX 7 ..................................................................................................................... 253
INTERVIEW STRUCTURE FOR LEADERS OF THE ORGANISATION OF VISUALLY IMPAIRED PEOPLE ..................................................... 253
APPENDIX 8 ..................................................................................................................... 256
INTERVIEW STRUCTURE FOR OFFICIALS OF THE ORGANISATION FOR VISUALLY IMPAIRED PEOPLE ............................................................ 256
Appendix 9 ......................................................................................................................... 259
Photographs ...................................................................................................................... 259

Bibliography .................................................................................................................... 264
Published Works and Conference Papers .................................................................. 264
Interviews with Key Informants ................................................................................. 291
List of Tables and Figures

Table 2.1: Number of actual population ............................................................................... 24
Table 2.2: Distribution of Villages/Townships Visited in Dodoma Region ............................. 27
Table 2.3: Place of Origin ..................................................................................................... 30
Table 2.4: Age Distribution .................................................................................................. 30
Table 2.5: Occurrence of Impairment ................................................................................... 30
Table 2.6: Causes of Impairment .......................................................................................... 30
Table 2.7: Marital Status ....................................................................................................... 31
Table 2.8: Number of Children ............................................................................................. 31
Table 2.9: Level of Education ............................................................................................... 31
Table 2.10: Main Source of Income ..................................................................................... 32
Table 3.1: Enrolment of Pupils with Impairments in Primary Schools in Tanzania by Gender from 1996/97 to 1999/2000 ................................................................................... 79
Table 3.2: Enrolment of Students with Impairments in Secondary Schools in Tanzania by Gender from 1996/97 to 1999/2000 .............................................................................. 79
Table 3.3: Number of Disabled Children Enrolled in Primary Schools by Gender in Uganda from 1996 - 1999 .......................................................................................................... 80
Graph 3: 1 Enrolment of Disabled Children .......................................................................... 81
Table 3.4: Number of Disabled Students Enrolled in Secondary Schools by Gender in Uganda From 1996-1998 ............................................................................................... 81
Graph 3: 2 Enrolment of disabled students in Secondary schools ......................................... 82
Graph 3: 3 Education levels completed by the disabled pupils/student from .......................... 82
1996 to 1998 in Uganda ........................................................................................................ 82
Table 3.5: Enrolment, Completion and Dropout of Visually Impaired Students in Primary Schools by Gender in Kenya Between 1996 To 2000 ........................................................................ 83
Table 3.6: Enrolment, Completion and Dropout of Visually Impaired Students by Gender in One Secondary School in Kenya Between 1996 to 2000 ...................................................................................... 84
Table 4.1: African Education in Tanzania by Category 1956-61: Schools and Enrolment ....................................................................................................................................... 96
Table 4.2: European Education in Tanzania by Category 1956-61: Schools and Enrolment ....................................................................................................................................... 97
Table 4.3: Indian Education in Tanzania by Category 1956-61 Schools and Enrolment .... 98
Table 4.4: Number of Women and Men in Literacy Classes ................................................ 103
Table 4.5: Girls as Percentage of Enrolment in Primary Schools ........................................ 105
Table 4.6: Female Ratio and the Education Pyramid in the 1980s in Public Schools .......... 106
Table 4.7: Potential Enrolment Allocation for Visually Impaired Boys and Girls Ordinary Secondary Schools Intake per year ............................................................................. 121
Table 4.8: Selection of Visually Impaired Boys and Girls Joining O-Level Secondary Education, 1998 -2002 ...................................................................................................................... 122
Table 4.9: Actual Enrolment of Visually Impaired Female and Male Students in O-Level Secondary Schools in Tanzania, 1992 -1997 .................................................................................. 122
Table 4.10: Actual Enrolment of Visually Impaired Female and Males Student in Advanced Level Secondary Schools in Tanzania 1992 -1997 .............................................. 123
Table 4.11 Enrolment Visually Impaired Female and Male Students at The University of Dar es Salaam 1992 -1997 ........................................................................................................ 124
Box 5.3: Sexual Violence in Schools .................................................................................. 155
Table 5.1: Availability and Condition of Learning /Teaching Materials as Reported by Visually Impaired Women ................................................................. 164
Box 5.5: Learning without Facilities/equipment ........................................................... 169
Table 5.2: Enrolment and Completion Record at Hombolo Integrated Primary School 1989 – 1999. .................................................................................................................. 170
Table 5.3: Enrolment and completion record at Buigiri Special Primary School from 1989 – 1999. .................................................................................................................. 171
Table 6.1: Unemployment and Income Earning Situation of Visually Impaired Women Interviewed ........................................................................................................... 183
Table 6.2: Incidence of Dependency among Visually Impaired Women Interviewed .... 190
Table 6.3: Availability of Food at the Surveyed Households of Visually Impaired Women .................................................................................................................. 191
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADD</td>
<td>Action on Disability and Development</td>
</tr>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>A-level</td>
<td>Advanced Level</td>
</tr>
<tr>
<td>AU</td>
<td>African Unity</td>
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<tr>
<td>BFLBS</td>
<td>British Foreign Language Bible Society</td>
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<td>BTS</td>
<td>Britain Tanzania Society</td>
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<tr>
<td>CBM</td>
<td>Christoffel Blinden Mission</td>
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<tr>
<td>CIDA</td>
<td>Canadian International Development Agency</td>
</tr>
<tr>
<td>COMESA</td>
<td>Common Market for Eastern and Southern Africa</td>
</tr>
<tr>
<td>CRDB</td>
<td>Co-operative and Rural Development Bank</td>
</tr>
<tr>
<td>DAAT</td>
<td>David Anderson Africa Trust</td>
</tr>
<tr>
<td>DFID</td>
<td>Department for International Development</td>
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<tr>
<td>DPI</td>
<td>Disabled Peoples International</td>
</tr>
<tr>
<td>DSI</td>
<td>Danish Disability Council</td>
</tr>
<tr>
<td>EAC</td>
<td>East African Community</td>
</tr>
<tr>
<td>EFA</td>
<td>Education for All</td>
</tr>
<tr>
<td>EOTF</td>
<td>Equal Opportunities for All trust Fund</td>
</tr>
<tr>
<td>ERP</td>
<td>Economic Recovery Programme</td>
</tr>
<tr>
<td>ESR</td>
<td>Education for Self Reliance</td>
</tr>
<tr>
<td>FAWE</td>
<td>Forum for African Women Educationalist</td>
</tr>
<tr>
<td>FGM</td>
<td>Female Genital Mutilation</td>
</tr>
<tr>
<td>FIDIDA</td>
<td>Finish Disabled People’s International Development Association</td>
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<tr>
<td>GNP</td>
<td>Gross National Product</td>
</tr>
<tr>
<td>HDR</td>
<td>Human Development Report</td>
</tr>
<tr>
<td>HIPC</td>
<td>Highly Indebted Poor Countries</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>HKI</td>
<td>Hellen Keller International</td>
</tr>
<tr>
<td>ICD</td>
<td>Information Center on Disability</td>
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<tr>
<td>ICF</td>
<td>International Classification of Functioning, Disability and Health</td>
</tr>
<tr>
<td>IE</td>
<td>Inclusive Education</td>
</tr>
<tr>
<td>ILO</td>
<td>International Labour Organisation</td>
</tr>
<tr>
<td>IMF</td>
<td>International Monetary Fund</td>
</tr>
<tr>
<td>ISEC</td>
<td>International Special Education Conference</td>
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<tr>
<td>JASPA</td>
<td>Jobs and Skills Programme for Africa</td>
</tr>
<tr>
<td>NCCK</td>
<td>National Council of Churches of Kenya</td>
</tr>
<tr>
<td>NESP</td>
<td>National Economic Survival Programme</td>
</tr>
<tr>
<td>NLB</td>
<td>National Library for the Blind</td>
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<tr>
<td>OAU</td>
<td>Organisation of African Unity</td>
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<tr>
<td>O-Level</td>
<td>Ordinary Level</td>
</tr>
<tr>
<td>PRSP</td>
<td>Poverty Reduction Strategy Paper</td>
</tr>
<tr>
<td>RCSB</td>
<td>Royal Commonwealth Society for the blind</td>
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<tr>
<td>REPOA</td>
<td>Research on Poverty Alleviation</td>
</tr>
<tr>
<td>RNIB</td>
<td>Royal National Institute for the Blind</td>
</tr>
<tr>
<td>SADC</td>
<td>Southern Africa Development Community</td>
</tr>
<tr>
<td>SAPs</td>
<td>Structural Adjustment Policies/Programmes</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
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<tr>
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<tr>
<td>SHIA</td>
<td>Swedish Handicapped International Aid Foundation</td>
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<tr>
<td>SIDA</td>
<td>Swedish International Aid development Agency</td>
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<tr>
<td>SUWATA</td>
<td>Shirika la Uchumi la Wanawake Tanzania</td>
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<tr>
<td>TANU</td>
<td>Tanganyika African National Union</td>
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<tr>
<td>TGNP</td>
<td>Tanzania Gender Networking Programme</td>
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<tr>
<td>TLB</td>
<td>Tanzania League of the Blind</td>
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<tr>
<td>TLC</td>
<td>Tanzania Leonard Cheshire</td>
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<tr>
<td>TSB</td>
<td>Tanzania Society for the Blind</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
</tr>
<tr>
<td>UNESCO</td>
<td>UNITED Nations Educational, Scientific and Cultural Organisation</td>
</tr>
<tr>
<td>UPE</td>
<td>Universal Primary education</td>
</tr>
<tr>
<td>UPIAS</td>
<td>Union of the Physically Impaired Against Segregation</td>
</tr>
<tr>
<td>URT</td>
<td>United Republic of Tanzania</td>
</tr>
<tr>
<td>USAID</td>
<td>United States Agency for International development</td>
</tr>
<tr>
<td>USIS</td>
<td>United States Information Services</td>
</tr>
<tr>
<td>WDR</td>
<td>World Development Report</td>
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<tr>
<td>WED</td>
<td>Women Education and Development</td>
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<tr>
<td>WFP</td>
<td>World Food Programme</td>
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<tr>
<td>WHO</td>
<td>World Health Organisation</td>
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Introduction

"Two thirds of the world's illiterate people are women", (Nussbaum and Glover, 1995). Cultural and social construction of sex and impairment worsens the situation for a disabled woman who suffers not only from sexual discrimination but also from discrimination due to her impairment. Disabled women are denied their rights to education, rehabilitation and employment. These are essential tools for independent living and self-determination.

The nature and extent of denial is not the same everywhere as it is determined by the nature of existing social relations within a particular society. This is influenced by socio-economic, political and cultural settings at a given time. It means, therefore, that even within a particular society there is a difference from one community to another and from one period in a historical time to another. Research in the social sciences, especially in disability and feminism, has excluded the needs of disabled women in studies of social relations and productive activities. Consequently, the expectations that disabled women may have from society have been neglected.

This chapter introduces the study about the obstacles visually impaired women in Tanzania experience in their quest for education. The chapter is divided into four sections. The first deals with background information about the study in which the nature, aims and research questions are discussed. It sets the scene and justifies the relevance of the study. Section two is about the context of the study and the theoretical background. That is, it sets out the back-bone of the study and indicates how the problem under review was identified and defined. Section three deals with the conceptual framework in which various concepts are discussed introducing the theories underpinning the study. The last section summarises the major issues highlighted in the chapter.

Background

*Aims of the Study, Nature of Investigation and Research Questions*
The ultimate aim of this study was to investigate the obstacles visually impaired women in Tanzania face in their struggle for accessing and gaining education with the view to: firstly documenting those obstacles; secondly, contributing to the literature about marginalised groups in the society; and thirdly, influencing ongoing policy reforms in Tanzania so that they take on board the educational needs of visually impaired women. In contrast to most studies on disability in Tanzania, this research was carried out by a visually impaired woman who has experienced the real problems under review. It was part of the empowering process of the researcher and the researched who shared common experiences, could discuss issues together and could suggest how best their educational needs could be met.

The investigation was focused on Dodoma. Tabora was studied less intensively to provide some basis for comparison with the situation in Dodoma. Dodoma inhabitants comprise two main ethnic groups, the Wagogo and the Warangi. The Wagogo occupy the largest part of the region covering four out of five districts (Dodoma mjini, Dodoma vijijini, Kongwa and Mpwapwa). The Warangi occupy only one district (Kondoa). Tabora is inhabited mainly by only one ethnic group called the Wanyamwezi. They extend to all six districts of Tabora region (Tabora mjini, Tabora vijijini, Sikonge, Nzega, Igunga and Urambo). The characteristics of the cultures of the two ethnic groups are discussed in Chapter Five of this thesis. The selection of Dodoma as the main research area was based on the high occurrence there of visual impairments resulting from trachoma, cataract, glaucoma, vitamin A deficiency and measles.

Before 1985, the leading cause of visual impairment in the area was measles. But, from 1985 onwards, immunisation programmes were introduced in the area to combat the problem. From that time to-date, trachoma has remained the major infectious disease causing visual impairment in the area. Trachoma is transmitted by a type of fly known as "Musca sorbens". This fly carries bacteria called Chlamidia from an infected individual to others (Hellen Keller International [HKI], 2000; Ministry of health, 2000). Dodoma is a semi-arid part of the country. It is dry for most of the year. Because of the shortage of rain, water sources are scarce. The spread of Trachoma disease is accelerated by drought as shortage of water makes it difficult for people to wash their faces. As a result, Musca sorbens flies
easily transmit Chlamidia bacteria from the unwashed face of one person to another (HKI, 2000).

The question of drought is associated with the deeper problem of poverty. Neither food nor cash crops grow well. As the result, people do not have enough nutritious food. A particular problem is vitamin A deficiency, which is one of the major causes of visual impairment in the area. Similarly, the majority of people have no financial ability to access medical care services. All these factors contribute to Dodoma being the leading region as far as visual impairment in the country is concerned (Ministry of Health, 2000).

While the focus of the research was on Dodoma, Tabora town was used for comparative purposes. Cataract and vitamin A deficiency, are major causes of visual impairment in Tabora (Ministry of Health, 2000).

Three research questions guided the study of the constraints visually impaired women in Tanzania face in their efforts to access an education. These are elaborated as follows, via the delineation of a number of sub-questions.

Research Questions:
1. What factors inhibit the relative access of visually impaired women to education? How is visual impairment perceived by the Wagogo and Wanyamwezi communities? What meaning is attached to it? How does this impairment differ in terms of perception/meaning assigned to other impairments? What labels are attached to visually impaired women? How differently are visually impaired women perceived from their male counterparts? To what extent does this difference in perception influence educational disparities between visually impaired women and men? (a) How do visually impaired women understand their own situation? (b) Do they feel they are discriminated against? - Do they feel their parents treat them differently from their siblings? And if so how? - What obstacles do they face in getting access to education? (c) How do parents/guardians influence access of visually impaired girls/women to education?
- To what extent does ignorance of parents/guardians about the availability of educational services for their visually impaired daughters contribute to the problem of their daughters' lack of access to education?
- How does the educational background of parents/guardians hinder or facilitate access of visually impaired women to education?
- What forms of economic hardship do parents/guardians face and in which ways do they impede educational opportunities for their visually impaired daughters?
- What educational support do visually impaired women get from their parents/guardians and the community at large?

d) To what extent do educational reforms and other policies hinder or facilitate the access of visually impaired women to education?

2. What are the consequences of lack of education for visually impaired women, at an individual level and in terms of the community and the society at large?

3. What do visually impaired women think should be done to improve their access to education?

These research questions helped to focus my study and generate data to satisfy the aims of the investigation. Moreover, they helped in describing the outcomes of the obstacles caused by lack of access to education in the lives of visually impaired women in Tanzania and in suggesting ways that could help to improve their accessibility to education.

Context

According to disability and feminist theorists, research activities are not considered to be 'neutral or objective' but, rather to be driven by the personal motivation of the researcher (Abberley, 1992; Barnes, 1992; Barnes and Mercer, 1997; Marshall and Rossman, 1999; Morris, 1993; Oliver, 1992; Stone and Priestly, 1996; Vernon, 1997). They have emphasised that researchers are always present in the research process - whether they are consciously aware of this or not. These theorists validate the role of personal experience in grounding theory. The inspiration for this study stemmed directly from personal and practical experience. This experience has been shaped by the epistemological and ontological position of the social
model of disability that has guided the conceptualisation and analysis of the problem under review.

**Personal Experience**
As a visually impaired woman, I ventured into this exploration as a hornless bull who was greatly wounded by the very forces I investigated. My parents rejected me very soon after I became visually impaired at the age of two. They abandoned me to my grandmother’s home far away for four years of my childhood. My parents never wanted their neighbors to know that they had a visually impaired child. My sisters and brothers were made to believe that I was my grandmother’s last born. Hence, my parents made no efforts to develop my potential for future life. Whatever success I have so far achieved in my life has derived from friends and good Samaritans.

I started going to school at the age of six. However, my journey to education was a problematic and difficult one. The idea of sending me to school came from our local Lutheran Pastor who knew of a school enrolling visually impaired girls in Lushoto in northeastern Tanzania. The name of the school was Irente Blind School. In the first instance, my grandmother found this message a joke as she could not believe that a visually impaired child could gain any benefit from school. But she told the pastor that she would inform my parents about it so that they could make a decision. When my grandmother told my parents the story, they found the message unbelievable. They did not think there was any way I would benefit from school. On the other hand, they thought it was good for me to go because I would be staying in the school instead of continuing to live with my grandmother who was getting old. It was becoming difficult for her to continue to look after me, and my parents were not ready to have me around them. For that reason, they agreed to let me go.

My arrival at the school was a great joy and comfort for me because I met other children with whom I shared the same condition. Before this time, I always thought that I was the only visually impaired person in the world. Irente School was started by a Christian organisation from Germany called Christofell Blinden Mission (CBM). It functioned under the Lutheran church. All school costs were covered by
it. I started primary one with three other visually impaired girls. However, each
year, more and more visually impaired girls were identified in various parts of the
country and were brought to Irente to join us. At the end of primary three, the
school authorities decided that I should be promoted to primary four while the other
three pupils had to repeat primary three. The reason for this decision was that I
was the only girl out of the four who had passed the exam to a higher class.
However, this posed a dilemma as it became cumbersome to have a class of only
one pupil.

After a long discussion among the teachers, it was decided that I should be taken
to a mainstream day school to start primary four alongside sighted children. This
idea was introduced to the nearest mainstream school, Mhelo Primary School,
which was 15 kilometres from Irente School. On hearing of my case, teachers at
Mhelo School were in the first instance reluctant to accept me. They said it was
impossible for a visually impaired pupil to be integrated within a mainstream
school. They did not have a specialist teacher who knew Braille, so how would they
be able to mark my exercises and exams? They said they did not have a single
text book in Braille or on tapes, and they wondered how I could access the text
books. For these reasons they refused to admit me to Mhelo School. However, my
teachers at Irente School did not give up. They continued to put my case, assuring
them that I would cope. After long negotiations, Mhelo teachers agreed to admit
me on temporary basis for three months to observe my progress. The condition
was that if by then I didn’t prove capable in an integrated setting, I would be sent
back to Irente School.

This was a big challenge I had to face. Since Mhelo was a day school, the
arrangements were that I should continue to live at Irente and walk to Mhelo every
morning and come back after classes in the evening. Thus, Irente became my
home and Mhelo my school. But, the problem which remained was how I could
walk to school on my own. Fortunately, this problem was resolved when it was
found that one of the cooks at Irente School had a daughter who was attending
Mhelo School. Every morning his daughter came to get me and we walked to
school together. Sophy (the cook’s daughter) was starting primary four that year like me. So, with these arrangements, it worked very well.

As a nine year old girl, I had to face many challenges at this stage, perhaps too many for a girl of that age. First of all, I was sad to be separated from my friends at Irente because it meant seeing them for only a very short time in a day as I left early in the mornings and returned in the evenings. Secondly, it was important for me to be able to make new friends at Mhelo School as quickly as possible. Mhelo School had 600 pupils, and I was the only one who was visually impaired. The biggest challenge was that I had to prove my ability to cope in a mainstream school without a single textbook in an accessible format, and without any trained specialist teacher who could prepare my exercises and exams in Braille format as well as correct my answers. I had to find a way of accessing various textbooks in order to keep up with others in my class. In this situation, I got the idea that I needed to make as many friends as possible, knowing that being closer to them I could ask them to read aloud to me. So, live reading was the means I depended on whenever I needed to read a certain book. Moreover, I had to learn typing to be able to type my work in print as quickly as I could because no single teacher would have been able otherwise to correct it. I had to struggle to be able to cope with all these challenges within three months. Otherwise I would fail and be returned to Irente School to repeat a class.

After three months of hard work, I proved to be capable of integrating well with sighted pupils in the class. My teachers at Mhelo School were satisfied that it was possible for me to continue in a mainstream school. One of the unforgettable experiences in my school life at Mhelo was the day when I got attacked by a large group of honey bees on my way home. The rest of the pupils with whom I was walking managed to run for safety leaving me behind. I lay unconscious on the ground until a passer-by saw me. Having realised that I was visually impaired, he thought that I might have been a pupil of Irente Primary School. He reported the incident to Irente School. The teacher on duty drove to the area and took me to the hospital where I remained unconscious until the next day.
On completion of primary education, I joined Tabora Girls Secondary School which was a mainstream government secondary school. There I met four visually impaired girls from Furaha Blind School (special), which was also based in Tabora. Our group was the first intake of visually impaired girls to join secondary education in Tanzania. From there onwards, my secondary school life up to higher education continued to be hard and challenging. The most serious problem I faced was the inaccessibility of reading materials. There wasn't a single textbook in Braille or on tapes throughout my education in Tanzania. I relied on live reading mainly from fellow sighted students. Unavailability of appropriate learning equipment was another problem. There was only one Braille machine for five of us at Tabora girls, which we had to share among ourselves. Hence, there was a delay in writing notes from different sources. There were only three typewriters for five of us, causing disturbance particularly during examinations. Each time there was an exam, two of us ended up waiting for long hours before starting it.

Distance from home to school and vice versa was another major problem I experienced during my secondary school life at Tabora Girls. The school did not have any arrangements for us being escorted. It was up to us as individuals to organise an escort. I had to travel on my own each time because I couldn't afford to pay for an escort. Surely my life was put into danger. It is about 2000 kilometers from Moshi (my hometown) to Tabora. With such a long distance, my safety was in jeopardy as the train journey took three days to travel between the two towns. It happened on many occasions that I sat on the floor of the train corridor or in the toilet because the train was so full I couldn't get a seat.

Another unforgettable experience during this time was the day I was travelling on the train from school going home for holidays. It happened that there was a breakdown of the train I was travelling on. There were only two train services per week on that route (Mondays and Fridays). That day was a Monday. This meant there wouldn't be another train until Friday. So, anyone wishing to reach his/her destinations had to look for other means of transport. I had nobody to help me out. After wandering around for a while wondering what to do, a man came towards me and asked whether I needed any help. I thought the man was asking me with a
good intention. I therefore agreed to be helped, because I was really in need of whatever help I could get at that desperate moment. But poor me, it wasn't a genuine offer. The guy said that he was taking me to a police station for further assistance. He held my hand and off we started. We walked, and walked, and walked for about an hour. At that time I realised that we were no longer near the town where the train broke down. I did not hear either people's footsteps or cars moving around. Doubtfully I asked the man how far the police station was. He kept quiet. We continued to walk for another hour. Now I realised that I was not being taken to a police station. I was also aware that we were passing through tiny pathways surrounded with thorns and bushes on either side. Occasionally, I was scratched by those thorns. I was horrified. I started crying out for help. But, the man warned me that if I dared scream any further, he would strangle me. Therefore, I kept quiet. After a while I heard people talking from a distance. I shouted loudly for help. I was ready to face any fate. On seeing the people coming in front of us, the man escaped and ran away into the bushes with my suitcase. The two people who were coming towards us rescued me. They put me on a tractor which was being used by the farmers of that area for transporting sisal to the processing industry in town. I was driven to the Anglican bishop who lived in the town where the train broke down and I stayed with his family for two days while arrangements for sending me home were being made.

Despite facing all these challenges and many more, I never gave up. Instead, I continued to work hard to the best of my ability. My strategy for survival was to tolerate whatever situations I found myself in, and to maintain a positive outlook, even when things seemed impossible. So, I forged a life and an identity. I know there could be many visually impaired women out there who have faced similar or even harder situations in their lives. Therefore, no matter how privileged I am to be educated to PhD. level, I cannot detach myself from my fellow visually impaired women who are still suffering from societal oppression and exclusion. I feel obliged to document this issue in order to bring their plight onto national and international agendas with the expectation of explicitly revealing its magnitude.
Practical

My work experience increased my commitment to embark on this study. Most important was my work as a Secretary of the women's department within the Tanzania League of the Blind (TLB). This organisation is controlled and run by visually impaired people in Tanzania. For the three years I worked for the organisation (1987-1989), I made a lot of contacts with visually impaired women throughout the country. In my acquaintance with these women, I learned that the majority had never attended school at any level. Only a limited number had primary education, and very few had attained secondary education. I became more enlightened about the problems visually impaired girls were experiencing as soon as I became an education co-ordinator of the Tanzania Society for the Blind (TSB) in 1989. My responsibility was to visit all schools providing education for visually impaired children in the country to learn of their problems and needs and to report to the government and donor agencies. During my years in this post, from 1989 to 1992, I learnt that in primary schools there was a gender imbalance in the enrolment, dropout and completion figures. Disproportionately, girls were more affected. Furthermore, only two females had acquired university education as against more than 35 males from 1978 to the year 2000 (University of Dar-es-Salaam Blind students resource room, 2000). Thus, I kept asking myself, what was happening to the women? Why were they not making it? It was these experiences which led to my search for better theoretical understanding about why and how visually impaired women lagged behind in education.

Theoretical Standpoint

My personal and practical experience of the problem has been shaped by a particular ontological and epistemological position which has subsequently been used as an analytical tool and theoretical explanation of the problem. Ontology deals with nature and essence of phenomena, entities, etc. in the social world. Ontologically, the researcher is required to think and grasp the extent to which a study is fundamental to the envisaged problem (Blaikie, 1993; Mason, 1996; Maynard and Purvis, 1994). It is not sufficient simply to identify a research topic. Rather what is required is a deep intellectual conceptualisation of the problem prior to the identification of the research topic. My personal and work experiences
provided me with an impetus to analyse issues, hence influencing my ontological perspective. This helped me to conceptualise the nature and essence of the phenomena, entities, etc I wished to investigate. Truth cannot be taken for granted; it must be investigated and verified. I began with the belief that there must have been an identifiable set of factors causing lack of access of visually impaired women to education. As Maynard and Purvis (1994:77) have argued:

Social reproduction and contradiction must be shown not as abstract entities, but as embedded dynamically within the real lives of people in a way that is not simple 'correspondence' or 'reflection' of unchanged, somehow 'deeper' structures. Agent's intentions do not proceed from themselves, but are bound up in the complex way in which structures are inhabited through 'cultural forms'.

The social world must be understood. To this end, the researcher must ask him/herself such questions as "what is the nature of the phenomenon or entities or social reality which I wish to investigate"? (Mason, 1996: 11). Ontological issues are at the heart of sociological theorising, and therefore, according to Oliver (1996), ontological questions are best understood at the level of grand theory. The grand theory for this study is based on the social model of disability.

An epistemological position is about knowledge or evidence of things in the social world, be they social processes, social actions, discourses, meanings, or whatever (Mason, 1996:13). It is both a philosophical and theoretical foundation for the generation of knowledge which permits explanation or description. Literally it involves "principles and rules by which you decide whether and how social phenomenon can be known and how knowledge can be demonstrated" (Mason, 1996:13). One has to ask oneself such an underlying question as "what might represent knowledge or evidence of the entities or social reality which I wish to investigate" (Mason, 1996:13). In this case the question of epistemology is crucial and precisely fundamental as it lies at the heart of a political process whereby knowledge production is a "crucial part of any apparatus of power" (Stanley and Wise, 1993:188-89). The epistemology of the social model of disability is rooted in disabled people's experiences of oppression as the means by which one can generate the knowledge and evidence of reality and the nature of being.
The social model of disability as used in this study has influenced the way the researcher has come to understand disability precisely as socially constructed. Using this model, this study critiques the way in which society perceives disabled people. Challenges are directed to the medical model of disability, which regards the problems disabled people experience as their personal tragedy emanating from their impairments. That is, it focuses on bodily abnormality, disorder and deficiency and regards the individual’s physical, sensory or mental impairments as the causes of disability (Bames, 1999; Oliver, 1996). As Crow (1996:60) points out, such an interpretation is a key part of the attitudes and reactions of society to impairment. In this view disability is a product and oppressive quality of people who are socially marked as having impairments by those who are marked as physically, sensorially and cognitively 'normal' (Thomas, 2002:18). From this perspective rehabilitation and medical interventions are geared towards adjusting people with impairments to fit into the society (Bames, et al 1999).

On the contrary, the social model of disability locates the problems disabled people face squarely within society’s perceptions and settings. This includes failure to provide appropriate social services and to articulate different needs of disabled people (Oliver, 1996). That is to say, society imposes restrictions which impede access of disabled people to many services. Such restrictions are further intensified by prejudice at the individual level and discrimination at the institutional level (Bames et al 1999; and Oliver, 1996). According to Barnes (1994), impairment refers to one’s functional limitation and disability refers to the consequences of barriers external to the individual. However, some criticisms that the model neglects the ways lived experience of impairment can contribute to the restrictions have been raised. For example, Corker (2002: 21) maintains,

Certainly, when I think about my experience of disability, it has little to do with being unable to hear, but being unable to hear does at the same time affect how I orientate myself in the world. It has ontological consequences, notably the dependence on vision and text that interact in complex ways with the oppressive consequences of the social organisation of most articulate voices.
In his comments about this Low (2001) argues that it can sometimes be difficult to tell whether the difficulty a disabled person is facing is due to functional limitations or the result of social barriers, as it can be a continuum of both. But for scholars like Thomas (2002: 19) the question is not to reject the personal experience of impairment, so much as to consider disability in the ways in which “oppressive social relationships intersect, and the consequences that this has for lived experience”. Despite these criticisms, the social model raises the very significant point that disability is a political issue. It requires considerations of human rights, not charity. One of the greatest aspects of the model is its emphasis on the need to analyse how the exclusion of disabled people from the mainstream occurs and the forces that operate to exert a particular form of oppression which seemingly is not fixed to one society but common to all as far as disability is concerned. Disability is an identity of disabled people regardless of geographical boundaries.

Based on my life experience, practical experience and the theoretical framework I have adopted, I anticipated that the way that the identity of visually impaired women is socially constructed, based on cultural understandings, social/economic and political barriers and society’s negative attitudes towards gender and impairment, has served to inhibit their access to education. Education is a human right of all citizens of a country. It is one of the tools of personal and collective development. When someone is denied access to education, that person is denied those human and development rights. This is where the social model of disability intersects with this study.

**Conceptual Framework**

Every nation strives for development. It is an objective that most people take for granted. While economic progress is an essential component of development, it is not the only one. This is because development is not purely an economic phenomenon. Development also targets the improvement of human beings. In this context the UNDP’s *Human Development Report* (2000: 2) focuses on human development which is “...a process of enhancing human capabilities – to expand choices and opportunities so that each person can lead a life of respect and value.” This definition encompasses more than the material and financial side of people’s
lives. It considers development to be a multi-dimensional process involving the re-organisation and reorientation of entire economic and social systems. In addition to improvements in incomes and output, it typically involves radical changes in institutional social and administrative structures, as well as in popular attitudes and sometimes, even customs and beliefs. Development is further perceived as the process of improving all human lives through:

1. Raising people's living standards, i.e., their incomes and consumption levels of goods, medical services, education, etc.
2. Creating conditions conducive to the growth of people's self-esteem through the establishment of social, political and economic systems and institutions which promote human dignity and respect.
3. Increasing people's freedom to choose by enlarging the range of their choice variables, e.g., increasing varieties of consumer goods and services, (HDR 2000; Kisanji, 1996; Max-Neef, 1982; Nyerere, 1980; Rahman, 1994).

The ultimate goal of any meaningful development, in short, is to enable human beings to live satisfying lives. As such, all human beings aspire to this goal. Education is one of the important tools by which people achieve development. There is a correlation between education and people-centred development in that education, like development, is a process by which one's overall personality is enhanced. Freire (1993) in particular argues that the ultimate purpose of education must be the development of human beings, the realisation and unfolding of people's creative potential. As such education is a humanising process. Human endeavours are geared towards achieving education as one of the means for realising development. In this context, I regard education as a means by which people acquire knowledge and skills that enhance their employability in gainful and productive activities. Also I consider it as the means by which individuals increase their life opportunities, hence their ability to live independently. It is widely accepted that even a minimal level of education contributes to people's well-being, improved quality of life, better health, increased opportunities for employment, smaller families, lower infant mortality and so on (Katulushi, 2000). Moreover, education contributes to people's understanding of their rights and obligations as citizens. Despite these obvious benefits to human beings, the literature shows that females are not getting the same opportunities to pursue an education as their male
counterparts. (Cotton, 1995; Gorgendiere, 1995; Sibanda, 1995). According to Ackhurst, (2000), “these inequalities are caused by poverty of families, some traditional ceremonies, teenage pregnancies, early sexual practices, the distance of schools, the decision which belong to parents to send or not their child to school, discrimination in home tasks, the negative image of school considered as non-valued and non-lucrative for some parents.”

According to USAID (1999) “During the 1990s the nations of the world formally recognised that no country had emerged from third world status without educating its citizens. They further acknowledge that girls’ and women’s education is strongly associated with increased economic productivity, smaller family size, improved health and nutritional status, and education of the next generation of children”. USAID (1999) further points out that, the greatest constraint to girls’ education in all of the field of study countries was an absolute lack of primary school places for girls, their quantity, their quality, their sustainability and their costs. It is in this regard that Colclough (1995) considers lack of the appropriate affirmative measures by governments towards education of girls to be an important part of those problems. If men and women had equal years of schooling in sub-Saharan Africa, the mortality rate of children under five would have been 25 percent lower than the actual rate in 1990. In Brazil, more income in the hands of mothers would increase children’s height-for-age by a factor of four. In India, children of literate mothers spend two more hours per day in study than otherwise identical children of illiterate mothers. Raising women’s education relative to men’s and closing urban employment gaps between man and women in sub Saharan Africa – and in other developing countries where the AIDS epidemic is a present and future threat to many – will slow the spread of HIV and reduce the number of men, women and children who will die from this disease. Increasing women’s access to productive capital and education raises the productivity of female farmers and expands agricultural output. In Kenya, increasing the education and input levels of female farmers relative to that of male farmers would raise yields by as much as one-fifth of current output. Lifting years of schooling for girls in Africa, Middle East, and South Asia to match that of boys could increase economic growth rates in these countries by 0.5 to 0.9 percentage points per year (World Bank, 2000).
The constraints women face in accessing education create gender disparity in education (Ostergaard, 1992:1). Gender is socially constructed and in most cases takes the form of male dominance and female subordination. According to Mlay (2001) in any given society, gender relations can be analysed in respect of duties, patterns of ownership, accountability and decision making. This happens in a social setting that determines the life chances of each gender which tends to perpetuate inequalities between men and women. The nursery unit for gender inequalities is the family. Although not necessarily, in most cases non-domestic roles are assigned to men and domestic ones are assigned to women. According to Mukangara and Koda (1997) girls are brought up to be producers, reproducers and care-givers.

Most women in rural areas assume physically demanding activities which include domestic chores, family care and farm work (clearing land, sowing, weeding, harvesting and transportation of crops). Women’s work in pastoral communities include cleaning animal sheds, milking and milk-processing, caring and drawing water for calves and collecting fodder. In the formal sector women are employed in unskilled or semi-skilled menial jobs, e.g. office cleaning, secretarial work, reception telephone operation, etc. In contrast boys are trained to be heads of households, producers of high-value commodities and to dominate the decision-making process. In agriculture they concentrate mainly in cash crop production. In the pastoral communities, boys are responsible for taking animals to pastures. In addition business activities are male dominated, for example, owning shops, factories, etc. Men usually are employed in high skilled and better-paid jobs. They also occupy strategic posts in most social set-ups. In contrast, women are frequently accorded low status across many dimensions of society, from household to community and including development projects. In such a context, planners, who in most cases are males, tend to be biased and all too frequently to overlook women’s educational needs. Hence, women’s access to education is constrained by the assumption that they are naturally responsible for all domestic work of the household and nurturance. The socialisation of a girl is designed to make her fulfil those domestic and nurturance roles. The boy is sent to school to get knowledge and skills to work outside the home. Sending a girl to school is regarded in most
African cultures as waste of time and resources. But, while girls/women are disadvantaged as a gender in terms of education, the situation is particularly bad for disabled girls/women.

Disabled women face double discrimination because of their sex and because of their impairment. In the first instance discrimination is based on gender inequalities, while in the second it is based on social exclusion which manifests itself as disability (Begum, 1992; Boylan, 1991; Morris, 1993). In this context, I regard disability to be “a particular form of oppression ... the disadvantage or restriction of activity caused by a contemporary social organisation which takes no or little account of people who have physical, sensory or intellectual impairments and thus excludes them from participation in the mainstream of social activities” (Union of Physically Impaired Against Segregation (UPIAS) 1976; refer also to Barnes, 1992; Oliver, 1990 and 1996). From the onset of her birth or as soon as an impairment occurs, a disabled woman is the object of negative attitudes that stigmatise not just her, but often her family as well.

Research suggests that the birth of a child with an impairment is viewed negatively in most African societies. Often it is associated with a curse, witchcraft, promiscuity by the mother during pregnancy or punishment by ancestral sprits (Chimedza and Peters, 1999; Macha, 1996; Mwalutambi, 1995; Wimile, 1997; Wimile, 1998). The scientific causes of impairment are neither accepted nor believed. In many cases parents simply write off the future of their impaired girl child. They give little attention to her education, which could develop her potentials and talents, because of a false belief that she has no future. Some families resort to hiding or sometimes even killing the child with an impairment to avoid shame and isolation of the whole family by the community. (Mwalutambi, 1995; Wimile, 1998). All these attitudes which reveal the extent of oppression target directly at impairments. Impairment is lacking part or all of a limb, or having a defective organ or mechanism of the body (Oliver, 1996).

There is a common aspect to the way gender intersects with impairment. That is, notions about both gender and impairment are deep-rooted in the culture of a given society. I consider culture to be a totality of life of a particular society, tribe or ethnic
group. It embraces the wide range of language, ideas, beliefs, customs, taboos, codes, institutions, tools, techniques, works of art, rituals, ceremonies and other related components (Britannica, 1998). It is shared with members of a society and passed from one generation to another (World Book Multimedia Encyclopaedia, 1995). The notion of culture includes ideas formed within the context of a particular community or among people about their position in relation to nature and to each other, to their community, to the whole cosmos, to invisible and even to extranatural powers. The notion of culture also encompasses the different ways in which these ideas find expression in language, rites and institutions (Velt, 1982). Views, ideas, attitudes and perceptions which initiate and influence gender inequalities and prejudice against impairment are all rooted in culture. Some literature on gender and some on disability suggests that both women and disabled people are considered as deviants (Davis, 1997; Wolfensberger, 1972). Giddens (2001:203) defines deviance as "non-conformity to a given set of norms that are accepted by a significant number of people in a community or society." There is no simple way of dividing up those who deviate from norms and from those who conform to them. However, we need to study the underlying forces that categorise people as deviants or not in order to understand the nature of deviance itself. This reveals a process of interaction among people in a society. As Giddens (1993) argues, the labels applied to create categories of deviance express the power structure of society. By and large, the rules in terms of which deviance is defined, and the contexts in which they are applied, are framed by the wealthy for the poor, by men for women, by older people for younger people, by ethnic majorities for minority groups and non-disabled for disabled people. Culture therefore directly influences the ways in which gender and disability stereotypes are constructed, and their consequences for access to education.

From this perspective, gender, disability, education and development are central themes in this study. The ways in which they are linked to one another in influencing the lives of visually impaired women are explored in detail in subsequent chapters of this thesis.
Summary and conclusion

In this chapter, I have concentrated on introducing the study of obstacles visually impaired women in Tanzania encounter in their efforts to access and acquire education at various levels. As Rossman and Marshall (1999:2) note: "qualitative researchers are intrigued with the complexity of social interaction as expressed in daily life and with the meanings the participants themselves attribute to these interactions. ...Thus qualitative research is...grounded in the lived experience of people." The inspiration for this study has stemmed from my lived experience as a visually impaired woman and has been informed by my theoretical position. This gives an impetus to explore the lived experiences of other visually impaired women in accessing education.

The research sought to explore the extent to which visually impaired women had access to education and to assess their perceptions of how the constraints they may have experienced in seeking to access education had impacted upon their lives. As will be detailed in subsequent chapters, many of the women were found to be living in abject poverty and few had been able to achieve independent living. The nature of the research does not permit evaluation of whether poverty and dependence are a necessary outcome of limited access to education, nor of how far education on its own can lead to independence and economic security. But provides persuasive illustrative material regarding the life circumstances of the women interviewed and, most importantly, documents their assessment of the impact of limited access to education on those life experiences.

The research reported on here focused on education because of its potential to impart knowledge and skills that can in turn assist an individual to be creative, productive, conscious, confident, informed and active. As the government of The United Republic of Tanzania has declared (1995:viii), education "...provides desirable and worthwhile broad and in depth modes of thought, skills, attitudes and understanding needed for the full development of human thinking and actions. Education makes man aware of his own potentials and responsibility to change and improve his own condition and that of his society...". Such attributes are very important for individual achievements and community development as a whole.
But while education has potential benefit at both societal and individual levels, there is no guarantee that schooling will secure independence and economic security for any given individual. Indeed this must be particularly so for disabled people, who face constraints not just within education but also within the economic, social and political spheres. To concede this point, however, does not diminish the importance of education in imparting skills and knowledge which may assist the individual in more successfully navigating their life course, especially for those with impairments who encounter so many disabling obstacles in their daily lives.

There is always a challenge in constructing a research design suitable for tackling specific research questions. In the following chapter, I discuss the design used.
CHAPTER 2
METHODOLOGY

Introduction
Researching the lives of disabled women has neither been an agenda for many academics nor has it fascinated disability or feminist researchers. Examination of the situation of disabled women involves much more than analysis of disability and gender issues. Outsiders, however, don't know this. Most people not directly concerned with disability and gender issues still see them as "marginal", "specialist" issues, slightly boring, and certainly not having any major contributions to make to the big bold issues of development and social exclusion. I found this to be particularly true in relation to research. Anyone who begins to read about research methodology is quickly aware of the paradoxes within all research paradigms. Research across cultures adds to these dilemmas and a focus on disability and gender enlarges and illuminates them, sometimes to a dazzling degree (Stubbs, 1999). This research was carried out to address disability and gender as developmental issues, but in the process it dealt with matters of far greater significance.

This chapter introduces the range of methods used in the research process. It is divided into six sections as follows: current perspectives in doing disability research; the research design; sampling and data generation techniques; qualitative data analysis; difficulties experienced on the research and summary and conclusion.

Current Perspectives in Doing Disability Research
Over the recent years, disabled activists and their allies have taken a critical lead in shifting away from the hegemony of the medical model towards the social model of disability in doing disability research. This alternative perspective highlights the ways in which social and economic environments create and sustain disablement. As Barnes and Mercer (1996:2) have noted, "through their actions disabled people have sought to re-direct attention to the means by which individuals are disabled
by society. The focus is shifted to the level and character of social and economic disadvantage and discrimination experienced by disabled people". The shift has contributed to the emergence of a new emancipatory research paradigm which aspires to make "disability research more relevant to the lives of disabled people" (Oliver, 1992: 109). In the context of this paradigm, research becomes part of the solution, not part of the problem (Morris, 1992). It is "about facilitating the politics of the possible by confronting oppression at whatever level it occurs" (Oliver, 1992:110), and the systematic demystification of structures and processes which create disability. It is also about the establishment of a workable dialogue between the research community and disabled people in order to facilitate the latter's empowerment (Barnes, 1992: 122). It can be contrasted with a model of research which involves an asymmetrical relationship between the researcher and the researched (Barnes and Mercer, 1997), situating the researcher as detached, omnipotent and on a different critical plane from those studied, positioned in a knowledge hierarchy above those whom the research is about and who might be assumed to be its beneficiaries (Stanley and Wise, 1993). In such a case, it is argued that researchers tend to move between projects like "academic tourists", using disability as a commodity to exchange for advancing their own status and interests (Barnes and Mercer, 1997). Hence disabled research participants become simply "the passive objects of the researchers' investigations" (Abberley, 1992: 141). Actually, disabled people are not involved in setting the research agenda, production of knowledge or ownership of the research. They participate just at a certain point without being fully represented in various levels of the research process. What is therefore called for is reciprocity in the relationship between the researcher and the researched. Emancipatory research thus emphasises the need for the relationship between the researcher and researched in order to give due recognition to those being researched as "expert knowers" (Barnes and Mercer, 1997: 6-7). It is argued that in emancipatory research those being researched are the experts while the researcher remains merely a facilitator. So, in researching disability, "researchers have to learn how to put their knowledge and skills at the disposal of the research subjects, for them to use in whatever ways they choose" (Oliver, 1992: 111).
Traditionally conducted social science research has frequently silenced groups marginalised and oppressed by making them the passive objects of inquiry (Marshall and Rossman, 1999:4). Any research whose aim is to emancipate disabled people from oppression should refrain from this position. Therefore, those studies espousing commitment to the rights, needs and interests of disabled people should "surrender claims to objectivity through overt political commitment to the struggles of disabled peoples for self emancipation." (Stone and Priestly, 1996:706). (See also Marshall and Rossman, 1999; Vernon, 1997; Barnes, 1992; Abberley, 1992; Barnes and Mercer, 1997). Traditional claims to being objective and neutral are dismissed on the grounds that all knowledge is socially constructed and culturally relative (Kuhn, 1961). As Hunt (1981) puts it, faced with any socially oppressed group, social scientists have a choice of only two alternatives, either a firm commitment to serve the interests of the oppressed group to end their oppression, or the interests of the oppressors to continue it.

There is no middle way. Actually it is "precisely those who try to take a detached view of oppression who cannot be objective" (Hunt, 1981:43). Indeed, disability researchers should adopt a critical perspective (an emancipatory paradigm) which reveals different interests of the oppressed people (Becker, 1967; Zarb, 1992). I repeatedly argue that I make no such claims to objectivity. How can I be objective when I still suffer from rejection by some members of my family? Or, how can I walk majestically in a society whose social structures and attitudes are still highly discriminating? Hence, as a visually impaired woman, doing research on behalf of other visually impaired women, I am "both inside the culture and participating in that which I am observing. In other words, my research is as much about my own experiences as it is about others" (Vernon, 1997:58).

The Research Design

My research practice proceeded through three levels: individual, community and national. The individual level involved visually impaired women and their parents/guardians. Those participants gave accounts relating to their perceptions of impairment and gender, and to educational opportunities, economic abilities and participation of disabled women in community activities.
At the community level interviews were conducted with village heads/elders and schoolteachers. This level provided information concerning cultural practices and beliefs about gender and impairment, school practices and services for visually impaired girls and women. The national level involved discussions with government officials, i.e. policy makers from the educational sector, leaders from two NGO'S [Tanzania League of the Blind (TLB) and Tanzania Society for the Blind (TSB)] providing services for visually impaired people, and eye care medical personnel from Hellen Keller International (HKI). Information gathered from this level related to obstacles to special needs education and disability policies and the content and extent of visually impaired women's educational and other development programmes.

Sampling and Data generation Techniques

Sample Population
The question of selecting participants for research lies at the heart of any research. A total of 120 participants constituted the sample for this study (see Table 2.1).

Table 2.1: Number of actual population

<table>
<thead>
<tr>
<th>PARTICIPANT(S)</th>
<th>MALE</th>
<th>FEMALE</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visually impaired women</td>
<td>-</td>
<td>58</td>
<td>58</td>
</tr>
<tr>
<td>Parents/guardians</td>
<td>7</td>
<td>19</td>
<td>26</td>
</tr>
<tr>
<td>Village heads/elders</td>
<td>5</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Schoolteachers</td>
<td>8</td>
<td>6</td>
<td>14</td>
</tr>
<tr>
<td>Leaders from TLB</td>
<td>3</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Officials from TSB</td>
<td>3</td>
<td>-</td>
<td>3</td>
</tr>
<tr>
<td>Officials from MOED</td>
<td>4</td>
<td>-</td>
<td>4</td>
</tr>
<tr>
<td>Officials from HKI</td>
<td>1</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>31</strong></td>
<td><strong>89</strong></td>
<td><strong>120</strong></td>
</tr>
</tbody>
</table>

Key:
TLB – Tanzania League of the Blind
TSB – Tanzania Society for the Blind
MOED – Ministry of Education and Culture
The main sample comprised visually impaired women aged between 10 and 35. The age of ten was considered to be adequate for a child's self expression of her life experience. Thirty five years as an upper age limit was chosen so as to include all those who might have benefited from the 1974 Universal Primary Education (UPE) policy. There is a difference between town life and rural life. Challenges, experiences, opportunities and support services are not the same between the two environmental contexts. For this reasons participants in the main research area (Wagogo from Dodoma) were drawn from both rural and urban settings. The Wanyamwezi from Tabora were selected as a small sample to provide supplementary, comparative data.

The selection of parents/guardians was based on their relationship to the visually impaired women in the main sample. They were sampled from the main research area (Dodoma) only. It was not possible to interview every parent of every visually impaired woman interviewed because in many cases they lived some distance away. Most parents were living in rural areas while their daughters had often migrated to towns. But even when parents lived nearby, they were not always at home when the researcher visited the interviewees. She found some parents/guardians had gone to work on their farms far away, some had taken their cattle for grazing and some had gone to drink local brew somewhere. In a few cases parents/guardians were not willing to be interviewed.

Village heads or elders, schoolteachers, officials from the Ministry of Education and Culture, leaders from TLB, officials from TSB and an ophthalmologist from HKI were selected on the basis of their positions/status in their respective establishments. For example, village heads/elders were selected because of their knowledge and experience of cultural practices and beliefs in their areas. Schoolteachers were selected because of their roles as implementers of educational programmes for visually impaired children as required by the state. Officials from the Ministry of Education and Culture were selected because of their roles as policy makers at the national level. The selection of the ophthalmologist was due to his
medical expertise on the problem of visual impairment in Dodoma region. He was a director of Hellen Keller International Centre based at Kongwa district in Dodoma which diagnosed and treated eye diseases and had established rehabilitation projects for visually impaired adults. TLB was included as an organisation led and run by visually impaired people themselves, advocating and lobbying for their rights. TSB was selected as a service delivery NGO.

In order to locate women participants in Dodoma and Tabora, I contacted the local branches of the Tanzania League of the Blind. Other contacts were made through schools providing educational services for visually impaired people in those areas. Through their records, it was possible to locate participants. Additionally, through individual women, it was possible to identify more women to include in the sample using a snowballing technique. It was possible to meet village heads and elders, given the decisive positions they occupied in the community. Contacts with officials from the educational sector, schoolteachers, an ophthalmologist from HKI, leaders of TLB and TSB officials were made through their offices.

**Sampling Techniques**

I made preliminary visits to Dodoma Town, Kongwa, Buigiri and Chamwino (Dodoma Rural) to identify respondents. These were areas proposed in the initial planning of the research. However, I managed to locate only 7 visually impaired women in Dodoma Town and only 4 visually impaired women in Dodoma Rural who were eligible for my study by virtual of falling within the initially proposed age range (13 to 30 years). That did not satisfy the number of 60 visually impaired women (30 rural and 30 urban) as initially planned. Many women whom I met were above 30 years old. In addition, these eleven women whom I first identified lived very far apart from one another. Faced with a similar challenge of unanticipated methodological problems, Baylies and Bujra, (2000:54) comment: "designs which appear in advance to effectively translate theoretical questions into workable formula for empirical investigations do not always work out fully in practice. Unexpected events, the fickle intervention of the ‘human factor’, or realisation that what appeared initially feasible is impractical or does not take into account newly discovered factors of importance may all require some adjustments.” Accordingly, the holding of focus group
discussions, which was one of the methods proposed in the initial planning, was dropped.

I thus had to change my techniques to increase the sample in order to generate enough and reliable data for the study. Using the snowballing technique through the eleven visually impaired women initially identified, and other sources of information like TLB branches and schools, I widened the scope of the study to include more districts and villages. I also decided to extend the age range from ten to 35. Eventually, the study covered a total of 42 villages/townships in four districts of Dodoma (see Table 2.10). By the end of July, I had identified a total of 197 visually impaired women in those 42 localities. However, owing to the specified age boundaries, only 49 (seven from Dodoma Town and 42 Dodoma Rural) were interviewed. Additionally, after discussion with my supervisor, I decided to extend the study to include a few women from a second ethnic group in order to illustrate more clearly the impact of cultural beliefs about visual impairment. Tabora region was included for the purpose.

Table 2.2: Distribution of Villages/Townships Visited in Dodoma Region

<table>
<thead>
<tr>
<th>No.</th>
<th>Name of area/village</th>
<th>District</th>
<th>Distance from Dodoma</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Dodoma Centre</td>
<td>Dodoma town</td>
<td>0 km</td>
</tr>
<tr>
<td>2.</td>
<td>Miyuji</td>
<td>Dodoma Town</td>
<td>3 km</td>
</tr>
<tr>
<td>3.</td>
<td>Veyula</td>
<td>Dodoma Town</td>
<td>20 km</td>
</tr>
<tr>
<td>4.</td>
<td>Hombolo</td>
<td>Dodoma Town</td>
<td>45 km</td>
</tr>
<tr>
<td>5.</td>
<td>Mkonze</td>
<td>Dodoma Town</td>
<td>15 km</td>
</tr>
<tr>
<td>6.</td>
<td>Kikuyu</td>
<td>Dodoma town</td>
<td>9 km</td>
</tr>
<tr>
<td>7.</td>
<td>Nliyuka</td>
<td>Dodoma Town</td>
<td>7 km</td>
</tr>
<tr>
<td>8.</td>
<td>Buigiri</td>
<td>Dodoma Rural</td>
<td>32 km</td>
</tr>
<tr>
<td>9.</td>
<td>Chamwino</td>
<td>Dodoma Rural</td>
<td>35 km</td>
</tr>
<tr>
<td>10.</td>
<td>Kawawa</td>
<td>Dodoma Rural</td>
<td>45 km</td>
</tr>
<tr>
<td>11.</td>
<td>Chalinze</td>
<td>Dodoma Rural</td>
<td>50 km</td>
</tr>
<tr>
<td>12.</td>
<td>Chinangali I</td>
<td>Dodoma Rural</td>
<td>55 km</td>
</tr>
<tr>
<td>13.</td>
<td>Mlowa barabarani</td>
<td>Dodoma Rural</td>
<td>59 km</td>
</tr>
<tr>
<td></td>
<td>Location</td>
<td>District</td>
<td>Distance</td>
</tr>
<tr>
<td>---</td>
<td>------------------</td>
<td>-------------------</td>
<td>----------</td>
</tr>
<tr>
<td>14.</td>
<td>Mroda</td>
<td>Dodoma Rural</td>
<td>67 km</td>
</tr>
<tr>
<td>15.</td>
<td>Sasajila</td>
<td>Dodoma Rural</td>
<td>79 km</td>
</tr>
<tr>
<td>16.</td>
<td>Mvumi Mzula</td>
<td>Dodoma Rural</td>
<td>57 km</td>
</tr>
<tr>
<td>17.</td>
<td>Kigwe</td>
<td>Dodoma Rural</td>
<td>36 km</td>
</tr>
<tr>
<td>18.</td>
<td>Chidilo</td>
<td>Dodoma Rural</td>
<td>45 km</td>
</tr>
<tr>
<td>19.</td>
<td>Mbabala A</td>
<td>Dodoma Rural</td>
<td>27 km</td>
</tr>
<tr>
<td>20.</td>
<td>Isanha</td>
<td>Dodoma Rural</td>
<td>34 km</td>
</tr>
<tr>
<td>21.</td>
<td>Kongwa Town</td>
<td>Kongwa</td>
<td>82 km</td>
</tr>
<tr>
<td>22.</td>
<td>Ibwaga</td>
<td>Kongwa</td>
<td>88 km</td>
</tr>
<tr>
<td>23.</td>
<td>Sagala</td>
<td>Kongwa</td>
<td>96 km</td>
</tr>
<tr>
<td>24.</td>
<td>Ijaka</td>
<td>Kongwa</td>
<td>90 km</td>
</tr>
<tr>
<td>25.</td>
<td>Ndulugumi</td>
<td>Kongwa</td>
<td>122 km</td>
</tr>
<tr>
<td>26.</td>
<td>Mkoka</td>
<td>Kongwa</td>
<td>126 km</td>
</tr>
<tr>
<td>27.</td>
<td>Songambele</td>
<td>Kongwa</td>
<td>102 km</td>
</tr>
<tr>
<td>28.</td>
<td>Zoisa</td>
<td>Kongwa</td>
<td>135 km</td>
</tr>
<tr>
<td>29.</td>
<td>Chamae</td>
<td>Kongwa</td>
<td>90 km</td>
</tr>
<tr>
<td>30.</td>
<td>Hogolo</td>
<td>Kongwa</td>
<td>98 km</td>
</tr>
<tr>
<td>31.</td>
<td>Mbande</td>
<td>Kongwa</td>
<td>66 km</td>
</tr>
<tr>
<td>32.</td>
<td>Mkutani</td>
<td>Kongwa</td>
<td>88 km</td>
</tr>
<tr>
<td>33.</td>
<td>Machenje</td>
<td>Kongwa</td>
<td>88 km</td>
</tr>
<tr>
<td>34.</td>
<td>Mautya</td>
<td>Kongwa</td>
<td>100 km</td>
</tr>
<tr>
<td>35.</td>
<td>Ndalibo</td>
<td>Kongwa</td>
<td>102 km</td>
</tr>
<tr>
<td>36.</td>
<td>Ngomai</td>
<td>Kongwa</td>
<td>117 km</td>
</tr>
<tr>
<td>37.</td>
<td>Mpwapwa Town</td>
<td>Mpwapwa</td>
<td>125 km</td>
</tr>
<tr>
<td>38.</td>
<td>Lumuma</td>
<td>Mpwapwa</td>
<td>197 km</td>
</tr>
<tr>
<td>39.</td>
<td>Mwankiyanga</td>
<td>Mpwapwa</td>
<td>124 km</td>
</tr>
<tr>
<td>40.</td>
<td>Ving'hawe</td>
<td>Mpwapwa</td>
<td>127 km</td>
</tr>
<tr>
<td>41.</td>
<td>Lupeta</td>
<td>Mpwapwa</td>
<td>133 km</td>
</tr>
<tr>
<td>42.</td>
<td>Inzomvu</td>
<td>Mpwapwa</td>
<td>145 km</td>
</tr>
</tbody>
</table>

Three techniques of sampling, namely purposive, snowballing and opportunistic, were used. Purposive sampling involves the researcher deciding who should be selected (Goetz and Lecompte, 1984; Patton, 1990; Cohen and Manion, 1994). This technique is based on selecting information rich cases for in-depth study. As
Patton (1990: 169) says, "Information rich cases are those from which one can learn a great deal about issues of central importance to the purpose of the research". This means that participants are picked on the basis of the presupposed information they can give. Snowballing involves the researcher using contacts with study participants to identify other sources of information (Noblit and Hare, 1988; Staiback and Stainback, 1988; Cohen and Manion, 1994). According to Patton (1990: 176), snowballing is a qualitative research technique which involves the researcher in tracing and trying to get hold of a source of information. It is guided by such questions as: Who knows a lot about this? Whom should I consult? Where else should I go? Where else can I get more information? (Bagandanshwa, 1997). When such questions are posed to strategically placed persons, the researcher is able to identify individuals to add to the sample. Closely related to snowballing, is opportunistic sampling. While snowball sampling is based on individuals, opportunistic sampling is based on opportunities. According to Patton (1990:179), "field work often involves on the spot decisions about sampling to take advantage of new opportunities during data collection". This means that the qualitative research designs can include new sampling strategies to manipulate unforeseen opportunities while the researcher is already in the field. Opportunistic sampling gives the researcher the flexibility needed in qualitative research. It allows the researcher to follow the direction in which the data leads. It takes advantage of whatever the field unfolds for the good of the study. Opportunistic sampling enabled the researcher to use her presence in the field and opportunities which emerged as a basis for gathering further information (Bagandanshwa, 1997). Through this technique, the researcher gathered information from such individuals as an ophthalmologist from HKI, a representative from World Food Programme, a zonal special needs education inspector, a Headmistress and three visually impaired students of Tabora Girls Secondary School, all of whom were encountered during the research process.

Characteristics of the Visually Impaired Women in the Sample
49 visually impaired women from Kongwa, Mpwapwa, Dodoma rural and Dodoma town are of the Wagogo ethnic group. The 9 women from Tabora region belong to the Wanyamwezi ethnic group.

Table 2.3: Place of Origin

<table>
<thead>
<tr>
<th>Place</th>
<th>Kongwa District</th>
<th>Mpwapwa District</th>
<th>Dodoma Rural</th>
<th>Dodoma Urban</th>
<th>Tabora Urban</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number (%)</td>
<td>16 (27.6%)</td>
<td>4 (6.9%)</td>
<td>21 (36.2%)</td>
<td>8 (13.8%)</td>
<td>9 (15.5%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

Table 2.4: Age Distribution

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number (%)</td>
<td>7 (12.1%)</td>
<td>12 (20.7%)</td>
<td>17 (29.3%)</td>
<td>14 (24.1%)</td>
<td>8 (13.8%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

Table 2.5: Occurrence of Impairment

<table>
<thead>
<tr>
<th>Time</th>
<th>Before Birth</th>
<th>After Birth</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number (%)</td>
<td>7 (12.1%)</td>
<td>51 (87.9%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

Table 2.6: Causes of Impairment

<table>
<thead>
<tr>
<th>Cause</th>
<th>Measles</th>
<th>Convulsion</th>
<th>Cataract</th>
<th>Accident</th>
<th>witchcraft</th>
<th>Not known</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number (%)</td>
<td>41 (70.7%)</td>
<td>3 (5.2%)</td>
<td>1 (1.7%)</td>
<td>1 (1.7%)</td>
<td>5 (8.6%)</td>
<td>7 (12.1%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

The causes of impairment as shown in Table 2.6 are summarised from the point of view of the informants themselves as they/their parents/guardians based their
understanding on a range of sources e.g. hospitals and traditional healers as well as parents/guardians' own experiences of such diseases.

Table 2.7: Marital Status

<table>
<thead>
<tr>
<th>SINGLE</th>
<th>LIVING WITH PARTNER</th>
<th>MARRIED</th>
<th>DIVORCED</th>
<th>WIDOWED</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>35 (60.3%)</td>
<td>17 (29.3%)</td>
<td>0 (0%)</td>
<td>4 (6.9%)</td>
<td>2 (3.4%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

Table 2.8: Number of Children

<table>
<thead>
<tr>
<th>No child</th>
<th>Expecting</th>
<th>One</th>
<th>Two</th>
<th>Three</th>
<th>Four</th>
<th>Five</th>
<th>More than five</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>16 (27.6%)</td>
<td>2 (3.4%)</td>
<td>26 (44.8%)</td>
<td>7 (12.1%)</td>
<td>3 (5.2%)</td>
<td>2 (3.4%)</td>
<td>0 (0%)</td>
<td>2 (3.4%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

Table 2.9: Level of Education

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>12 (20.7%)</td>
<td>9 (15.5%)</td>
<td>35 (44.8%)</td>
<td>4 (6.9%)</td>
<td>5 (8.6%)</td>
<td>1 (1.7%)</td>
<td>0 (0%)</td>
<td>1 (1.7%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

Key:
P/school – primary school
O/level – ordinary level secondary school
A/level – advanced secondary school
Table 2.10: Main Source of Income

<table>
<thead>
<tr>
<th>Source/Guardians/ Other relatives</th>
<th>Farming (small Scale)</th>
<th>Business (Petty)</th>
<th>Street Begging</th>
<th>Wage Employment</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 (24.1%)</td>
<td>5</td>
<td>7 (12.1%)</td>
<td>29</td>
<td>3</td>
<td>58</td>
</tr>
<tr>
<td>(8.6%)</td>
<td></td>
<td>(50%)</td>
<td></td>
<td>(5.2%)</td>
<td>(100%)</td>
</tr>
</tbody>
</table>

Source: Field data

**Data Generation**

Various methods were used in generating data i.e. interviews, observation and a review of pertinent documents. Before the commencement of empirical data generation, I sought permission from the Prime Minister's Office and The Ministry of Regional Administration and Local Government. This was necessary, as it is the rule in Tanzania to get permission from such authorities when conducting any research. In Dodoma the research was done from May to July 2000. Interviews with officials from the Ministry of Education and Culture, TLB leaders and TSB were conducted in August 2000. Interviews in Tabora were conducted in September 2000. With exception of Ministry of Education and TSB officials where English language was used, other interviews were conducted in Kiswahili.

**Interviews**

Interviews were the main method I used in generating data. There are various forms of interviews ranging from highly structured to open ended. However semi-structured and loosely structured interviews were the techniques I used in generating data. It is argued that interviews are the most reliable instrument for data generation in qualitative research. They have been described as "a conversation with a purpose" (Kahn and Cannel, 1957: 149; see also Marshall and Rossmann, 1999). They variously involve thematic topic-centred, biographical or narrative approaches. They are useful when the researcher does not have a structured list of questions, but does have a range of topics, themes or issues which she/he wishes to cover (Mason, 1996: 38).

My use of interviews was based on the recognition that my participants were the best source for my data generation. Mason (1996: 39) argues that "... people's
knowledge, views, understandings, interpretations, experiences, and interactions are meaningful properties of the social reality... ". She goes on to suggest that "a legitimate way to generate data on these ontological properties is to interact with people, to talk to them, to listen to them, and to gain access to their accounts and articulations" (Mason, 1996: 39-40).

Oakley (1981:41) contends that " finding out about people through interviewing is best achieved when the relationship of interviewer and interviewee is non-hierarchical and when the interviewer is prepared to invest his/her own personal identity in the relationship". She suggests that the interview should not be a one way process with the researcher extracting information from the research participant, but a process where the researcher also answers any questions which may be asked of her, and shares her experiences as appropriate. Finch (1984:76) suggests that when a woman interviews another woman, both parties share a subordinate structural position by virtue of their gender.

It has been suggested that reciprocity is "an inevitable result of an `insider' researching the lived experiences of the group to which she belongs: through the mutual exploration of the research topic which is of common concern to them both" (Vernon, 1997). Although I am a visually impaired woman, and therefore share a subordinate structural position with those I interviewed, I was not convinced that this would automatically result in reciprocity. Due to the poor condition of the majority of visually impaired women interviewed, as discussed in Chapters Five and Six, and the fact that I had a car and a paid research assistant, they may have felt inferior and reluctant to take part in the interviews. Also difference in ethnic background could have some effects, especially with those who could not speak Kiswahili and would like their experiences to be a secret between them and the researcher and not involving a third party (an interpreter). Being aware of this, I devised methods to enable participants to share common concerns with me.

**Building up Reciprocity with Participants**

First, as suggested by Barnes (1992), I made preliminary visits to potential participants to introduce myself to them. This enabled me to share with them the purpose of the study - including what I hoped to gain from the research and what
might be the benefits of the research for them. Ideally I discussed with them the themes to be covered in the interviews. I contacted them again a week later to establish whether they were ready to take part in the interviews. I was impressed to find out that all of them consented as they found the research worth doing for their future prospects. I made it clear to them that, should anybody wish to discontinue the interview at any stage, she was free to do so. Those initial visits helped to break down any social barriers between the potential participants and myself. This was manifested during actual interview process as each of them took part from the beginning to the end.

During the interviews, my research assistant and I used tape recorders, diaries and notebooks. Recording and writing were done with the consent of the participants. If there was anything which the participant(s) did not wish to be recorded or noted, we switched off the tape recorder and stopped taking notes. After recording we played back the conversation for participants to comment on and make changes if they wished. This was important for two reasons. Firstly, it gave participants more control over the research process, and secondly, it enhanced the validity of the research outcome (Bames, 1992). Participants were also encouraged to ask me questions if they so wished, both about my own experiences and about the education system. Many of them did so. This resulted in a more friendly atmosphere between myself and them. In this way, the participants found the interviews an enjoyable and rewarding experience.

Throughout my field work in Dodoma and Tabora I required private transport, as public transport was not available to match my research day schedule. Furthermore, most of the villages I visited were too remote to be reached by public transport. Interviews with visually impaired women took place in their own homes. Three women lived in a rehabilitation centre for blind people in Buigiri Village in Dodoma Rural. This was the place where adult visually impaired people went for a period of three months to learn vocational skills in gardening, weaving, cooking, poultry, etc. On completion of their three month course they returned to their villages to manage their own lives. However, the three women who took part in the research had lived at the centre for a longer time (more than a year) as they could not return to their villages because they had been rejected by their families. So, the authority of the
centre allowed them to continue to live there. Interviews with school teachers were conducted in the schools where they taught. Officials of the Ministry of Education and Culture, TLB TSB and HKI were interviewed at their respective offices.

Advantages
There were both advantages and disadvantages to the use of the interviews in this study. The following are some of the advantages:

1. There was a direct social contact between the researcher and the participants.
2. The researcher was in full control of the interview situation.
3. There was always a possibility of probing for elaboration or more information.
4. Participants had more freedom of expression.
5. There was a possibility of the researcher explaining the objectives of the research and even elaborating some questions where necessary, thereby maximizing participants' involvement and the accuracy of their responses.
6. The researcher directly experienced and witnessed the realities and situations in the field. This contributed to personal understanding and analysis of the situation.
7. Interviews gave the researcher first hand information about the educational situation of the visually impaired women.
8. They enabled the researcher to develop personal friendship with participants.
9. It was possible to crosscheck the collected data while still in the field.

Disadvantages
There are inherent weaknesses in the interview method which anyone wishing to use this technique of data generation should bear in mind. The following are some of the disadvantages:

1. Data can be biased. The following factors may contribute to bias:
   a) The researcher being influenced by value judgements, personal perceptions and beliefs.
   b) Participants becoming reserved, and thereby withholding information.
   c) Participants deciding, for whatever reason, to impress the researcher.
2. There was a danger of the researcher being carried away from the aims of the study by the interview situation, thereby collecting irrelevant data.

3. Unfamiliarity with the local language may cause the interviewer to fail to ask questions which evoke long narratives. The interviewee may fail to comprehend responses to the questions or various elements of the conversation.

The disadvantages inherent in interviews as a research method were minimized or controlled by keeping close to its principles, and winning the confidence and the co-operation of participants.

**Observation**

Observation is another method used to generate data in this study. Although I am visually impaired, I fully used my other senses to learn and grasp some useful information for the research and drew on the visual impression of my research assistant. According to Mason (1996:60), observation "is used to refer to methods of generating data which involve the researcher immersing herself or himself in a research setting, and systematically observing dimensions of that setting, interactions, relationships, actions, events, and so on, within it". Through observation, the researcher, in collaboration with the research assistant, was able to construct diaries, notebooks, biographies, written account and stories. All these were crucial for the research due to their "... authenticity, credibility, representativeness and meaning" (May, 1993:169).

**Survey of Documentary Evidence**

Use of documentary evidence is one of the methods "... of social research, and one which many qualitative researchers see as meaningful and appropriate in the context of their research strategy" (Mason, 1996:71). The documents I used in this research were policy papers, statements, Acts, statutes, reports, books, journals, manuals, inventories and other publications. To obtain these I visited libraries, schools enrolling visually impaired children, the Ministry of Education and Culture, the Tanzania League of the Blind and the Tanzania Society for the Blind.
Qualitative Data Analysis

In this study, a thematic system to present research findings is used. Short extracts from interviews have been used to explain and support the narratives presented. Several specific cases are highlighted to reveal key issues. Pseudonyms have been used when presenting extracts and case studies.

Qualitative data analysis involves a search for general statements about relationships among categories of data. It entails an examination of data to identify participants' "truths" (Marshall and Rossman, 1999; Strauss and Corbin, 1997). It is a process which is time consuming, complex and at worst messy. But it is also fascinating. By and large qualitative data are exceedingly complex and not readily transformable into standard measurable units. They vary in level of abstraction, frequency of occurrence and relevance to central questions in the research. Analysis should start very early in the research process in order to be able to adjust research strategies should this become necessary. This entails exercising control over the research process by virtual simulations and checking or testing of these ideas.

Probably the most fundamental operation in the analysis of qualitative data is that of discovering significant classes of things, persons and events and the properties which characterise them. This process continues throughout the research. The analyst names classes and links one with another. She/he continues this process until her/his propositions fall into sets, in an ever-increasing density of linkages (Shatzman and Strauss, 1973).

My data analysis was carried through frequent reading so as to become familiar with those data in intimate ways. As Marshall and Rossman (1999:153) comment, "during the reading process, the researcher can list on note cards the data available, perform the minor editing necessary to make field notes retrievable, and generally 'clean up' what seems overwhelming and unmanageable". I adopted a descriptive analysis, the purpose of which was to display the daily events of the phenomenon under study (Patton, 1990). The data was then coded, reduced or summarised and displayed (Miles and Huberman, 1984). For the data obtained from documentary
sources, the process involved content analysis. This is "a method for describing and interpreting the artefacts of a society of social group" (Marshall and Rossman, 1999:117). Although there are two ways (through computer software or manually) a researcher can analyse data, the unsuitability of computer software for visually impaired researchers made it difficult for me to use this method. Instead, coding of data and analysis was done manually.

After the fieldwork, data analysis proceeded through the following stages:

**Transcription stage**
The first task was to transcribe the data from spoken to written format. The average time taken for each interview was two hours. Considering the number of interviewees (120), about 250 tapes were transcribed. This process took around three months to be completed. Although on the one hand the process was tiring and boring, on the other, some stories and conversations from the tapes were so interesting that the researcher was kept cheerful and enthusiastic enough to continue with the process. At the end of transcription, a large volume of written data was yielded.

**Data cleaning stage**
The researcher then went through the bulk of written data editing and cleaning unmanageable data. According to Bagandanshwa (1997) when revising the data, the researcher goes through all smaller units of data systematically, carefully, analytically and critically. In the process, reorganisation of the data is carried out. Making sense of data defines the moments of telling whether or not truth and clarity exists in the voluminous data in hand. The main purpose is to use the data effectively and parsimoniously in explaining phenomena.

**Tallying and Coding Stage**
In this stage the researcher analysed and arranged the data thematically in relation to the research questions. According to Marshall and Rossman (1999:155), "coding is the formal representation of analytic thinking. The tough intellectual work of analysis is generating categories and themes. The researcher then applies some
coding schemes to those categories and themes diligently and thoroughly marks passages in data using codes”. As Miles and Hubermann (1994:57) add, “the organising part will entail some system for categorising the various chunks, so the researcher can quickly find, pull out, and cluster the segments relating to a particular research question, hypothesis, construct, or theme”. Using a pencil the researcher marked stories, case studies and extracts belonging to one category or particular research question by giving it the number of that research question. Then all the selected categories under one variable were grouped together in a separate computer file. Where the variable required distribution of response of the total sample, the researcher used the tallying method. Tallying also helped to quantify frequency of response for a certain variable. The researcher evaluated the data for their usefulness and centrality. Marshall and Rossman (1999:157) write, “the researcher should determine how useful the data are in illuminating the questions being explored and how they are central to the story that is unfolding about the social phenomenon”.

There are no clear cut rules in qualitative studies that can determine when the analysis is complete. In quantitative studies, the completion of the tests of significance may signify the end of the analysis. While the researcher is made aware that the analysis is complete by the completion of the tests of significance in quantitative studies, in qualitative studies the researcher has to depend on personal intellectual know how and imaginative abilities in establishing that the process of analysing data is complete. Data analysis in a qualitative study continues until it is no longer yielding new significant results (Bagandanshwa, 1997; Guba and Lincoln 1985; Guba and Lincoln, 1989; Mertens and McLaughlin, 1995; Patton, 1990).

Translation stage

After coding, I translated the data from Kiswahili to English in order to make it ready for application in the presentation of research findings and analysis.
Difficulties Experienced on the Research Period
As I began my research, I felt a mixture of excitement and nervous anticipation as to what lay ahead. Although I had worked hard to prepare for my research, I was not so naive as to imagine that obtaining a PhD would be pain free! Inevitably, there have been hurdles along the way; many of them unforeseen, which have had an effect on both the research process and the quality of its findings. In this section, I would like to draw attention to those hardships that I feel have placed the greatest difficulties on my study.

a) Access to Computer Facilities
On arriving at the University, I discovered that I did not have access to a computer. Although there were computers for students to use, none of them was adapted with a screen reader and voice software to make it accessible for a blind person like me. Furthermore, I had not received any prior information telling me that I was responsible for providing my own computer and the software adaptations I needed. Although I quickly set about trying to secure funding to obtain my own computer and necessary adaptations, it took me three months before I was finally successful. During this time, from October 1998 to early January 1999, I was unable to write anything. I felt this was a huge waste of time and something I could have been, and would have appreciated being, forewarned about.

b) Computer and software support
Having secured my own computer with its adaptations, I then discovered that, because I was using a personal rather than a university computer, I encountered further problems when I needed technical support of one sort or another. It became obvious that I was not entitled to computer and software support from the University unless I paid for it. Thus, whenever I needed help with my computer, I invariably had to wait, sometimes through as many as three weeks of negotiations, before anyone would come and fix it for me. Although I understand that there was no obligation on the part of the University to provide personal computers, and whilst I appreciate the efforts of my supervisor to negotiate support for me on
several occasions, the time spent waiting for assistance was frustrating, especially as this happened several times. I found this whole experience to be very stressful.

c) Insufficient skills in information technology
Accessing the Internet had not been easy and I am conscious that I have no doubt missed much useful information from internet sources. Although my computer was connected to the university network, and could access the Internet as much as I wanted, unfortunately I did not have enough skills to do so. The little I managed to browse, download and read from the Internet was by trial and era, which sometimes did not yield good results. Lack of necessary Internet skills was due to my inability to pay (£300 per day) for someone who could train me in that technology. I feel that my approach to accessing information from the Internet was very ad hoc and as such proved a major obstacle in retrieving information in support of my research.

d) Personal assistance
Again, on arriving at the University, I discovered that no arrangements had been made to provide me with a personal assistant. I was told that as an international student, the University was under no obligation to provide me with an assistant. If I required help, I would have to employ somebody myself. Financially, this was not possible for me. As a blind person, it was extremely difficult familiarising myself to a new environment. For a long time, I struggled to find my way around, for example, to the library, Leeds Student Medical Practice, Transcription Centre, etc. On many occasions, when I wanted to go somewhere around the university, I had to stand somewhere on campus and ask anyone passing by, if he/she could assist me. This was so frustrating, time consuming and energy draining, and would have been avoided had a personal assistant been provided. Furthermore, my inability to employ a personal assistant made me face many difficulties in coping with day-to-day academic activities. For example, much of the academic literature was not in Braille or on tapes, which are my accessible formats. Although there is a transcription centre at Leeds University for transcribing material into different formats, sometimes it took a very long time before I could get them back due to the
centre's heavy workload. Having someone to help in live reading would have been more helpful.

e) Financial Constraints
Much of the period of my studies has been characterised by financial worries. The amount of stipend promised by a charity to cover my living expenses was pitifully small and not enough to live on in the city of Leeds. The worry of not having enough money to live on, of debts accruing, and of not knowing if any further money would become available has been enormous. Living with this perpetual worry playing out in the background of my mind has played a big role in distracting me from my studies. When there has been so much else to think about, it would have been helpful to be free of this particular concern.

f) Fieldwork in Tanzania
Many of the rural areas I surveyed to generate data were inaccessible. Although I had a hired car, the roads were in such poor condition that travelling was arduous. Sometimes we had to push the car because it got stuck in deep holes. Sometimes we had to leave the car a substantial distance and walk because the area was bushy and had no road/path leading to our destination. Worse still was the fact that most of the parents or guardians I met could not speak Swahili (Tanzania's main national language) as I had expected, but spoke their own local dialect, Kigogo. This meant that I had to hire an interpreter to translate my questions and then to interpret the answers for me. I had not anticipated this. It was an expensive and time-consuming exercise, prolonging the period of my fieldwork.

g) Loneliness
I have been very lonely during the course of my research. I accept that doing a PhD is a lonely exercise at the best of times. However, I have felt particularly lonely and isolated within the department where I have had very little interaction with other students or staff members. I feel I have been forced to persevere in a very lonely and isolated situation, with little moral support or encouragement. This feeling of loneliness has persisted at home, causing me much personal suffering.
Greater support from the University in general and the department in particular would have been very much appreciated.

h) Family concerns
During the course of my research, three deaths of my close family members occurred: my sister, my brother and my mother. The effect of three bereavements in three consecutive years cannot be overestimated; neither can words adequately describe my grief here. Suffice to say it has been a very difficult time for me. On each occasion I took time out from my studies to return home.

i) Health concerns
From July 2001 to July 2002, I experienced severe lower back pain. All medical tests done on me to diagnose the problem proved inconclusive and I kept being referred from one specialist to another without much success. The time taken to receive an appointment, combined with the worry of not knowing what was wrong with me and the constant pain, have been major set backs for me. Physically, it was very painful if I sat for a long time, while at the same time I wanted to work as many hours as possible in order to complete my thesis.

Summary and conclusion
This methodological chapter has taken us through a number of issues such as current perspectives in doing disability research, the research design, sampling techniques and data generation, data analysis and difficulties experienced on the study. In reviewing current perspectives in doing disability research, the importance of reciprocity between the researcher and the research participant was emphasised as crucial. It has also been affirmed that research should be part of the emancipation of those being researched and not an instrument of oppression. As regards the research design, discussion centred on the three levels, i.e. individual, community and national. Sampling was carried out through purposive, snowballing and opportunistic techniques. Each informant was selected according to his/her ability to provide information concerning access of visually impaired women to education in Tanzania. The process of data generation was effected through a combination of three methods, namely: interviews, observation and a
survey of documentary evidence. Such a combination was important in strengthening the validity of the data. This chapter has highlighted the various stages used in transcribing, analysing, coding, tallying and translating the data for final use. Finally, the chapter has also pointed out a number of difficulties experienced by the researcher, such as lack of a personal assistant, financial constraints, bereavement, delay in receiving technical support and loneliness faced at different times during the study.
CHAPTER 3

GENDER, DISABILITY, EDUCATION AND DEVELOPMENT: EMERGING EXPERIENCES FROM SELECTED COUNTRIES

Introduction

"As development co-operation has grown in the twentieth century, so has the realisation that women should be key participants in and beneficiaries of policies, programmes and projects concerned with both poverty eradication and the achievement of social and political improvement in people’s lives" (Pearson, 2000). But deep structures of our society still operate in such a way that the objectives of involving women as key partners in the development process is an elusive goal in most developing countries, Tanzania included. The majority of women continue to be discriminated against in respect of many social amenities such as education and the like. This gender inequality in the development process has impacts that are especially serious for disabled women who suffer double discrimination, first as women and second as disabled people.

Many development planners forget to include in their process of planning and policy making the needs and practical experiences of disabled women. This is where the problem lies. I do not wish to denigrate or totally dismiss the role of professionals or service providers. What I challenge is their tendency to regard disabled people as passive objects instead of being their allies. When projects are designed, for example, "the project target group is often treated as an undifferentiated group of 'people' without recognising the special needs of women; more likely and worse, a male biased vocabulary is used to describe the target group which becomes 'men' rather than 'people', in this way the women of the target group actually disappear from sight and from thought" (Longwe, 1991; 149). In the same vein, the construction of sex and impairment obscures the visibility of disabled women from the vocabulary of 'people' to 'disabled ones' who seem to be not occupying a distinct place in the world of people to sufficiently deserve equal opportunity in the development programmes in their society. In this latter analysis, such women are further discriminated against not only by men who plan and
implement different projects and programmes, but they are disregarded also by their fellow non-disabled women and disabled men. This is true because as Kisanji (1996) argues, "domination is dualistic. Each one of us is sometimes a dominator and sometimes is dominated. We sometimes oppress and sometimes we are oppressed".

Domination and oppression occur in a particular cultural context. It is through a given culture that patterns of domination and oppression are configured. The literature search done for this study revealed that in Tanzania priorities for researchers and professionals in disability and special needs education included attitudes, classroom practices, causes, identification and prevention of disability, policy reviews, legislation, awareness raising, service development, curriculum, assessment, community rehabilitation and co-ordination (Bagandanshwa 1993; Bagandanshwa 1997; Choma, 1985; Macha 1996; Mkaali 1996; Mlimahadala, 1996; Mujaya, 1982; Possi 1986; Wimile, 1997). But the literature review revealed no exploration of the gender dimension in special needs education generally and for visually impaired people in particular. This gap in the literature provided an important justification for this study.

In this chapter I will consider the wider literature which explores issues of culture, gender, disability, development and education, and will examine the ways these interact with one another in shaping the lives of visually impaired women in Tanzania. The discussion establishes the theoretical framework of the study. The Concise Oxford Dictionary (1995) defines theory as a supposition. It is a system of ideas based on general principles independent of reality. A theory is a speculative view. It is speculation about the form and the content of a particular thing or situation. It resides within the sphere of abstract knowledge or speculative thought. Theories are the expositions of principles. They are a collection of propositions to illustrate the principles. According to de Vaus (1998:12), "using the theory we predict how things will be in the world. If our predictions are correct, this lends support to our theory. If they are wrong, either the theory is wrong or our predictions were illogically derived from theory". As Gilbert (1993:21) points out, "a theory highlights and explains something which one would otherwise not see, or would find puzzling". Thus, theory helps sociologists to ground their explanations
about social realities. As May (1997:26) comments, "theory is of use for the interpretation of empirical data". However, it also enables a more general orientation in relation to political, historical, economic and social issues, as well as providing a basis for critical reflections on the process of research itself, social life, and social systems in general.

Deviance and Cultural Construction of Sex and Impairment

It must be acknowledged that theorising culture is a difficult task. Even more difficult is the prospect of changing deeply held cultural beliefs. In some cases, it is like punching a wall whose outcome is to hurt your own hands. Nussbaum (1995: 1) comments, "to say that a practice endorsed by tradition is bad is to risk erring by imposing one's own way on others who surely have their own ideas of what is right and good. To say that a practice is all right wherever local tradition endorses it as right and good is to risk erring by withholding critical judgement where real evil and real oppression are surely present". Some of those traditions and practices, which are culturally embedded are bonds which serve to unite a community. However, some serve to systematically disadvantage certain groups. Confronted with these dilemmas between challenging oppressive practices and the inherent repercussion of the challenges to the unity of the family, Hooks (1995:3-4) comments:

Secrecy about family, about what went on in the domestic household was a bond between us, was part of what made us family. There was a dread one felt about breaking that bond. And yet I could not grow inside the atmosphere of secrecy that had pervaded our lives and the lives of other families about us. Strange that I had always challenged the secrecy, always let something slip that should not be known growing up, yet as a writer staring into the solitary space of paper, I was bound, trapped in the fear that a bond is lost or broken in the telling.

This section discusses how cultural representation of women comes about and the ways it is linked to impairment, and finally the implication of this representation for visually impaired women's access to education. The "other-ness" which appears to be the basis of the deviance theory emanates from within the society to shape it and consequently is shaped by it as well. Goffman (1963:3) argues that:
Society establishes the means of categorising persons and the complement of attributes felt to be ordinary and natural for members of each of these categories. Social settings establish the categories of persons likely to be encountered there. The routines of social intercourse in established settings allow us to deal with anticipated others without special attention or thought.

Some of the concepts which people take for granted are consciously or unconsciously developed by a society as people interact. They are the result of prejudice and stereotype, both of which play a critical role in defining and categorising people. As Goffman (1963) says, this categorisation affects how we view "others". Who are those others? Sex, which is a biological factor, sets the raw materials for cultural perceptions and stereotypes. As Begum (1996:158) comments, "notions of 'normality' and male superiority verses female inferiority are all based on theories and philosophies about the human body". The so-called 'Other' originates from deviance theory. A person can be said to be deviant if he/she is perceived as being significantly different from others. When this difference is negatively valued (Wolfensberger, 1972), it can be constructed as social stigma.

It is not my intention to dwell on stigmatisation theory here. What I am interested in is the way the notion of deviance is applied in the construction of sex and impairment. The relevant point here is that "...deviancy is our own making; it is in the eyes of the beholder. An observed quality only becomes a deviancy when it is viewed as negatively value-charged. And the same quality that may be negatively valued in one culture may be positively valued in another" (Wolfensberger, 1972: 13).

Many parallels exist between the social meanings attributed to female bodies and those assigned to impaired bodies. Both the female and the impaired body are cast within cultural discourse of many societies as deviant and inferior; both are frequently excluded from full participation in public as well as economic life; and both are defined in opposition to a valued norm which is assumed to possess a corporeal superiority (Thomson, 1997). Perhaps, the most fundamental association of femaleness with impairment occurs in the fourth book of Generation of Animals, Aristotle's inaugural discourse about the normal and the abnormal in which he
refines the Platonic concept of antinomies so that bodily variety translates into the hierarchies of the typical and the aberrant. "[A]nyone who does not take after his parents," Aristotle (quoted in Thomson, 1997) asserts, "is really in a way a monstrosity, since in these cases Nature has in a way strayed from the generic type".

The first beginning of such deviation is when a female is formed instead of a male. According to Thompson (1997) the philosopher whom we might consider the founding father of Western taxonomy projects idealism onto corporeality to produce a definitive, seemingly neutral "generic type" along with its particularized antithesis, the "monstrosity", whose departure from such a "type" constitutes a profound "deviation". In this narrative of embodiment, Aristotle employs a spatial metaphor which places a certain corporeal figure who is deemed to be the "generic type" at the normative center of his system. On the outer margin is the "monstrosity", the corporeal consequence according to Aristotle, of Nature's having "strayed" from a central paradigm along a path of deviance, the first stop along which is the female body (Thompson 1997: 278). Aristotle's choreography of bodies thus conjoins the monstrosity - whom we would today term congenitally disabled – and the female on a course leading away from the definitive norm. In Book Two, Aristotle also affirms his connection of disabled and female bodies by stating that the female is, as it were, a deformed male or – as it appears in other translations – a mutilated male (cited in Thompson, 1997).

More significant than his simple connection with respect to imagery and metaphors of impairment and femaleness, as Thompson (1997) argues, is that Aristotle reveals here the source from which all otherness arises: the concept of a normative "generic type" against which all corporeal variation is measured and found to be different, derivative, inferior, and insufficient. Not only does this definition of female as a "mutilated male" inform later versions of a woman as a diminished man, but it also arranges somatic diversity into hierarchy of values that assigns plenitude to some bodies and its lack to others based on their configurations.

Furthermore, by focusing on defining femaleness as deviant in relation to a designated norm of 'maleness', Aristotle also initiates the discursive practice of
marking what is deemed aberrant while concealing the position of privilege by asserting its normativeness. Thus we witness what may have been the origin of a logic which has become familiar in discussions of gender, race, or disability: male, white, or able-bodied superiority is naturalized, remaining undisputed and obscured by the ostensible problem of female, black, or disabled 'deviance'. What this passage makes clearest, however, is that without the monstrous body to demarcate the borders of the generic, without the female body to distinguish the shape of the male, and without the pathological to give form to the normal, these taxonomies of bodily value that underwrite political, social, and economic arrangements would collapse (Thompson, 1997:279-280).

The notions of normalcy and the normative body reveal the processes by which meanings are attached to bodies and by which all forms of corporeal diversity (including race, gender and impairment) acquire the cultural meanings undergirding a hierarchy of bodily traits that reflects and perpetuates distribution of privilege and power. The meanings attributed to extraordinary bodies reside not in inherent physical flaws, but in social relationships through which one group is legitimated by possessing valued physical characteristics and maintains its ascendancy and its self-identity by systematically imposing the role of cultural or corporeal inferiority on others. This theoretical focus on cultural configurations and ideological discourses of the body provides a basis for exploring overlapping of disabled, racialised and gendered bodies (Davis, 1997; Stone, 1998; Thompson, 1997).

Grading people in deviance theory means establishing groups or classes of people in relation to what is socially defined as normal (Branfield, 1996; Giddens, 1993; Giddens, 2000). This mode of classifying people perpetuates disadvantage and establishes the place disadvantaged groups occupy in society and in terms of social relations. I believe this approach to be extremely useful in accounting for the experience and treatment of those with 'deviant' bodies, in respect of gender or impairment in such spheres as education and development.
Gender

Many scholars and academics have defined gender so as to capture its origins and effects. Ostergaard (1992:6), for example, contends:

Gender refers to the qualitative and interdependent character of women and men's position in society. Gender relations are constituted in terms of the relations of power and dominance that structure the life chances of women and men. Thus gender divisions are not fixed biologically, but constitute an aspect of the wider social division of labour. This, in turn, is rooted in the conditions of production and reproduction, and reinforced by the cultural, religious and ideological systems prevailing in a society.

Wallace and March (1991: 2-3) view gender identity of women and men as "socially and psychologically determined", and this means also historically and culturally influenced. They argue that biological and certain physical conditions, (chromosomes, external and internal genitalia, hormonal states and secondary sexual characteristics) lead to the determination of male or female sex. In respect of gender, however, social and cultural perceptions of masculine and feminine traits and roles must be taken into account. There is considerable, but not total, correlation between female sex and feminine gender, and male sex and masculine gender. "In every culture, in every age, women and men relate to each other in culturally specified ways" (Eviota, 1992). They come into this relationship as a result of their interaction for survival. Eviota (1992) refers to this manner of interaction as a sex-gender system; it defines how males and females become men and women; it allocates specific tasks and roles to women and men on the basis of their gender; it fixes the parameters of approved sexual and procreative behaviour and it sets the tone of gender-based social relations and social worlds. This relationship is influenced by expectations of each sex towards the other. The consequences of such expectations are the social construction of gender imbalance or discrimination whereby women are systematically disadvantaged relative to men. If the origins of these expectations are biologically influenced, they are subsequently mythically distorted by cultural perceptions, ideological measures and uneven distribution of resources in society. Gender relations are perpetuated
by a process of socialisation whereby young generations are inculcated with norms, values, traditions, customs, etc., which are propagated and perceived by society.

Socialisation begins within the family, then is carried on in the school and finally the community at large through various means including the media and oral literature. Wallace and March (1991:3), discussing this issue, comment that:

Gender is learnt through a process of socialisation and through the culture of the particular society concerned. In many cultures boys are encouraged in the acts considered to display male traits (and girls vice versa) through the toys given to children (guns for boys, dolls for girls), the kind of discipline meted out, the jobs or careers to which they might aspire and the portrayal of men and women in the media. Children learn their gender from birth. They learn how they should behave in order to be perceived by others, and themselves, as either masculine or feminine. Throughout their life, this is reinforced by parents, teachers, peers, their culture and society. Every society used biological sex as one criterion of describing gender but, beyond that simple starting point, no two cultures would completely agree on what distinguishes one gender from another. Therefore there is considerable variation in gender roles between cultures.

Thus we can argue that when a child is born, he or she is free from gender roles. It is the society, especially through the family, which initiates and reinforces gender relations. As Sen (1995: 260) argues,

In family behaviour, inequalities between women and men (and between girls and boys), are often accepted as 'natural' or 'appropriate' (even though they are typically not explicitly discussed). Sometimes the operational decisions relating to these inequalities (e.g. providing more health care or nutritional attention to boys vis-a-vis girls) are undertaken and executed through the agency of women themselves.

Biologically, sex differences form part of the raw material with which social relations are constructed. In this construction, biological females and males become gendered individuals, women and men, feminine and masculine, through culture. Females and males actively acquire gender identities which correspond,
more or less, to socially and normatively defined notions of femininity or masculinity (Eviota, 1992:4). Thus, what is feminine or masculine has more to do with culture than biological identity.

Biology may influence but does not determine the relationship between women and men. That relationship is often presumed to be complementary and mutually supportive. But men have their own destiny, as do women when it comes to biological considerations. We do not expect a man to deliver a child or to breastfeed, as we do not expect a woman to produce semen. It goes without saying that sex differences are natural.

Gender may thus be defined as a set of roles and behaviors which come to be associated with and expected of males and females in a given social setting. The rationale which provides for gender prescriptions can be described as a gender ideology. Whilst biological roles are said to be static, fixed and unchangeable, gender roles are dynamic, flexible and changeable in accordance with the changes taking place in the environment and society. There is diversity of gender roles across and within cultures, across time periods and within single generations (Eviota, 1992). Gender operates through roles, which form a hierarchical division of labour and are rooted in the conditions of production and reproduction, reinforced by the cultural, religious and ideological systems prevailing in a given society (Ostergaard, 1992). The hierarchy defines which roles are suitable for women and which are suitable for men. In a male dominated patriarchal society, the ideology places a man at the top and as a head of those below.

Depressingly, many traditions have portrayed women as less important than men and less deserving of basic life support, or of fundamental rights that are strongly correlated with quality of life, such as the right to work, education and political participation (Nussbaum, 1999:1). Sometimes women respond to these traditions and customs by resistance. But sometimes such traditions and customs become so internalised that women come to find them as the order of the day, and hence endorse their own second class status.

Generally, gender relations can be understood in terms of a conflict model. The model is derived from the place they occupy in a historically determined system of
social production, their relations (in most cases fixed and formulated in law) to the means of production, their role in the social organisation of labour, and consequently the dimensions of the share of social wealth of which they dispose and the mode of acquiring it" (Rumyantses, 1983:21). The gender which controls resources and property dictates the state of affairs in a given social setting and determines who should get what, how and why (Uphoff and Ilchman, 1973). Thus, the interplay between position, relation to the means of production, role in the social organisation of labour and the share of the social wealth determines how an individual gains esteem and deference.

In this connection, Eviota asserts (1992) that, just as Gross National Product (GNP) represents the aggregate value of goods and services produced and exchanged, an analogous "gross social product" would result from the aggregate value of esteem and deference produced and exchanged in relations of production. This implies that men and women derive their social esteem and deference from their interactions and the place they occupy in the relations of productions. The position is not a fixed entity for a particular gender. In some cases, for example, women own property and exercise influence within a male dominated society. What is significant is the position gendered individuals occupy in an overarching hierarchy in relation to the distribution and redistribution of resources including services. Such a position in the hierarchy is determined by the culture of a particular society at a given time. History reveals that throughout the world women generally have had little power, are under-resourced and are inferior to men as a result of male defined roles relating to women in the relations of production.

**Gender and Development**

The subordinate position of women in the society has frequently led to their exclusion in taking part in various developmental projects and programmes. This entails gender inequality in the development process. Eade and Williams (1995:170) explain how seriously gender inequalities affect women in society. They comment:

Gender-based inequalities directly prejudice the life chances of half the world's population. Poverty and exploitation damage both men
and women, but women's subordination makes them more vulnerable than men in the same circumstances. Women's poverty is greater, and deepening, in relation to men's. Women face particular obstacles to development and fulfillment because of social and cultural discrimination against them on the grounds of sex.

The story of gender inequality is in many ways a story of asymmetries, rights and privileges between men and women. Asymmetries in rights, by gender, are pervasive – often existing in countries' legal statutes, in customary laws, in communities and in households. These asymmetries pertain to many rights, including the right to marry and to divorce, to determine family size, to inherit and manage property, to allocate labour among household enterprises, to undertake income earning activities outside the home, to travel, to have access to social amenities, and so on. Gender inequalities happen because, as Longwe (1991) points out, the rights of women are not given key attention by those designing and planning projects and programmes. Eade and Williams (1995) consider those rights in relation to needs. They categorise needs as practical and strategic. Practical needs arise from concrete conditions experienced by women themselves, given their position within their society. They follow from lack of clean water, inadequate housing, few opportunities for earning money, sick children, etc. and are linked to immediately perceived inadequacies of living conditions. On the other hand strategic needs derive from an awareness of women's subordination. They include equality in legal rights, educational opportunities, and land tenure; women's control over their own bodies; violent husband and the right to participate in decisions about development intervention (Eade and Williams 1995).

Unlike with strategic needs, satisfaction of practical needs does not challenge existing gender inequalities and the oppression of women by men. As Eade and Williams (1995:210) argue, "there are dangers in supporting projects which only address practical needs, such as, for increased income, in ways which do not also address strategic needs". Such projects perpetuate the dependency of women on men as they do not focus on the fundamental problem of power relationships between men and women which seems the major cause for the subordination of women. Power is derived from many sources, economic, social, political, personal, organisational, etc. According to Eade and Williams (1995), projects should aim to
empower women by focusing on such key issues as control and ownership of the project resources, including land, and by giving education and training in various managerial skills to ensure their efficient running. In short, projects should aim to develop human capabilities as a tool for self emancipation and participation in developmental activities. This is gaining momentum in many developing countries, which are undergoing major transformations toward democratic change and the security of human rights. Many women are increasingly taking part in such transformations in which gender issues are gaining prominence. While the situation of women in general is changing in developing countries, and their voices are increasingly being heard, the plight of disabled women is still disappointing.

**Gender and Disability**

Stereotypical attitudes have pushed disabled women to the extreme margins of society. Most of the problems faced by women in general have greater impact on the lives of disabled women. Baylies (2002: 1) has argued that “the intersection of impairment and gender involves the intersection of notions about gender roles and expectations (and power relations or inequitable authority and control between men and women) and notions about impairment”. Dialectically there is an association between the social forces that construct disability and those which construct gender. The cultural and social construction of gender has led to segregation of women in the division of labour so that the women’s roles are seen as insignificant; and women’s work is often not accorded its full worth. The same cultural and social constructs intensify discrimination of disabled women with regard to expectations of nurturance and participation in socio-economic, political and cultural spheres.


> The income earning opportunities of women with disabilities are severely constrained. So, too, are their opportunities to be nurtured and to nurture, to be lovers and be loved, to be mothers if they desire. Women with disabilities are less likely than non-disabled women or disabled men to fulfil roles customarily reserved for their respective sexes.
A disabled woman is thus often regarded as a useless and disempowered creature whose contribution to reproduction and production is totally invisible. Rather than performing a nurturing role, she needs herself to be cared for. The meanings attributed to impaired bodies of women by cultural representation have adverse consequences for her dignity as a valuable member of society.

Socialisation of young people overtly or covertly perpetuates gender inequality and discrimination of disabled women. Socialisation is the process by which the youngest members of a community are "made social" – trained to live in the world of adults and introduced to that world’s accumulated knowledge and experience. Socialisation is necessarily a selective process, sorting out from all of the group’s lived experience only what seems essential to life. Within that package, it also separates out what is or is not relevant to sets of individuals – whether they are boys or girls, disabled or not, and the nature of their roles in a particular community (Mbunda, 1991).

The low status of disabled women in the society is affirmed by socialisation processes affecting the ways in which the society treats them. As a result, non-disabled feminists and disabled men who dominate the disabled people's movement have been strangers to the concerns of disabled women. Morris (1996: 1) comments that "our encounters with both groups have often made us feel powerless for we have either been treated as invisible or our experiences have been defined for us". The invisibility of disabled women in society has led to severe discrimination in all spheres of their lives. According to Stace (1987:302), "if, in addition, disabled women are illiterate, unskilled and poor, these disadvantages may well lead to a deprivation of human rights". Eade and Williams (1995) have put the point clearly: "just as girls are discriminated against in terms of health and educational opportunity, so it is not always seen as a priority to ensure that disabled girls receive adequate treatment for their condition, especially if this might entail economic hardship for the rest of the household". Disabled girls/women are more likely to be decreed to be 'useless' than disabled boys/men. Baylives (2002) argues that there is a tendency for levels of discrimination by families, societies, employers, government institutions and agencies to be greater for disabled women than for disabled men. This has led to the conclusion by Morris (1993) that non-
disabled people's behaviour towards disabled women is a social problem: "it is a social problem because it is an expression of prejudice. Such expressions of prejudice take place within personal relationships as well as through social economic and political institutions". 

While a non-disabled woman is said to suffer from gender inequalities, class, race/ethnicity, religion, etc, her fellow disabled woman also suffers from inequalities based on impairment. In the hierarchical relations of production composed of gendered roles, impairment places a disabled woman at the bottom of the ladder. Her chance to make a significant contribution to the society is restricted by the position she finds herself in. This of course has direct and indirect consequences for her social esteem. She is left in the cold to struggle alone since both non-disabled women and disabled men with whom she experiences common oppression have so frequently neglected to include her needs in their research agendas and emancipatory strategies (Asogotan, 2001; Begum, 1992; Morris, 1993).

Gender, Disability and Development

In discussing development, a crucial issue is poverty which is a typical characteristic of developing countries, including Tanzania. Therefore, gender and disability must be seen in this context of poverty and efforts to alleviate it. Poverty reduction is fundamental to national and international debates whereby countries of the North are being pressured by debt relief campaigners to write off the debts of indebted countries. Debts have been a major constraint to achieving sustainable development in poor countries. Tanzania is one of the countries under the Highly Indebted Poor Countries (HIPC) programme, the aim of which is to use debt relief support to improve social services, particularly education and health. These, as we shall see, are crucial for the enhancement of human development.

From the general discussion, we affirm that the ultimate purpose of development is the betterment of the lives of all human beings. This is all the case when we consider the opposite of underdevelopment which implies worsening of the lives of people. Kalabula, (2000:3) comments that poverty is frequently accompanied by
extensive child malnutrition, tuberculosis, sicknesses occasioned by poor sanitation and inadequate access to safe sources of drinking water, and a range of vitamin deficiencies. These factors adversely affect the possibility of profitable participation in social and productive activities.

Developing countries face daunting problems such as the threat of economic stagnation and decline, rapid population growth, widening economic disparities among and within nations, war, and many other factors which seriously affect their development programmes (Abilla, 1992; Werner, 1992). Though the poverty problems of Africa have a long history, their seriousness became particularly acute in the 1980s. As Cornia et al (1992:1) argue, “the 1980s witnessed a deterioration in the economic and social conditions of most households in Sub-Saharan Africa, which was starkly reflected in negative trends in income per capita, investment rates, declining social service delivery and child welfare”. The crisis necessitated governments to embark on the structural adjustment policies aimed at alleviating it. But, such strategies reversed some of the previous efforts governments had made in terms of building education and health infrastructure (universal primary education, literacy initiatives for adults, primary health care, etc). While it is important to talk about the economic crisis, it is equally important to remember that there is a parallel human crisis. Increased rates of disease, malnutrition and child mortality can be directly traced to the cut in expenditure on social services.

Many theories abound as to the best way to deal with this ‘human’ crisis. The protagonists of the ‘trickle down’ theory believe that generating wealth in a country will eventually lead to the trickling down of that wealth to even the poorest members of society. So everyone benefits. However, my experience in the field has produced no evidence to support this notion. What there is clear evidence on though, is trickled down poverty so that a national economic debt problem becomes a family level debt crisis. The result of the failure of this approach is that the 1980s have been called ‘the decade of lost development’. As Carmen (1996:76–77) contends:
The 'trickle down' principle, on which the social credibility and political acceptability of the entire structure rest, is experienced as a cruel hoax by the ever-growing ranks of the excluded. After four development decades, UNDP and UNESCO statistics show that the number of people having no access to drinkable water is in 1.75 billion range and rising, while those deprived of primary health care stands at 1.5 billion. World illiteracy is stuck at the 1 billion (two thirds of whom are women) and rising, notwithstanding United Nations campaigns to bring 'Health for All' and Literacy for All' by the year 2000.

The rapidly deteriorating economic situation in sub-Saharan Africa in the 1980s had a considerable impact on the development programmes in the region. In part, agencies endeavored to narrow the ever widening gaps left by the reduction in state provided social services, particularly in the sectors of health, education, and employment, through attempting to respond to the needs of whole new categories of poor people (Davies and Clark, 1991). Both access to and the quality to those services suffered greatly. It is argued, moreover, that

in many ways, women can be seen as the shock absorbers of society, because wherever policies and development efforts have failed, women have been burdened the most by readjustment. As the shock absorbers of the present liberalisation, women have had to greatly increase in their contribution to aid in the survival of the family and community with implications for their physical welfare (Vuorela, 1992:109).

It is in this way, I argue, that the consequences of structural adjustment programmes affect women more than men. Combined with impairment, disabled women can be regarded the hardest hit. Coleridge (1993:64) contends that:

There is a close relationship between poverty and disability: malnutrition, mothers weakened by frequent childbirth, inadequate immunisation programmes, accidents in over-crowded homes, all contribute to an incidence of disability among poor people that is higher than among people living in easier circumstances. Furthermore, disability creates and exacerbates poverty by increasing isolation and economic strain, not just for the individual but for the family. There is little doubt that disabled people are among the poorest in poor countries.
They suffer chronic poverty, accompanied by high levels of illiteracy, unemployment and dependency, which make it difficult for them to absorb the effects of structural adjustment. Where women who are disabled have children, their relatively low earning and status in the household may mean negative consequences for the well-being of the household generally. Many of them end up wandering in the streets begging for food and clothes. They do not have reliable access to basic and reproductive health services. They often suffer from diseases and hunger. Circumstances push them to live in the streets with high risks of abuse including sexual violence. The outcome of this may be getting sexually transmitted diseases including HIV/AIDS, which has profound adverse effects, not only for the victims, but also for the larger community. Baylies (2000: 135) points out that women are the most vulnerable group as far as HIV/AIDS infection is concerned. She found in her study that “...many women considered that prevailing cultural norms permitted them little means of protecting themselves...”.

Disability is a global concern which, as Coleridge (1993:66) notes, “… is a major feature of life in both developed and developing countries, and can affect anybody of whatever background at any time. Nobody is immune, and nearly everybody is likely to experience disability personally or through a family member or close relative to some degree at some point in their lives”. However, due to poverty facing the majority world countries, and the absence of welfare services in those countries, the impact of disability on the lives of disabled people is far greater. In such a context, it ought to be dealt with through a developmental perspective, both individually and collectively. Actually, the UN estimates that more than 500 million people are disabled, 70% of whom live in developing countries. They live with one or more disabling conditions. One hundred and forty million children between six and sixty months of age are undernourished; representing almost 40 percent of the world’s children. One out of every four families has an immediate member with a significant impairment. The cost to society in terms of lost economic production and other societal contributions cannot be easily measured. However, the world assuredly pays a high price for this loss, especially considering the fact that human capital is the most abundant resource in developing countries (Zaldo, 2000).
According to Barry (1995:53) "...300 million people with disabilities live in developing countries and that only one percent of these have access to basic health, education and adequate sanitation services. With currently escalating population growth rate, poverty, accidents and armed conflicts, these figures will increase in the years to come". Thus, poverty increases inequalities between people as far as development is concerned. Wiman (1996) argues that, those inequalities are indicators of social underdevelopment. In practice, development efforts often fail to recognise the rights, needs and potentials of those people who are poor, vulnerable or marginalized. Consequently, while disabled people are often among the poorest of the poor, they have been excluded persistently from the mainstream development activities. Such exclusion is greater for disabled women. Confirming this, Stace (1987:308) writes:

Professionals are not always aware of the situation of disabled women since they are often kept out of sight and protected by their families and their communities. The same holds true of services so intended to open up employment opportunities; indeed the evidence suggest that women with disabilities have not been well served by training schemes for either women in general or the disabled. On the whole, there is little recognition given in the industrialised world to the employment needs of disabled women. In the developing world it is not always thought appropriate to include disabled women in the special programmes set up to create employment opportunities for women.

Burk (cited in Stace 1987) gives an example of Tanzania to illustrate how disabled women are excluded in the participation of development projects. According to Burk "none of the 55 projects under discussion involved women with disabilities, apparently on the assumption that there were hardly any living in the district served, that the scheme were irrelevant to their needs, or that including such women would have meant additional problems" (Stace, 1987:309). The rights and needs of disabled women have in most cases been inadequately dealt with in development co-operation, programmes and projects. The reasons have hardly been economic in nature. Rather there has been lack of awareness and lack of practical guidelines and functioning procedures on how to actually deal with
disability in the technical processes of project planning, appraisal and implementation (Wiman, 1996).

The invisibility of disabled women in various projects and programmes implies the perpetuation of their poverty, exacerbating their dependency. Coleridge (1993:70) maintains that:

A useful definition of development cannot be relevant to us (disabled people) unless it derives from the situation in which we as disabled people find ourselves. We tend to define under-development fairly easily because we continue to experience it and have become accustomed to it. In our context as disabled people, we assume that development occurs only if we wage a successful war against deprivation, poverty, discrimination, superstition, fear and condescension, all of which characterize our daily life. We look at development as a process of liberation – a process that combats domination and segregation.

Although Coleridge makes the point that a useful definition of development is one that takes into account the “situation in which disabled people find themselves”, disability itself is not homogeneously experienced between men and women and its impact is also differently felt between disabled men and women. Emphasising this, Ghai (2001:1) comments:

The birth of sons is always celebrated; the birth of a girl is never celebrated. And the birth of a disabled girl – they say, a girl, and to top it off, disabled! A disabled boy is still more acceptable than a disabled girl. If a poor family has a disabled son, they will do their best to give him a decent living. Whereas when it comes to girls, they say "why should we do anything?"

Therefore, disability affects men and women differently such that disabled women have relatively less accessibility to ownership of property, social amenities and positions of authority. This is even reflected in various disability movements. For example, Ghai (2001:1) comments: “the problem is that the disability movement is run by ... elite middle class men. They are not sharing leadership with women. As a result, their concerns are more for things which affect them the most....”. This is also found in the UN Standard Rules for Equalisation of Opportunities for Persons
with Disabilities. In her analysis Asogatan (2000) asserts that “it is of great importance to notice that girls and women are particularly mentioned in the beginning of the document as a group which needs special attention. After that you can go through the rules without finding us, women with disabilities, more than in rule 6 on education and rule 9 on family and social security”.

The implication of this is that disabled women do not stand as equals with disabled men in the development process and have fewer opportunities to develop their capabilities. Human capabilities is a notion upon which human development is grounded (Baylies, 2001; Nussbaum, 1995; Wolf, 1995). In her analysis of the Human Development Reports (of 1997 and 2000), Baylies (2001) writes,

The 1997 Human Development Report defines the ‘capability concept’ as a focus on the ‘functionings that a person can or cannot achieve, given the opportunities she has’, where functionings are ‘the various valuable things a person can do or be, such as living long, being healthy, being well nourished, mixing well with others in the community and so on’. Elaborating further, the Human Development Report 2000 identifies ‘essential’ capabilities as living a long healthy life, being knowledgeable and having access to resources for a decent standard of living. It then goes on to list other areas of ‘highly valued choices’ including participation, security, sustainability and guaranteed human rights as required for being creative and productive and for securing empowerment, self respect and a sense of belonging to a community. If functionings are the valuable things humans can be or do, capabilities are said to reflect the freedom to achieve functionings.

The notion of Human capabilities and functioning may have consonance with elements of the conceptual framework of International Classification of Functioning (ICF) in which functioning “encompasses all body functions, activities and participation” (ICF, 2001:3). The ICF also identifies and acknowledges environmental factors as potentially restricting the ability of disabled people to take part in community development. However, the notion of human capabilities has some weaknesses. For example it does not conceive of “sufficiently deprived circumstances” in which some human beings such as disabled people find themselves “incapable of a positive relation to the world of nature....” Furthermore, although “it assumes that there is common humanity that we recognise across
centuries and continents, and aims to articulate a set of associated functions, the realisation of which constitute common marks of human good" (Wolf, 1995:107), it can define such functions in ways that exclude from their common humanity those with certain impairments.

Like the notion of human capabilities, ICF has a weakness in that it puts emphasis on impairment as an ultimate cause of restrictions of disabled people participating in various activities. Despite their weaknesses, however, both the notions of human capabilities and the ICF are still of great relevance in pointing to the need for gender equity and participation of disabled women in the development process. The notion of human capabilities is a tool which helps to highlight the commission or omission of either the state or society in respect of the functioning of individuals. In a way it gives grounds for those individuals whose functionings are omitted to register claims for their rights. "To this degree the capabilities approach becomes a powerful complement to a human rights approach and a social model of disability" (Baylies 2001:11).

The question of active participation of disabled people in society is one of the major concerns of the social model of disability which demands that societies remove all social and environmental barriers that hamper the full functioning and participation of disabled people in various activities. As Yamazaki (2001) points out, "the principles of participatory development have much in common with the aims of disabled people’s movements, such as empowerment of people, achievement of equal rights, change in power relationships and creation of an enabling society in which these goals are pursued with the necessary support from the state". Some development is taking place in sub-Saharan African countries to recognise the inclusion of disabled people in various development aspects. In Zimbabwe, South Africa and Uganda, for example, there is legal recognition of the representation of disabled people in legislative bodies (Chimedza and Peters, 1999; Mbeki, 1997; McCloskey, 2001). In Uganda, there are five parliamentary seats for disabled people, and 47,000 disabled people have successfully managed to gain seats in the local councils. Furthermore, governing bodies at sub-country and district levels must have two disabled people as members (McCloskey 1999). In South Africa
and Uganda such rights are constitutionally defined. The South African President Thabo Mbeki (1997:1) comments that

The concept of a caring society is strengthened and deepened when we recognise that disabled people enjoy the same rights as we do and that we have a responsibility towards the promotion of their quality of life. We must stop seeing disabled people as objects of pity but as capable individuals who contribute immensely to the development of society.

Achievements in these three countries have come about as result of the struggle of disabled people themselves to educate the society about the rights of disabled people and pressure their governments to make policies and legislation that recognise those rights and implement them. They have been involved in intense political campaigns and lobbying (Mutabazi, 1997). This is well elaborated by Chimedza and Peters (1999) who comment that it was largely through the organised efforts of disabled people’s movements and the conscientization of their leadership and grass-roots members that disability legislation and policies came into being. These movements saw the passage of those laws as the beginning, not the end, of their quest for equal human rights. They have enacted laws as tools to direct attention to the plight of disabled people and as weapons to provide teeth for their human rights.

The ultimate purpose of the social model of disability is to enhance the rights and advance the development of disabled people. Nyerere (1980) asserts, however, that people cannot be developed, they can only develop themselves. In order for disabled women to develop themselves, an inclusive development strategy where the "disability dimension is flexibly included in all aspects and stages of the activity as a natural element" (Wiman, 1996:2) is fundamental. Such inclusion should be sensitive to the needs of disabled women. This approach requires full inclusion through the adaptation of mainstream facilities and services. Specific support service components may be needed to empower disabled women to fully participate within society. Until the barriers that disabled women face in their efforts to alleviate poverty are recognised and addressed, there can be no substantive or sustainable change in the marginalisation and chronic poverty experienced.
According to Yeo (2002: 17), "there is an element of reduced capabilities for people with some forms of impairments. This is sometimes used as a justification for exclusion". Failure to meet practical needs of disabled women causes difficulties for them to campaign, to exert influence and to work to reduce their own chronic poverty.

According to Wimile (2002) the strategies for poverty reduction in HIPC countries do not pay attention to the poverty needs of disabled people, women in particular. He maintains:

As evidenced in the Tanzania National Poverty Reduction Strategy Paper (PRSP), there is an oversight of analysing disabled people as among the poor hence they are not part and parcel in the strategy of poverty reduction. These according to the paper are not considered as active partners in the poverty alleviation process; rather they are considered as passive recipients of the outcomes of the strategy. It is worried that if the tendency of excluding disabled people in poverty reduction strategy is left unchecked, the lives of many of them will continuously be pathetic and their level of poverty and dependency will much more be confirmed and increased.

In her argument concerning this point, Yamazaki (2001) writes that literature on disability points out the lack of disabled people’s, and particularly disabled women’s, participation in the current development process. Unless and until disabled women are strategically included in the poverty reduction measures in developing countries, their plight will continue to be disappointing.

Education

Education is one of the important tools by which people achieve development. There is a correlation between education and people-centred development, in that education, like development, is a process by which one’s overall capability is enhanced. Development influences education and education in turn influences developmental outcomes. It is said that one of the objectives of development is to raise the standard of living of an individual, which involves improvement in basic services, including education. In turn, education provides individual knowledge and
skills that increase productivity and enable contribution to development objectives. Education is therefore one of the powerful human capabilities which disabled women may use as a tool for poverty reduction and sustainable development in life. Freire (1993) argues that the ultimate purpose of education must be the development of human beings, through the realisation and unfolding of peoples’ creative potential. As such, education is a humanising process. Katulushi (2000) sees education as critical for genuine empowerment. Education is crucial to ensure inclusion, so that ‘development’ is achieved and experienced by all members of society. On the one hand, inclusion of itself satisfies requirements of this notion of development. On the other, it enables disabled people to improve their own capabilities (whether to be turned to economic/livelihood concerns, flourishing of human potential, or whatever).

It was in view of the above that the international community decided to declare education as a human right in 1948. Article 26(1) of the United Nations Declaration on Education states that:

Everyone has the right to education. Education shall be free, at least in the elementary and fundamental stages. Elementary education shall be compulsory. Technical and professional education shall be made generally available and higher education shall be equally accessible to all on the basis of merit (United Nations, 1948).

This shows the extent to which the international community values education and the desire to have collective responsibility and action. To give more enforcement UNESCO (1960), which is in charge of stimulating education initiatives and programmes for United Nations member states, enacted and adopted the "Convention Against Discrimination on Education". It states:

For the purpose of this convention, the term discrimination includes any distinction, exclusion, limitation or preference which, being based on race, color, sex, language, religion, political or other opinion, national or social origin, economic condition or birth, has the purpose or effect of nullifying or impairing equality of treatment in education and in particular:
a) Of depriving any person or group of persons of access to education of any type;
b) Of limiting any person or group of persons to education of an inferior standard;
c) Subject to the provision of Article 2 of this convention or maintaining separate educational systems or institutions for persons or groups of persons; or
d) Of inflicting on any person or group of persons conditions which are incompatible with the dignity of man (UNESCO, 1960).

Given that the more general declaration relating to human rights has not always been sufficient for addressing discrimination against women, the UN produced a separate and specific instrument relating to women in 1981 - the Convention for the Elimination of all Forms of Discrimination against Women. Within this is acknowledgement of pervasive discrimination in the field of education. Thus, Article 10 of the Convention declares:

States parties shall take all appropriate measures to eliminate discrimination against women in order to ensure to them equal rights with men in the field of education and in particular to ensure, on the basis of equality shall be ensured in preschool, general, technical, professional and higher technical education, as well as in all types of vocational training, (Degener and Koster-Dreese, 1995: 247).

These initiatives of the international community about education for girls and women reflect a broad recognition that meaningful social development cannot take place when a large proportion of women remain illiterate. It is argued that to educate a woman is to educate the whole family to begin with, and then the whole nation. While the benefits of education are well established for both females and males, the benefits accruing to women tend to have greater multiplier effects. When someone learns how to read and write, he/she develops self-confidence and realises that he/she can progress along with others. In such a context, literacy is the first means for enrichment and social integration, and it is the society's most valuable tool for furthering development and economic progress. Education equips girls and women with survival skills and professions that help them obtain gainful employment or engage in productive activities. Consequently
they become independent, and for those who are married, not always depend on their husbands' income. Eventually this enables them meet their own basic needs and those of their children even if the husbands desert them or become irresponsible. The education of these girls and women has a direct influence on the lives of children at present and in the future.

Who can deny that educated mothers have the greatest direct and vital influence on children and on what they will grow up to be, since these women are the most influential agents in primary socialization? Women also play an important role in feeding these children and may do so more effectively if they have received education. At their tender age children are said to be easily attacked by various diseases requiring prevention and cure. Knowledge about how to take care of children is very essential to reducing the infant mortality rate. Mothers also need knowledge of hygiene and sanitation as this may have a direct influence on family health (EFA, 2000:1). Education can also be extremely helpful to girls and women in making informed decisions about their lives, including family planning. The level of education, population growth and health care are all interrelated in determining the standard of living of the people.

Furthermore, educated women have a direct and bigger and more significant role to play in national development through a rise in productivity. Hence by allowing people, girls in particular, opportunities to acquire education, we allow them to make vital contributions towards personal, social and economic growth and development. Therefore basic education should be the first objective for any nation seeking to develop itself. It must be a matter of concern that lack of education is as serious as lack of food. In this sense, illiteracy in a way contributes to starvation. Thus, the question of ensuring that all individuals have access to an adequate 'basic education' should not be an optional matter, but should be recognised as fundamental human right.

To emphasize that every person should attain basic education, it was thought better to enforce it by formulating yet another declaration in 1990 on "Education for All [EFA] Meeting Basic Learning Needs" whose article 1(1) states:
Every person-child, youth and adult - shall be able to benefit from educational opportunities designed to meet their basic learning needs. These needs comprise both essential learning tools (such as literacy, oral expression, numeracy, and problem solving) and the basic learning content (such as knowledge, skills, values, and attitudes) required by human beings to be able to survive, to develop their full capacities, to live and work in dignity, to participate fully in development, to improve the quality of their lives, to make informed decisions, and to continue learning (UNESCO, 1990).

This is a major development, at least on paper, showing the collective global concern for education for all.

Despite the benefits of education for girls/women at individual and national level, and enormous efforts governments are taking to direct attention to girls/women's education, there remains a substantial disparity between access of females and males to education. Although this problem is global in nature, the main focus of this thesis is to portray the obstacles that cause gender disparities in education in developing countries, particularly sub-Saharan Africa. As affirmed by the World Declaration, "the major urgent priority is to ensure access to, and improve the quality of, education for girls and women, and to remove every obstacle that hampers their active participation" (World Declaration, Article 3.3, Jomtien, 1990).

Women's Access to Education in Sub-Saharan Africa

Though Anglophone African countries like Botswana, Nigeria, Tanzania, Zambia and Zimbabwe have embarked on massive enrolment of Universal Primary Education (UPE), and Francophone African Countries like Gabon, Congo, Madagascar and Rwanda as well as Portuguese Speaking African Countries like Angola and Mozambique, etc. are devoted to compulsory education, girls experience disproportionately less access to education than boys (Kisanji, 1993). Cross-cultural evidence reveals that in most developing countries, particularly in sub-Saharan Africa, boys’ enrolment is relatively higher than that of girls at all levels. For example, in basic education, based on countries’ own estimates, between 1990 and 1998 the net enrolment of boys increased by 9 percent to 56
percent, and girls by 7 percent to 48 percent. However, these figures mask considerable regional variations. In East Africa, excluding Somalia, the net enrolment of boys increased by 27 percent (to 60 percent) and of girls by 18 percent (to 50 percent). In the Southern Africa region the pattern is reversed. The enrolment of girls increased from 23% to 76% whereas that of boys increased from 16% to 58%. The lower enrolment of boys in this region is due to differences in opportunity costs in countries where mining industries recruit largely uneducated male labour.

Available data indicate that about 40 percent of girls and 50 percent of boys are enrolled in West Africa, and 50 percent of girls and 60 percent of boys in central Africa. The real figures may be much lower, however, as several of these countries have been unable to collect data in recent years. Cases of extreme gender disparity, where girls' enrolment may be only half that of boys, are mostly found along the southern rim of the Sahara, a region characterized by low adult literacy and weak economies. Gender disparity is least in southern Africa, where many countries have attained near universal primary education and high adult literacy (FAWE, 1996; UNESCO, 2000).

Such gender disparity whereby girls are systematically disadvantaged tends to widen as one climbs up the ladder in the educational system. For example in Tanzania in 1998, the enrolment in primary school was 50% for both boys and girls. Zimbabwe shows little difference in the enrolment percentage between boys and girls in 1991. In Ghana, the percentage of girls at primary school was 69% in 1991 versus 77% of boys. In the 1990s, the total enrolment of girls at primary level in Zambia was 49.2 % versus 50.8% of boys (Chung, 1995; Mbilinyi, 1990; Sampa, 1995; United Republic of Tanzania, 1999). Those are just a few cases illustrating relatively minor disparities between boys and girls at primary level. In secondary education, however, the gap widens. For instance, in 1991 the enrolment of girls in Ghana was 29 percent.

In Zimbabwe, there was a significant difference at secondary level in 1991 with 40 percent of girls enrolled in forms 1-4. At A-level, however, the proportion of girls dropped to 21 percent. In Zambia in 1990s, the enrolment of females was 37.8 percent. In Tanzania, the enrolment of girls in 1998 in forms 1-4 was 47.9 percent,
and in forms 5-6 girls' enrolment was 35.4 percent (Chung, 1995; Mbilinyi, 1990; Sampa, 1995; Sibanda, 1995; United Republic of Tanzania, 1999). The trend illustrates clearly that the chances of girls being in school narrows as you go higher. At university level, women students have averaged no more than 24 percent of total enrolment in Zimbabwe for several decades. In 1993 women comprised only 21 percent of university graduates in Zambia. In 1994-1997 in Tanzania, women comprised 24 percent of the total university enrolment. In the same year Ghana had 27 percent (Chung, 1995; *Human Development Report* 2000; Sampa, 1995).

Whilst it is evident that girls are less advantaged than boys as far as their access to and acquisition of education is concerned, in general terms there are also many boys who have little access to education. In sub-Saharan Africa, girls represent 56 percent of an estimated 41 million school age children who are out of school. The majority of these children come from poor, rural and remote communities, as well as ethnic minorities and indigenous populations. Most of those societies depend largely on agriculture. Chiurayi (1995:2) argues that in those countries "there is hunger, starvation, malnutrition, diseases, and the incessant drought and encroaching desertification which seriously affect agriculture*. Consequently, this has a serious impact first on their per capita income, and secondly, on their ability to meet the educational needs of their children. Those needs include uniforms, fees, transport costs, pocket money, etc. For example in Zimbabwe, Chung (1995:1) argues that

An estimated 55% of the population live in poverty, and this figure correlates very closely to the percentage of the relevant age group able to enter secondary schools as there is now no selection into secondary education in Zimbabwe other than the ability to pay. Fees for day secondary schools are as low as Z$150 (about eleven pounds sterling) per annum, but this is clearly too high for parents who may be earning between Z$ 600 and Z$ 1000 a year.

In Tanzania, 85% of the population is predominantly rural with many people living under poverty line (Mtatifikolo, 1994:92). The per capita income of Tanzania stands at 270 US $ or Tshs 243,000 (President Mkapa quoted in the *Guardian*, June 1,
Tuition fees alone for public boarding secondary schools are 80,000/= for private secondary schools they may amount to 1,000,000/= (US $ 1000). To this must be added costs of transport, pocket money, teaching/learning materials, uniforms, caution money, medical fees, etc. Many families have six or more children, all having the same needs and the same rights. As a UNESCO document (2000: 12) comments: "...continuing high population growth...makes it difficult for many countries in Sub-Saharan Africa to make a significant reduction in the number of out-of-school children." At the World Education Forum in Dakar, "speaker after speaker reminded the forum that poverty remains the single most important factor explaining the inability of many governments to meet their goals for EFA" (UNESCO, 2000:9).

While on the one hand poverty affects the access of both girls and boys to education, on the other, culture creates further disparities. Although some families may support their girl child and see that she is educated, most families are governed by the traditional thought that it is better to invest in a male child. So, they opt without question to encourage and support the boy child. There is a belief in some traditions that money invested in girls' education is a waste. Sibanda (1995: 4) comments:

This bias in favour of the boys becomes more pronounced when economic conditions are unfavourable such as during the frequent drought years, or during periods of economic structural adjustment when money is scarce. Under those conditions, parents, because of the traditional belief that the education of a boy is a future investment, will take the girls out of schools and spend the little they have on the boy child.

Boys are regarded as heirs to the family. Hence, they are trusted to travel long distances independently in search of job. They can dare to venture in new environments with relatively low risk. Giving education to them is therefore seen as appropriate. The belief is that much of what they will get out of education comes back to enrich the family. Such a perception categorises boys as a first class group of children and girls as a second class group in the family.
Girls in some African traditions are regarded as 'others'. According to these thoughts and beliefs, a girl child gets married and stops identifying with her family of birth as she changes her name. She is believed to belong to the family of the man she marries. Investing in girls' education would mean the fruits or results of such investment would benefit the family which she joins after marriage. The man whom she marries in many cases controls the family's incomes, including that produced by his wife. This is particularly found in a patriarchal system, which is dominant in Africa. In this respect, it also accounts for the reasons why in African traditions the groom has to pay a bride price to the parents of the bride. Education is sometimes believed to spoil girls/women who in consequence do not get married.

It is believed that the more a girl child gets educated, the less the chances of her being married. Parents would then fear to take their daughters to school as this might jeopardise their chances of getting riches through bride price. Girls are viewed as sources of wealth, which means they may be valued as commodities (Chiurayi, 1995; Nyagura, 1995; Sampa, 1995; Sibanda, 1995; Tawia, 1995; UNESCO, 2000).

It is evident in the above discussion that girls' access to education narrows pyramidically. The low percentage of female enrolment in the higher levels reflects the fact that a larger number of girls than boys drop out during and at the end of primary school. Some of the reasons for this are early marriages, teenage pregnancies and responsibilities within the home. Also long distances to schools persuade parents to keep their daughters at home as they fear that they would be in danger of all sorts if they were to travel far for schooling. Likewise, at secondary level girls are biologically much more mature and chances for early marriages and of getting pregnant are consequently much higher. This may contribute to higher dropout rates alongside the cultural attitudes that work against the girls' education in preference to the boys'. The low number of girls at A-level may partly be caused by poor performance.

Whilst there is no evidence to suggest that girls by nature are poor achievers compared to boys, the general trend has always shown that as a group, in most African societies, boys seem to do better than girls. It may be argued that because
of the heavy domestic duties assigned to them, girls may not get adequate time for studying (Sibanda, 1995). Additionally, the unfriendly school environment characterised by sexual abuse and harassment of girls by boys and male teachers, negative teachers' attitudes towards girls', lack of female role models, and poor sanitary conditions, either deter girls from attending schools, or account for low motivation of girls that affect their performance (Chiurayi, 1995; Nyagura, 1995; Sibanda, 1995; Tawia, 1995; UNESCO, 2000).

Gender Disparity in Special Needs Education in Sub-Saharan Africa
The general efforts made the international community to improve access and ensure education for all have not always led to improvements in special needs education. This has led to consideration of the need to formulate yet another instrument that would emphasise the inclusion of disabled people in the mainstream socio-economic and political life. The notion of inclusion in education was therefore given greater attention in 1994 at Salamanca in Spain when issues of quality and access were deeply discussed. The Salamanca statement reaffirms that although there has been increased involvement of governments, advocacy groups, community and parent groups, and, in particular, organisations of persons with disabilities, in seeking to improve access to education for the majority of those with special needs, many disabled children and adults, especially in developing countries, still find this service inaccessible. Therefore, the Salamanca World Conference on Special Needs Education aimed to ensure that forms of discrimination of whatever kind or source against disabled people, be it social or physical, should be seriously tackled to maximise accessibility and quality education.

Whilst a number of sub-Saharan Africa governments have taken transformative actions to increase access of girls/women to education, relatively little has been done to achieve the same for disabled women. Furthermore, transformative actions that have aimed to improve the status of disabled people in general have incorporated male bias, in that they have not addressed the specific needs of disabled women. For example, the Salamanca initiatives do not specify a gender dimension in their statement and strategies. The UN Standard Rules on
Equalisation of Opportunities share a similar weakness. Consequently, a gender analysis of educational needs of disabled people have been left out. There has been little consideration of the attitudes, practices and constraints which directly apply to female impaired bodies in inhibiting their access to education.

When cultural attitudes, perceptions, traditions and beliefs that hamper the access of women to education are directed also to impairment, the sense of "otherness" tends to double the intensity of discrimination against disabled women. Disabled women are bombarded with such words as second class citizens, weak, asexual, uneducatable, hopeless, a burden, inadequate, shameful, childlike, pathetic, bitter, envious, and naive; actually they are printed with all such negative images, name it! (Driedger and Gray (eds.) 1992; Sherrad, 1996). The lack of approved social roles for disabled women makes them fare far worse than men economically, socially and psychologically. The underlying assumption seems to be: why waste resources, time and energy for such a helpless creatures? This is the explanation for why disabled women are far behind in education. An impaired woman suffers not only from gender discrimination but also from the stereotypical cultural myths about the potential attached to her by the society in respect of her impairment (Shah, 1992). Thus as Muigai (1997) says: "in practice the uneven educational system and cultural attitudes that apply to all women in general are more severe on disabled women*.

Furthermore, Khalfan (1993) comments: "illiteracy is prevalent among disabled people particularly women and constitutes for them a double disadvantage. In addition to being disabled, they are isolated by illiteracy". The political relationship between education and disability has been one of disorder rather than of harmony and understanding. Such a prevalence of discrimination of disabled women in respect to education in sub-Saharan Africa is due on the one hand to poverty, and on the other, to attitudes which frequently construct them as 'other'. For instance, economic, social and political difficulties in the majority world countries are so overwhelming that they relegate special education to the status of a peripheral priority. Giving the example of Senegal, Sarr (1995:32 - 33) comments, "the country's decision makers, who give priority to satisfying the needs of the greatest
number of people, tend to neglect the specific needs of the handicapped and thereby neglected them and their families to the most underprivileged levels of society.

Similarly, in allocating scarce resources for the education of their children, more often than not parents are gripped with certain expectations about those children. They may feel that, in future, these children will not be able to pay them back in the form of services or support when they become increasingly old. Disabled female children are often particularly subject to discriminatory attitudes regarding their contribution in society or in the home. The discrimination shows that disabled male children do at least get some foothold that enables them to access and gain an education. This is not accidental, rather it reflects the world system, which is more or less patriarchal.

Asch and Sacks (1983: 242) assert that many of the problems posed by disability stem from society's attitudes — attitudes that cast all disabled people in what has been called the disability role. Playing out that role requires helplessness, submissiveness, dependency, asexuality, and discomfort in the presence of non-disabled people; in short, the inability to perform adult social functions (Gliedman & Roth, 1980). Disabled women fare worse than either non-disabled women or disabled men, economically, socially, and psychologically. Gliedman & Roth (1980) further argue that although society ascribes these negative attitudes to all disabled people, they are more consistently ascribed to disabled women, with disabled men sometimes being seen as continuing to display such 'male' characteristics as competence, leadership, aggressiveness, ambition and independence. Thus men can sometimes escape the fate awaiting them by playing out the male role rather than the disability role.

Men are expected to define their own activities and shape their own lives, whereas the stereotype would have women traditionally waiting for men, to be selected by them as partners, workers and mothers of their children. Perceived as incapable of filling economically productive roles, disabled women also have been barred from occupying the traditional female roles of nurturer and mate because men have not chosen them to play these roles. As Shakespeare (1996: 96) comments, "the
general failure to address the oppression of disabled women can be explained with reference to the dominance of male values ... it is this value system which encourages disabled men to oppose the stigma associated with impairment and enables them to aspire to typical male roles*. Consequently, the provision of education tends to reflect this male bias (Muigai, 1997; Elson, 1991). Tables 3.1 to 3.6, as well as Graphs 3.1, 3.2 and 3.3 illustrate the extent of educational inequalities between disabled male and female students in Uganda, Kenya and Tanzania. For the case of Kenya, the data reflect the situation of visually impaired students only. Data for other groups of disabled people could not be obtained.

Table 3.1: Enrolment of Pupils with Impairments in Primary Schools in Tanzania by Gender from 1996/97 to 1999/2000

<table>
<thead>
<tr>
<th>Year</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
<th>Female %</th>
<th>Male %</th>
</tr>
</thead>
<tbody>
<tr>
<td>1996/97</td>
<td>1169</td>
<td>2144</td>
<td>3313</td>
<td>35.2</td>
<td>64.8</td>
</tr>
<tr>
<td>1997/98</td>
<td>1268</td>
<td>2154</td>
<td>3422</td>
<td>37.0</td>
<td>63.0</td>
</tr>
<tr>
<td>1998/99</td>
<td>1228</td>
<td>1515</td>
<td>2743</td>
<td>44.8</td>
<td>55.2</td>
</tr>
<tr>
<td>1999/2000</td>
<td>1299</td>
<td>2325</td>
<td>3624</td>
<td>35.8</td>
<td>64.2</td>
</tr>
<tr>
<td>Total</td>
<td>4964</td>
<td>8138</td>
<td>13102</td>
<td>37.9</td>
<td>62.1</td>
</tr>
</tbody>
</table>

Source: Tanzania Ministry of Education and Culture, 1999

Table 3.2: Enrolment of Students with Impairments in Secondary Schools in Tanzania by Gender from 1996/97 to 1999/2000

<table>
<thead>
<tr>
<th>Year</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
<th>Female %</th>
<th>Male %</th>
</tr>
</thead>
<tbody>
<tr>
<td>1996/97</td>
<td>30</td>
<td>48</td>
<td>78</td>
<td>38.5</td>
<td>61.5</td>
</tr>
<tr>
<td>1997/98</td>
<td>32</td>
<td>45</td>
<td>77</td>
<td>41.5</td>
<td>58.5</td>
</tr>
<tr>
<td>1998/99</td>
<td>31</td>
<td>49</td>
<td>80</td>
<td>38.5</td>
<td>61.5</td>
</tr>
<tr>
<td>1999/2000</td>
<td>34</td>
<td>53</td>
<td>87</td>
<td>39.1</td>
<td>60.9</td>
</tr>
<tr>
<td>Total</td>
<td>127</td>
<td>195</td>
<td>322</td>
<td>39.4</td>
<td>60.6</td>
</tr>
</tbody>
</table>

Source: Tanzania Ministry of Education and Culture, 1999

Tables 3.1 and 3.2 illustrate that the enrolment of disabled female students is less than that of disabled male students at both primary and secondary levels. This may
reflect societal views that investing in girls’ education, particularly disabled ones, is a waste of resources. Under economic hardship, especially when cost recovery measures are considered, education for disabled girls is given last priority by most families. Measures of economic recovery programmes, like the re-introduction of school fees and other costs, fall heavily on the shoulders of the most disadvantaged groups, which in this case are disabled girls/women. Kiondo (1990) says that the cutbacks of government expenditure on social services, which is part of the broader strategy of economic recovery, presents another area where the under-privileged suffer more than the resourceful classes. He adds “the re-introduction of fees in social services such as education means diminishing educational prospects for the...poor. So, while the rich can afford private alternatives, the poor are left in the cold”. The result of cost sharing in education is similar to what Musoke (1993) once said: “give a rich man less food and he becomes thin; give a poor man less food and he dies”. The impact of policy reforms and structural adjustment on the education of visually impaired women in Tanzania is further discussed in Chapter Four of this thesis.

Table 3.3: Number of Disabled Children Enrolled in Primary Schools by Gender in Uganda from 1996 – 1999

<table>
<thead>
<tr>
<th>Year</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
<th>Female %</th>
<th>Male %</th>
</tr>
</thead>
<tbody>
<tr>
<td>1996</td>
<td>10,891</td>
<td>15,530</td>
<td>26,421</td>
<td>41.2</td>
<td>58.8</td>
</tr>
<tr>
<td>1997</td>
<td>27,558</td>
<td>36,988</td>
<td>64,546</td>
<td>42.7</td>
<td>57.3</td>
</tr>
<tr>
<td>1998</td>
<td>65,181</td>
<td>94,009</td>
<td>159,190</td>
<td>46.8</td>
<td>53.2</td>
</tr>
<tr>
<td>1999</td>
<td>68,022</td>
<td>82,537</td>
<td>150,559</td>
<td>45.2</td>
<td>54.8</td>
</tr>
<tr>
<td>Total</td>
<td>171,652</td>
<td>229,064</td>
<td>400,716</td>
<td>42.8</td>
<td>57.2</td>
</tr>
</tbody>
</table>


The number of children with disabilities enrolled in primary schools in Uganda increased by 146.6% in 1998. Total numbers were much higher in Uganda than in Tanzania due to the Universal Primary Education (UPE) Policy that was introduced by the Government of Uganda in 1997. Under the Policy, children with disabilities have priority over non-disabled children. When a family has a child with disability, the child is given highest priority in registration for UPE support.
For the period under study, the number of disabled male students at primary level in Uganda was higher than that of the females. This may reflect more negative attitude of parents towards girls' education.

Table 3.4: Number of Disabled Students Enrolled in Secondary Schools by Gender in Uganda From 1996-1998.

<table>
<thead>
<tr>
<th>Year</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
<th>Female %</th>
<th>Male %</th>
</tr>
</thead>
<tbody>
<tr>
<td>1996</td>
<td>481</td>
<td>892</td>
<td>1,373</td>
<td>35.0</td>
<td>65.0</td>
</tr>
<tr>
<td>1997</td>
<td>687</td>
<td>877</td>
<td>1,564</td>
<td>43.9</td>
<td>56.1</td>
</tr>
<tr>
<td>1998</td>
<td>779</td>
<td>1,325</td>
<td>2,104</td>
<td>37.0</td>
<td>63.0</td>
</tr>
<tr>
<td>Total</td>
<td>1947</td>
<td>3094</td>
<td>5041</td>
<td>38.6</td>
<td>61.4</td>
</tr>
</tbody>
</table>

Just like at primary level, the enrolment of disabled female students in Uganda continues to be lower than that of male students in secondary schools. The number of male disabled students in 1998 was almost twice that of the female. Graph 3:2 clearly illustrates the situation.

Graph 3:2 Enrolment of disabled students in Secondary schools

![Graph 3:2 Enrollment of disabled students in secondary schools in Uganda from 1996 to 1998](image)

Graph 3:3 Education levels completed by the disabled pupils/student from 1996 to 1998 in Uganda

![Graph 3:3 Education levels completed by the disabled pupils/student from 1996 to 1998 in Uganda](image)

S4 = Secondary 4 (equivalent to GCSE level)
S6 = Secondary 6 (equivalent to sixth form)
The number of students with disabilities in Uganda who completed Senior 4 between 1996 and 1999 is low and declines to a negligible number for the case of Senior 6.

In comparison, Uganda which has a smaller population (20.6 million) is doing relatively better than Tanzania with population of 32.1 million (HDR 2000). This may be a result of active participation of disabled people in Uganda in advocacy and lobbying. For example, Uganda has defined the needs of disabled people in the constitution including the constitutional recognition of sign language to be used in schools. These achievements of the disability movement mean that disabled people in Uganda have a greater chance to exert their influence in decision making and their visibility arouses public awareness and interests particularly for parents who have disabled children to send to school. There is also affirmative action by the government in giving first priority to supporting disabled children. All these achievements are lacking in Tanzania.

Table 3.5: Enrolment, Completion and Dropout of Visually Impaired Students in Primary Schools by Gender in Kenya Between 1996 To 2000

<table>
<thead>
<tr>
<th>ENROLMENT</th>
<th>COMPLETION</th>
<th>DROPOUT</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>F</td>
<td>M</td>
</tr>
<tr>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>1970</td>
<td>1970</td>
<td>50</td>
</tr>
<tr>
<td>117</td>
<td>204</td>
<td>36.4</td>
</tr>
</tbody>
</table>

Source: Ministry of Education Kenya, 2000

Generally, the majority of visually impaired people in Kenya are denied access to education. It is interesting to note that the Education Assessment and Resource Services identifies 10,000 children with visual impairments every year and yet there are no places for them in schools (Okola, 2000). So, the percentage of those in schools can be said to be negligible. It has been approximated at 0.05%. Female students seem more disadvantaged. Although the enrolment for the specified period at primary level was about the same as between girls and boys, a higher proportion of girls dropped out, to the extent that the completion level differed. The completion percentage of girls was just 45.9.
Table 3.6: Enrolment, Completion and Dropout of Visually Impaired Students by Gender in One Secondary School in Kenya Between 1996 to 2000

<table>
<thead>
<tr>
<th>ENROLMENT</th>
<th>COMPLETION</th>
<th>DROPOUT</th>
</tr>
</thead>
<tbody>
<tr>
<td>M F M F</td>
<td>M F M F</td>
<td>M F M F</td>
</tr>
<tr>
<td>625 600</td>
<td>559 500</td>
<td>66 100</td>
</tr>
<tr>
<td>51.0 49.0</td>
<td>52.8 47.2</td>
<td>39.8 60.2</td>
</tr>
</tbody>
</table>

Source: Ministry of Education Kenya, 2000

These figures are from only one school, which enrolls visually impaired students only. As with primary level, girls still fell behind in comparison with boys in secondary education. This is revealed particularly in the dropout and completion rates as indicated in Table 3.6. Additionally, the number of visually impaired female students at university in Kenya for the year 2000 was just 3 compared to 7 male counterparts.

This is a systematic reflection of the pyramidal structure in most educational systems in sub-Saharan Africa. At primary level, the enrolment is higher than at subsequent levels. Access narrows as one goes up, i.e. the gender gap widens the higher the education levels. In her observation about challenges facing a girl with special education needs in East Africa, Muigai, (1997:1) points out that:

Although most African Governments have tried to provide for equal opportunities in education, especially at primary level, in practice the educational system discriminates against girls and women especially when they have disabilities. Consequently, they are unable to compete equally for the various courses offered in schools, colleges, polytechnics, universities and other training institutions. Representation of girls and women falls drastically at successive levels within the educational system, thus very few women reach positions from which they can influence policy. This perpetuates the manner in which educational programs are implemented, become part of the social-cultural machinery, and promote, if not condone, gender bias.

Female education and training in Africa is generally characterized by lower enrolment and participation rates, higher drop-out and absenteeism rates and lower performance and achievement levels.
than those of boys, especially in Mathematics, Science and technical subjects.

It is evident that limited access to education of the disabled girls/women is prevalent in all countries, although to varying degrees due to the nature of cultural, social, economic and political development. Lack of access of disabled girls/women to education represents an overt or covert breach of UNESCO's Convention on Education as agreed and signed by all member states. Article 5(1)(a), of the convention states: "education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms". Similarly there is an infringement of article 8(1) of the Declaration on Education for All. Among others, the declaration appeals for serious commitment to the promotion of education by stating that: the provision of basic education for all depends on political commitment and political will backed by appropriate fiscal measures and reinforced by educational policy reforms and institutional strengthening. It is evident therefore that the self-esteem and self confidence of illiterate disabled women are not fully developed to the extent of enabling them live independently. Additionally, their rights and fundamental freedoms are not respected. This further infringes the United Nations Declaration on the rights of disabled people of 1975. Article 6 of the Declaration specifies education as a right to enable maximum development of capabilities and skills. Education for that matter is an essential tool for the enhancement of employability in gainful and productive activities as a means of combating poverty. As Oliver (2001: 150) argues "...it should not be forgotten that disabled people all over the world still constitute the poorest of the poor and for many the key issue remains survival...".

Summary and conclusion
This chapter began with the assertion that what influences limited access of disabled women to education is their exclusion from development programmes. This is because many development planners fail to accommodate the specific needs of disabled women during the planning process. This was found to be a result in part of societal perceptions of femaleness. Those perceptions relegate
women to the margins of society. Such negative attitudes portray women as deviant, meaning that their personhood is viewed negatively. Their role is mostly associated with nurturance. They seem not to play a significant contribution to community development, though in actual fact they are the major producers and reproducers of wealth. The chapter has demonstrated that women are oppressed, over-utilised, and under-appreciated. This directly prejudices their life chances. When these stereotyped perceptions are extended to impairments, disabled women become the most neglected and disregarded members of the community. The society fails to provide for their basic social needs including education. This becomes evident as they are regarded as having contributed almost nothing to community development. In a way, they are considered as second class citizens. The denial of education, which is one of the instruments for achieving development, is an infringement of their human rights. Thus they are excluded from the means which may enable them to achieve social esteem and live satisfying lives. The consequences of all these factors have been excluding them from the development process.

At this point, the social model of disability has been pointed out as very instrumental for analysing how cultural and social exclusion of disabled women has been a daily practice in majority world countries. Using this model I have analysed the dialectical relationship between culture, gender, disability and development. I have further examined the ways these concepts intercept one another in determining the access of visually impaired women to education. It has been demonstrated clearly that gender inequalities and exclusion of disabled women from development are social products. In consequence, there is inequitable distribution of resources and services between men and women, between non-disabled people and disabled ones and between disabled women and disabled men. Such a distribution has disproportionately affected disabled women more than other groups, pushing them to the extreme margins of poverty. I have therefore argued that in respect to the obstacles that visually impaired women encounter in accessing and gaining an education in a given society, gender discrimination and stereotypical attitudes towards impairment play equally significant roles. In the following chapter, my discussion focuses on the provision of
education for visually impaired people in Tanzania, exploring how various education policies and the economic situation of the country affect educational opportunities for visually impaired girls/women.
CHAPTER 4

EDUCATION FOR VISUALLY IMPAIRED PERSONS IN TANZANIA WITH A GENDER PERSPECTIVE

Introduction

In Tanzania, two different educational systems exist. One operates on the mainland and the other on the islands. The education system discussed in this study is that of the mainland only. In this chapter I discuss the efforts that the post-colonial government of Tanzania has made to address and promote education for visually impaired people, particularly women. The chapter is divided into four sections. The first gives a country profile. The second provides an overview of the Tanzania's education system, with reference respectively to indigenous education, colonial education, and post-colonial education.

In discussing indigenous education, the type of education provided prior to colonialisation will be explained, its relevance and objectives; and the way it was or not responsive to the needs of disabled people. The same issues will be discussed in respect of colonial education, but with greater emphasis on gender equality and equity. In reference to post-colonial education, the main policy issues to be discussed will include the Education Acts of 1962, 1969 and 1978; the Arusha Declaration of 1967; the Musoma Resolution of 1974 and Universal Primary Education of 1977. All these declared that there should be free education for all at all levels, contrary to the colonial policy. I will throw a light on the impact of post-colonial educational policies on gender equity and equality. The issue of gender equity and equality in education is crucial in the situation today. Education is a human right and therefore education for all is paramount (UNESCO, 2000). In most African countries women occupy a significant position in productive activities in addition to their role in reproduction. Yet they benefit less than men in the distribution of the wealth they produce and in the share of the national cake, much of which is given in the form of social services, including education. My discussion will examine the extent of women's participation in the production process and the amount of education they receive. Free education is sustainable when and where
an economy is doing well. In this connection, the general economic crisis that has faced Tanzania from the late 1970's to the present time has had a detrimental effect on the quality, quantity, gender equity and equality in the provision of education in Tanzania.

Hence, in section three, I will examine the effects of the structural adjustment programme introduced to arrest the deteriorating economy on gender equity and equality in the educational sphere. Particular emphasis will be placed on the educational sector reforms as initiated in ERP 2 and their stated objectives. The discussion points out how interested parties determined the objectives for the reforms, then how they formulated and implemented them. The issue of participation of parties at the policy draft and policy implementation stages is very crucial in order to determine the level of women's involvement in decision making. It is the public who are the consumers of policy and therefore if any element does not participate, it may be doubted whether such a policy has taken into consideration the needs of all groups. My worries, similar to those expressed by Longwe as follow, are that; "the project target group is often treated as an undifferentiated group of 'people' without recognising the special needs of women. More likely and worse, a male biased vocabulary is used to describe the target group, which becomes 'men' rather than 'people'. In this way the women of the target group actually disappear from sight - and from thought" (Longwe, 1991: 149).

Fourth, moving from the general level, the discussion further focuses on the provision of education for visually impaired women. Various models of educational provision will be reviewed. In addition, gender issues in provision of education for visually impaired women will be dealt with. Conceptualising gender issues in the provision of education at different levels is of great importance if we are to understand the issue of gender imbalance in service delivery. This will entail the examination of access of visually impaired females to education compared to males at primary, secondary and tertiary levels. In each case, the reasons for such imbalance will be revealed. Towards the end of the chapter, I will discuss the implications of education sector reforms for visually impaired people. The sub-
policy of particular relevance here is cost sharing which was re-introduced in the second half of 1980s. The ways in which these reforms have either accelerated or reduced the gender gap in accessing and gaining education between visually impaired females and males will be revealed. This is important because where there is poverty, as is the case in most Tanzanian communities, parents and guardians tend to be biased in distributing the meagre resources amongst their children, favoring males and those who are non-disabled. In such a context my interest is to establish where a visually impaired woman falls. Finally, the chapter will be concluded by summarising the main issues.

**Country Profile**

Some brief background information may be helpful in setting the context for examining education in Tanzania. The United Republic of Tanzania was founded in 1964 through the union between the former Republic of Tanganyika and the Republic of Zanzibar. Tanganyika, which today forms Tanzania mainland, was a British trusteeship territory until December 1961 when it became independent. It became a republic a year later. Zanzibar, in contrast, was a British protectorate. It became independent in 1963, and experienced a revolution in January 1964.

Tanzania joined the United Nations in 1962 as its 108th member. The republic is also a member to a number of regional groupings such as East African Community (EAC), The Southern African Development Community (SADC), and the Common Market for Eastern and Southern Africa (COMESA), just to mention a few. Tanzania was founder member of the Organisation of African Unity (OAU) in 1963, which from the 26th of May 2001 changed to become the African Union (AU).

In 1998, Tanzania had a population of 35.1 million people and a population growth rate of 3.1% per year (*Human Development Report, 2002*). 51% of Tanzania's population are women (Farmighetti, 1995). It is estimated that in any country's population, 10% are disabled persons (WHO, 2000). Using this formula, it is estimated that in 2000 Tanzania had 3.51 million disabled people with varying nature and severity of impairments. Visual, mobility, hearing, intellectual, deaf-
blindness, albinism and autism are the most common kinds of impairments found in the country. 32.3% of Tanzania's population lives in urban areas, while 67.7% live in rural areas. The infant mortality rate is 104 for every 1,000 live births with life expectancy of 51.1 years (HDR, 2002). This population is distributed among 120 ethnic groups. Most of these are Bantu speaking, the majority being organised along patrilineal lines. Despite variations of traditions, customs and systems of customary laws among ethnic groups, all share a common language known as Kiswahili. Kiswahili is both a national and official language. English is used as an official language only.

The mainstay of the economy is agriculture with the peasant sector still dominant. According to the Human Development Report (2000), the Gross National Product (GNP) was US $7.2 billion with a growth rate of 3.4% annually. The Gross National Product per capita was US $220 with an annual growth rate of 0.4%. The inflation rate was 17.3% per year. The per capita income of its people was US $173.

Overview of Tanzania's Educational System

Educational System

The current educational system of Tanzania involves two years of nursery school, seven years of primary school, six years of secondary, and three to five years of higher education depending on the type of course. The six years of secondary education are divided into four years of ordinary secondary education, and two years of advanced secondary education. In Tanzania, the formal educational system encompasses primary, secondary, adult, teacher, special needs, higher and technical education. The inspectorate and educational planning are also part of this system. Today, there are two ministries responsible for education in the country. These are Ministry of Education and Culture, and Ministry of Science, Technology and Higher Education (Bagandanshwa, 1997; Ministry of Education and Culture, 1995; Ministry of Science Technology and Higher Education, 1995).
Primary education is compulsory for all children. Secondary education is optional. The school entry age is seven years. Primary education is the responsibility and monopoly of the state, while secondary, teacher, vocational and tertiary education are offered in partnership between the public and private sector (Bagandanshwa, 1997; Ministry of Education and Culture, 2000). Pre-school education is not part of the general education. It is run partly by the government and partly by the community. The owners of pre-primary centers include parastatal organisations, religious denominations, political party affiliates, government departments, industrial companies, voluntary agencies, village councils, individuals, Towns/Municipal councils, military and para-military organisations. At the policy level, however, pre-primary education (years 5-6) is under the control of the Ministry of Education and Culture (Education and Training Policy, 1995). In contrast, day care centres (for children aged 2-4 years) fall under the authority of the Ministry of Labour, Youth and Social Welfare, under the Act regulating the establishment of Day Care Centres (Ministry of Education and Culture, 2000).

**Indigenous Education**

According to Mkaali (1996), before the intrusion of the Europeans into African societies, Tanzania peoples had their traditional ways of caring and training for their people (Bagandanshwa, 1997:21). This view is also shared by Gillette (1977), Ocitti (1973), Rodney (1982) and The United Republic of Tanzania (1995). Indigenous education took formal, informal and non-formal forms. Basically it was education for survival. “This type of education emphasised principles of good citizenship, acquisition of life skills and the perpetuation of valued customs and traditions” (United Republic of Tanzania, 1995:1). Through such education, people learned to respect one another, to respect their elders and to co-operate with one another. The knowledge they gained enabled them to plan their families and understand various seasons for cultivation, harvesting etc. It also gave them skills for food preservation and storage. Additionally they learned how to hunt and tame animals. They were experts in military technology as was required for the defense of family, kin-group and community. The education received was quite adequate in so far it met the requirements of the society at that time (Mkaali, 1996). It taught
skills which directly reflected the kind of activities each social group, according to age and gender, was supposed to do for the subsistence of the family (Katulushi, 1999; 2000). The method used was learning by doing. It was education for all. Socialisation was the major means of instruction. It had the following features: close links with social life, both in a material and spiritual sense; many sided-ness; and, progressive development in conformity with the successive stages of physical, emotional and mental development of the child (Rodney, 1982:239).

As far as indigenous education for disabled people is concerned, there are diverse views. According to Rutachwamagyo (2002), there are societies in Tanzania which since time immemorial do not consider disabled people to have any significant role to play. In those societies, disabled people are denied access to all forms of education. He maintains that negative social attitudes meant that disabled people in such societies were denied access to education. Consequently, they faced problems in meeting challenges in life. But, in other traditions, disabled people were considered as integral to the Tanzanian traditional society. They had their ascribed roles and positions in their families and their respective communities. Like everyone else, they could acquire by merit, status and position in society (Bagandanshwa, 1997).

Bagandanshwa (1993) observes that: “disabled persons were the responsibility of their families like anyone and anybody of their sex and age. Their families cared for them, trained them in all life aspects, and ensured that they were integrated into the mainstream of the larger community.” However, further development of indigenous education was brought to a standstill by the onset of colonialism in Tanzania in the 18th century.

**Colonial Education**

Colonial education brought about different educational structures. The new education system was indifferent to the basic needs of the indigenous society and was implemented primarily to support colonial socio-cultural, economic and political motives. Such motives included getting semi-skilled labour for menial positions in the colonial administration, supporting the development of the economy and economic infrastructures, and inculcating western cultures. During that era, there
was a clear racial dimension to access to education and to its quality. The system also exhibited gender bias. Europeans had the best quality education and Indians the second best, while Africans received a third class education. African education was associated with skills in agriculture, as required for more productive tilling of the land. Europeans and Indians received schooling, which placed far more emphasis on science and technology. Europeans were regarded as "good" for industrial development, and thus as requiring sophisticated technical instruction. Indians were said to be good at commercial development, which required mathematics and business skills. Only a small number of Africans, mainly men, were selected to compete with Europeans and Asians in education for modernisation. The education of African girls/women was given only minimal consideration. As Buchert (1994:21) points out: "as the economy regained strength, the concern expressed by the British administration, after reconfirming the basic principle of the 1925 Charter of Education, was that Africans were not in a position to compete successfully in the more remunerative employment markets of the territory which were dominated by Europeans and Indians". Hence, efforts were re-directed to improve the quality of education for non-Africans at the expense of the educational needs of the indigenous population. This was done irrespective of the heavy levy and other taxes Africans were being charged to foot the expenses of colonial administration, including the provision of education. Burchert (1994) further comments that the land was considered to be the African's natural vocation and agricultural education was seen as a means of preventing the production of educated unemployed Africans. Structures and relations engendered by this educational expansion were "dysfunctional" for the African society as a whole. Such deliberate actions to discriminate against Africans and to give them poor education had a severe negative impact on the new state in that even after independence all strategic spheres and posts were still filled by the Europeans and Indians.

When translated into actual figures, the total number of employees in the two highest professional employment levels was 17,142 at independence, of whom Africans constituted just 4,468, as against 4,309 Europeans and 8,365 Indians. These numbers reflect the limited attendance of Africans at the secondary and post
secondary levels. Although the overall size of the African system was immense compared with the European and Indian systems, more Indians (9,505) than Africans (6,031) received secondary education in 1961. Respectively, 80 and 95 percent of the European and Indian age groups were enrolled in primary and secondary education in 1956, whereas African enrolment in primary and middle schools, represented only 8.5 percent of the age group, even when discounting the effect of attrition, (Buchert, 1994). The obvious social differential along racial lines, which resulted from the unequal provision of education, was accompanied by gender inequalities in education.

The magnitude of such racial and gender discrimination as perpetuated by the colonial pyramidal structure of education against Africans is clearly exemplified by Tables 4.1, 4.2 and 4.3.
Table 4.1: African Education in Tanganyika by Category 1956-61: Schools and Enrolment

<table>
<thead>
<tr>
<th>Category</th>
<th>1956 Enrolment</th>
<th>1961 Enrolment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sch</td>
<td>Male</td>
</tr>
<tr>
<td><strong>Government</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary education std. V-IV</td>
<td>51</td>
<td>7,101</td>
</tr>
<tr>
<td>Middle education V-VIII</td>
<td>23a</td>
<td>1,296</td>
</tr>
<tr>
<td>Secondary std XII</td>
<td>10</td>
<td>1,003</td>
</tr>
<tr>
<td>Secondary std IX-XII, V-VI</td>
<td>17</td>
<td>1,355</td>
</tr>
<tr>
<td>Technical, vocational, teacher training</td>
<td>1b</td>
<td>-</td>
</tr>
<tr>
<td>Post-secondary</td>
<td>102</td>
<td>10,755</td>
</tr>
<tr>
<td><strong>Sub-total</strong></td>
<td>660</td>
<td>63,208</td>
</tr>
<tr>
<td><strong>Native authority</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary education std I-IV</td>
<td>89c</td>
<td>8,781</td>
</tr>
<tr>
<td>Middle education std V-VIII</td>
<td>749</td>
<td>71,969</td>
</tr>
<tr>
<td><strong>Sub-total</strong></td>
<td>1,806</td>
<td>155,187</td>
</tr>
<tr>
<td><strong>Mission assisted</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary education (std V-IV)</td>
<td>220a</td>
<td>16,111</td>
</tr>
<tr>
<td>Middle education (std IX-VIII)</td>
<td>15</td>
<td>1,183</td>
</tr>
<tr>
<td>Secondary (std IX-XII)</td>
<td>22</td>
<td>1,105</td>
</tr>
<tr>
<td>Technical, vocational, teacher training</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Sub-total</strong></td>
<td>2,063</td>
<td>174,586</td>
</tr>
<tr>
<td><strong>Mission unassisted</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary education std I-IV</td>
<td>72</td>
<td>4,569</td>
</tr>
<tr>
<td>Middle education std V-VIII</td>
<td>25c</td>
<td>1,052</td>
</tr>
<tr>
<td>Secondary</td>
<td>1</td>
<td>20</td>
</tr>
<tr>
<td>Std IV-XII, forms V-VI</td>
<td>1</td>
<td>32</td>
</tr>
<tr>
<td>Technical, vocational, teacher training</td>
<td>99</td>
<td>5,673</td>
</tr>
<tr>
<td><strong>Sub-total</strong></td>
<td>3,013</td>
<td>262,983</td>
</tr>
</tbody>
</table>
Table 4.2: European Education in Tanganyika by Category 1956-61: Schools and Enrolment

<table>
<thead>
<tr>
<th>Category</th>
<th>1956 Enrolment</th>
<th>1961 Enrolment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Schools</td>
<td>Male</td>
</tr>
<tr>
<td><strong>Government</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary stds I-IV</td>
<td>8</td>
<td>544</td>
</tr>
<tr>
<td>Secondary stds V-XII</td>
<td>1</td>
<td>167</td>
</tr>
<tr>
<td>Technical, vocational, post-sec and teacher training</td>
<td>a</td>
<td>a</td>
</tr>
<tr>
<td>Sub-total</td>
<td>9</td>
<td>711</td>
</tr>
<tr>
<td><strong>Private assisted</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary std I-VI</td>
<td>16</td>
<td>413</td>
</tr>
<tr>
<td>Secondary std VII-XII</td>
<td>1</td>
<td>18</td>
</tr>
<tr>
<td>Sub-total</td>
<td>17</td>
<td>431</td>
</tr>
<tr>
<td><strong>Private assisted</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary std I- VI</td>
<td>6</td>
<td>136</td>
</tr>
<tr>
<td>Secondary std VII-XII</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Sub-total</td>
<td>6</td>
<td>136</td>
</tr>
<tr>
<td><strong>Grand total</strong></td>
<td>32</td>
<td>1,278</td>
</tr>
</tbody>
</table>


N/A: Not Available.

Notes:

a) Part-time and full time classes in commercial subjects in Dar-es-salaam. Technical courses up to professional standard could be attended at the Royal Technical College of East Africa, Nairobi.
b) Including enrolment in evening classes.
c) Std means standard.

Table 4.3: Indian Education in Tanganyika by Category 1956-61 Schools and Enrolment

<table>
<thead>
<tr>
<th>Category</th>
<th>1956 Enrolment</th>
<th>1961 Enrolment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>School Male</td>
<td>Female Total</td>
</tr>
<tr>
<td><strong>Government</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary education stds I-IV</td>
<td>3</td>
<td>1,796</td>
</tr>
<tr>
<td>Secondary stds IV-XII</td>
<td>4</td>
<td>1,626</td>
</tr>
<tr>
<td>Technical, vocational, post</td>
<td></td>
<td></td>
</tr>
<tr>
<td>secondary and teacher training</td>
<td>a</td>
<td>a</td>
</tr>
<tr>
<td><strong>Sub-total</strong></td>
<td>7</td>
<td>3,422</td>
</tr>
<tr>
<td><strong>Private assisted</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary education stds I-VI</td>
<td>114</td>
<td>5,773</td>
</tr>
<tr>
<td>Secondary std VII-XII</td>
<td>31</td>
<td>1,8773</td>
</tr>
<tr>
<td><strong>Sub-total</strong></td>
<td>145</td>
<td>7,607</td>
</tr>
<tr>
<td><strong>Private assisted</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary education std I-VI</td>
<td>1</td>
<td>97</td>
</tr>
<tr>
<td>Secondary std VII-XII</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Sub-total</strong></td>
<td>1</td>
<td>97</td>
</tr>
<tr>
<td><strong>Grand total</strong></td>
<td>153</td>
<td>11,126</td>
</tr>
</tbody>
</table>

Source: Department of education, Annual Report 1956: i-ii Ministry of education, Annual Summary of the ministry of education 1961:xii

N/A: Not Available

Notes:

(a) Indian students were admitted to part time classes in commercial subjects and tailoring in Dar-es-Salaam to the Mombasa Institute of Muslim Education for trade training, to the Royal Technical College of East Africa, Nairobi for technical studies up to professional level and teacher training colleges in Kenya.

(b) Including enrolment in evening classes.

(c) Std means standard.
As indicated in Table 4.3, African education continued to be mostly provided in the missionary assisted and native authority (local government) sectors which together constituted approximately 93% of all institutions in 1956 and 1961. The government sector accounted for only approximately 4% of all institutions in 1961 and had declined by half since the Second World War. Students were concentrated in missionary assisted and native authority institutions although there was some minor growth (by about 7%) in attendance in government and missionary unassisted institutions during the period. While 90% of all students enrolled were in primary education and 8.7% in middle education in 1956, middle school students increased somewhat, to approximately 11% of total enrolment in 1961. Females constituted approximately one third of the student population, amounting to 34% in 1961. They were almost exclusively enrolled in primary and middle schools during the period, though there was some small increase at the middle compared with primary level (93% primary and 6% middle) in 1961 as compared with 1956. While 2% of the male student population was concentrated in secondary, technical, vocational and teacher education in 1961, the corresponding figure for females was approximately 1%.

In contrast, Table 4.2 indicates that among Europeans, 86% of male and 71% of eligible female students joined secondary education across the period 1956 to 1961; whereas Table 4.3 indicates that among Indians 72% of the male and 60% of the eligible female students joined secondary school in the same period. Unlike in the African system where only 4% of children had access to government schools, in the European system, 58% joined government schools. In the Indian system, it was between 23% and 33%. According to Buchert (1994: 61),

The resources spent by the British administration were differentially focused within the tripartite educational system. With respect to the African community, funding by the British administration was concentrated at the primary and middle levels with a small increase from around 60 percent of the total expenditure in 1949 to 64 percent in 1961. In the European and Indian systems, more resources were concentrated on secondary and post secondary education at the end of the British period compared with earlier. In the European system, 66 percent of the total expenditures were allocated to primary and 29 percent to
secondary education in 1949, while the comparative figures in 1961 were 54 percent for primary and 43 percent for secondary education. In the Indian system, support for primary education dropped from 70 to 44 percent, whereas secondary and post secondary education increased from 25 to 56 per cent during the same period.

Despite government funding, students also had to pay fees and other costs. For example "European and Indian self finance (via education tax, school fees and staff boarding charges, and the balance in the educational fund) constituted approximately half of the total expenditures on these communities in 1949 and 1961" (Buchert 1994:61). The provision of education across the three different systems, that is, European, Asian and African, and the great concentration of the government on primary education for Africans, reveal the extent that racial segregation prevailed in colonial education. Such segregation as Table 4.1, illustrates, became more intense as far as access of African women to education was concerned. Throughout the period the colonial government never paid any attention to educational needs of disabled people.

*Post-Colonial Education*

At independence in 1961, Tanzania inherited the colonial educational system. The challenge of the new state was how to eliminate racial and gender discrimination in education. Another issue was how to tackle the problem of lack of manpower to fill the posts held by Europeans and Indians. Therefore, immediately after independence, over the period 1962-1966, the concentration of the government was on education for manpower development. That was stressed in order to fulfil goals of increased economic growth and to meet the demands for Africanisation of the middle and high level posts as a manifestation of politico-economic independence. As Buchert (1994:93) points out, “manpower development dominated international thinking on education all over the world at that time...”. In order to back these changes the government passed the Education Act of 1962.
This Act repealed and replaced the 1927 Education Ordinance and was intended to:

- Abolish racial discrimination in the provision of education;
- Streamline the curriculum, assessment procedures as well as the administration and financing of education to provide for uniformity;
- Promote Kiswahili as a national language by making Kiswahili and English the media of instruction in schools;
- Make local authorities and communities responsible for the construction of primary schools and provision of primary education;

In spite of these new policy measures, there were no significant changes in the goals and objectives of education. One of the weaknesses of the manpower approach was that it perpetuated education for the elites at the expense of mass education. It was realized that there was a need for a major reform in the inherited educational structure and content. As a result, in 1967 a new direction of development through socialism and self-reliance as a fundamental development policy was set out. All major means and structures of production, such as land, water, industries, banks, etc. were put under state ownership through a nationalisation process. Water, education, health services and the like became a responsibility of the state.

Central to these new programmes was the formulation of Tanzania's Education for Self-Reliance (ESR) policy. The philosophy followed from the mandate of Nyerere's Arusha Declaration. It defined what constituted knowledge for Tanzanian society. The major emphasis of the policy was that education should be provided for all members of the society. The philosophy affirmed the need for curriculum reform in order to integrate theory with the acquisition practical life skills. It also urged linkage of education plans and practices with national socio-economic development and the world of work (Arusha Declaration, 1967; TANU, 1967; Wimile, 1997). According to Campbell (1991: 149), "The term itself, self-reliance, is an assertion of inward looking, looking internally for one's basic survival, not to
external forces". Self-reliance also included tapping the vast knowledge of the people in Tanzania’s rural areas.

The question then was how to engender this self-reliance through education. As a response to the challenge, the government passed the Education Act of 1969 to regulate the provision of education (Ministry of Education and Culture, 1995). According to Campbell (1991), the goals of the Act were

... to make agriculture an integral part of the curricula. Recognising that Tanzania is basically a rural economy, with its mainstay based on agricultural production, the leadership sought to produce individuals with a healthy attitude toward agriculture. The shamba (small farms), on which students and teachers were supposed to work collectively, were to be the vehicles for engendering a respect for agricultural work, with the produce from these shamba providing food for the school and extra funds for purchasing school equipment.

Linked to this emphasis on agriculture was the effort to make primary school education complete in itself rather than a preparation for secondary school. In order to make this possibility appear more realistic, the entry age for primary school was raised to seven plus so that school leavers would be old enough (fourteen plus) to engage in meaningful work in the village. The underlying assumption was that primary school students would learn enough about agriculture to enable them to contribute to rural life.

A series of implementation strategies to make this philosophy a reality were laid down. They included literacy classes in 1970, The Musoma Resolution of 1974, The Universal Primary Education policy (UPE) of 1977, Education Act of 1978, expansion of secondary education and the bridging of regional disparities in education. In each of these developments a key element was to try to eliminate gender imbalance. The philosophy of ESR was based on the education of all through targeting those who had been denied this right in the colonial education, particularly women. Affirmative action including lowering the pass-mark for girls joining secondary schools was taken. Similarly school fees and other school costs were waived in order to influence parents who had negative attitudes towards incurring expenses for girls’ education. Additionally, a quota system was introduced to try to achieve a balance between advantaged and disadvantaged regions.
Adult education was a crucial aspect of the rural development plan. Financial, human, and psychological resources were diverted to adult education programmes that aimed at the eradication of illiteracy in five years i.e. by 1975. The aim of this programme was for the peasants to understand national policies of socialism and self-reliance and to learn about national plans for economic advance. Also, it had the purpose of reducing gender inequalities among adults, as women were the majority of the Tanzanians who had had little access to colonial education.

Literacy training was linked to policies for rural development and the bringing together of people into *Ujamaa* villages. This was important because agriculture was and still is the backbone of the Tanzania’s economy. Education had to enhance skills that could raise production and productivity. Ninety per cent of the population was engaged in small-scale farming. Women did much of the farming. Hence, they were and still are making a great contribution to the country’s economic development. In such a context, providing education with an emphasis on agriculture would also mean increasing women’s access to agricultural services. In almost all literacy classes, women’s enrolment and attendance outnumbered that of men. This is evident from Table 4.4.

Table 4.4: Number of Women and Men in Literacy Classes

<table>
<thead>
<tr>
<th>Year</th>
<th>Men</th>
<th>Women</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1975</td>
<td>1,738,461</td>
<td>2,066,062</td>
<td>3,804,463</td>
</tr>
<tr>
<td>1977</td>
<td>1,066,759</td>
<td>1,279,395</td>
<td>2,346,154</td>
</tr>
<tr>
<td>1981</td>
<td>1,230,832</td>
<td>1,875,574</td>
<td>3,106,406</td>
</tr>
<tr>
<td>1983</td>
<td>777,015</td>
<td>1,312,799</td>
<td>2,089,814</td>
</tr>
<tr>
<td>1986</td>
<td>757,376</td>
<td>1,260,717</td>
<td>2,018,093</td>
</tr>
</tbody>
</table>

Source: Ministry of Education 1989

To facilitate this programme, primary schools became adult education centres, offering simple training in agricultural techniques, craftsmanship, health education, housecraft, simple economics, accounting, and political education. As a result of this programme, the illiteracy rate decreased from 75% in 1970 to 40% in 1975 and was recorded at 15% in 1983. By 1985 this rate had decreased to 11%. In 1973 adult education was expanded to include workers' education. This expansion sought to increase workers' intellectual and professional capacities in order to
increase productivity. All workplaces were required to offer workers' education by conducting classes for their workers during normal work-hours for a period of not less than one hour daily (Campbell, 1991; Omari, et al, 1982).

The Musoma Resolution is an important document and landmark in the history of education in Tanzania. It was passed by the National Executive Committee of the ruling party in 1974. Inter alia, it declared the establishment of UPE in 1977. According to Olekambaine (1991:37-8), "UPE was one of the boldest moves made by the Tanzania government since independence. UPE was a positive development for women; for the first time full equality to primary school was achieved at the national level. The female ratio rose from 42% of total enrolment in 1974 to 49% by 1984. Full parity in access was reached in 1985". UPE was a key component of education for self-reliance (Musoma Resolution, 1974; TANU, 1974). It supplemented the earlier pronouncement about Education for Self-Reliance, which declared that primary education had to be accessible to all children of school age. According to Olekambaine (1991), UPE necessitated the expansion of primary schools to all villages in Tanzania through joint efforts between the community, local and central government. In 1978, the Education Act no. 25 was enacted to back and regulate the implementation of UPE. The Act stipulates the rights of all citizens to education at various levels and lays down compliance mechanisms of the educational reforms.

Fees in education were waived at all levels. This was done deliberately to make mass education a reality. Everything including transport, food, accommodation, textbooks, stationery, examination fees, etc. was covered by the government. Both poor and rich could go to the same government schools with the same curriculum and syllabus. Subsidising education also aimed at fighting racial and gender discrimination in education. By 1977, primary school enrolment had increased significantly. Although not all school-aged children were attending school, the basis for the attendance of all primary-school-aged Tanzanians had been laid. By 1981 the enrolment rate was 70% of the age group, among the highest in Africa (Buchert, 1990). By 1985 there were primary schools in almost all villages of Tanzania. Special attention was given to girls' access in order to reduce the
inherited gender gap to education. The efforts led to some important achievements, as seen in Table 4.5, even though gender inequality still persisted.

Table 4.5: Girls as Percentage of Enrolment in Primary Schools

<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1</td>
<td>44</td>
<td>47</td>
<td>50</td>
<td>50</td>
<td>50</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td>2</td>
<td>42</td>
<td>47</td>
<td>50</td>
<td>50</td>
<td>50</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td>3</td>
<td>42</td>
<td>46</td>
<td>50</td>
<td>50</td>
<td>50</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td>4</td>
<td>41</td>
<td>45</td>
<td>49</td>
<td>50</td>
<td>50</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td>5</td>
<td>39</td>
<td>43</td>
<td>48</td>
<td>49</td>
<td>50</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td>6</td>
<td>38</td>
<td>32</td>
<td>47</td>
<td>48</td>
<td>49</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td>7</td>
<td>37</td>
<td>39</td>
<td>45</td>
<td>45</td>
<td>47</td>
<td>48</td>
<td>50</td>
</tr>
<tr>
<td>total</td>
<td>42</td>
<td>46</td>
<td>48</td>
<td>49</td>
<td>49</td>
<td>50</td>
<td>50</td>
</tr>
</tbody>
</table>

Source: Tanzania Ministry of Education

In addition, apart from an increase in primary education, the government also made efforts to increase access of female students to secondary and tertiary education. According to Tanzania Gender Networking Programme (TGNP) (1992), the separate selection process for secondary school girls, compared to boys, which is often referred to as a quota system, was adopted to increase female enrolment in secondary schools. Girls' results on the standard 7 examination are separated from boys and a certain percentage of girls are selected for form 1 according to their scores. If there were no gender quota system, there might be no girls at all in secondary school in some areas.

The quota system operates as a form of affirmative action which has its roots in the early days of independence, when the government was struggling to abolish racial apartheid within the school system. Mbilinyi (1990:113) comments that: "during the 1980s, the percentage increase for girls from 1980 to 1988 in total enrolment rose 120%, compared to 80% increase for total secondary enrolment." This increase was largely a consequence of the UPE, which commenced in 1977. Access of females to secondary education subsequently had an impact on the number of women entering the university and their proportion within a total student body increased from 8% in 1961 to 24% in 1981 (Mbilinyi, 1990). Despite those efforts,
however, females' access to secondary and tertiary education continued to be low. (See Table 4.6)

Table 4.6: Female Ratio and the Education Pyramid in the 1980s in Public Schools

<table>
<thead>
<tr>
<th>Form</th>
<th>1981</th>
<th>1988</th>
</tr>
</thead>
<tbody>
<tr>
<td>Four</td>
<td>31%</td>
<td>34%</td>
</tr>
<tr>
<td>Total Number</td>
<td>8481</td>
<td>9180</td>
</tr>
<tr>
<td>Five</td>
<td>23%</td>
<td>25%</td>
</tr>
<tr>
<td>Total Number</td>
<td>1804</td>
<td>2313</td>
</tr>
<tr>
<td>Six</td>
<td>23%</td>
<td>19%</td>
</tr>
<tr>
<td>Total Number</td>
<td>1740</td>
<td>2240</td>
</tr>
</tbody>
</table>

Source: TADREG 1989

Female enrolment in secondary schools grew by 10% between 1978 and 1990, compared to 6% for male enrolment. Likewise, the female ratio in public secondary schools rose from 30% to 40% over the period 1978 to 1991 (TGNP, 1993). Although the rate of increase in female enrolment was higher than that for males during 1981-1991, still there were fewer girls in secondary schools than boys. In addition, there was a significant increase in the number of secondary schools, from 62 at independence in 1962 to 102 in 1967, when education for self-reliance was announced, and to 181 in the early nineties.

ESR was intended also to bring about regional parity in education and to reduce class disparities in access to education. As Buchert (1990:113) points out:

Regional and socio-economic disparities in education were, like gender inequality, positively affected by the comprehensive mass educational efforts. At the secondary level, free secondary education and the introduction of a quota system which allocated form 1 places in relation to the total number of primary school leavers in each region and district, in addition to promoting relative
female participation, evened out the regional and social economic proportionate enrolment for form 1. By 1976, it was close to the national average of 6.2 per cent in all regions except for Dar es Salaam (where the figure was as high as 17 percent). In 1982, more than half of form IV and V students in a representative sample of public secondary schools came from families where the father's occupation was farming and where the father had received at most four years of education and the mother no schooling at all. Between one third and two fifths of the students came from a small holder peasant background.

The Introduction of Structural Adjustment Policies (SAPs) and their Effects on Education Sector Reform

The recorded achievement in education from the late 1960s to the late 1970s was possible because the economy of Tanzania was booming. However, from the late 1970s onwards the economic situation of the country started to deteriorate drastically. By the 1980s the government's budget surplus had turned into a deficit of approximately 20% (Buchert, 1990). The change had adverse impact on all spheres of the society leading to a Structural Adjustment Programme (SAP) as a reform policy (Buchert, 1990; Wagao, 1992). The government's initial reforms were formulated under the National Economic Survival Programme (NESP) (1981 – 82) and the structural Adjustment Programme (SAP) (1982 – 85). These were strengthened by an Economic Recovery Programme (ERP) in 1986. ERP was divided into phase 1 and phase 2. The effects in question are associated with ERP 2 which introduced reforms in the social sector (URT, 1995). The policy called for a reduction in the size of the government through retrenchment of government employees; cutbacks in government's expenditure; privatising public property and services, including education, water and health; removal of subsidies on agricultural inputs for farmers and on food and other items for consumers; and the introduction of user charges in health and cost sharing in education.

SAPs have affected women more than men in Tanzania (Shayo, 1998; TGNP, 1993). The current macro-economic policies of SAPs have been designed with methodologies that are seldom participatory or gender sensitive. With this approach, women are being marginalised more than ever before. For example,
major decisions concerning people's lives are taken by higher authorities, without differentiating the impact of SAPs on men and women. At the time when SAPs were being introduced, the proportion of women cabinet ministers was 12% and the proportion of women parliamentarians was 11% (out of the total of 248 parliamentarians) (TGNP, 1993). This means that many decisions in Tanzania, including how SAPs could be implemented had relatively little input from women and other categories of the disadvantaged people.

The major effects of SAPs on women in Tanzania are primarily a result of the roles women play in their communities, their accessibility to and control over public resources and their social/political position in the society. Due to devaluation and a decline in primary commodity prices, women have had to work longer hours on family farms to compensate for lost family income. Similarly in the urban areas women and children have had to spend more hours selling items, often in the informal sector, to help the family survive. Yet the cost of living keeps on rising and women cannot make ends meet however hard they work. Some of them in desperation are moving out to the plantations to sell their labour cheaply and to work for much longer hours.

In the rural areas, the demand of SAPs to increase food and export crop production has put pressure on the government to motivate farmers to increase their crop yields. In the absence of improved technology, the farmers have no alternative but to expand their fields, relying largely on the hand-hoe and human labour. This means a greater workload falling on women who have to cultivate, weed and harvest extra acres, using the same implements as in previous seasons. Women in the rural areas find themselves producing for their families' survival as well as a surplus of food and cash crops to satisfy the world market. SAPs have not so far released new economic opportunities to the farmers/peasants or to women and other low income groups in the rural and urban areas. Moreover, smallholder farmers have had less and less a voice over the years concerning the prices of their crops. There is a growing trend for the prices of both food and cash crops to be set by private traders who have the means of reaching remote areas,
as well as direct access to foreign buyers. In this process the farmers are being more and more disempowered through SAPs.

The rising cost of living and increased production costs in smallholder farming, and in the informal economy have increased the workload for women in particular. Women have remained responsible for maintaining their households and families. In fact, expansion of school enrolment has increased their workload, because older children have no longer been available to help with childcare, cooking, and collecting water and wood fuel. The economic situation increases the power of men over women, and bosses over subordinate staff, and often means that women are subjugated to more sexual harassment than before. The dividing line between sexual harassment and prostitution is often difficult to measure. A secretary may give in to demands for sexual services in return for gifts, a job and promotion, because refusal would mean no job, let alone a promotion. Students comply with teacher demands for sex at all educational levels. Secondary school girls' lunch and travel costs are all too frequently paid for by 'sugar daddies' and young women line the streets in towns at night, looking for tourist customers. We need to study the underlying and intermediate causes which lead to these outcomes, which include women's reduced access to employment opportunities, lower wages and other incomes, and (the underlying) structure of unequal power relations (Rusimbi, 1994; Shayo, 1998; TADREG, 1991; TGNP, 1993).

The introduction of SAPs has meant that children of poor parents have often been deprived of educational opportunities. At primary level, parents are required to buy uniforms, stationery and books, as well as pay school fees disguised under the term building fund. At the secondary school level, parents have to meet the full cost of books, uniforms, school fees, examination fees, stationery, and food for boarders. At the university level and in Advanced Diploma studies, students are given loans to meet their living costs, which are to be re-paid (after the completion of their studies). However, such loans are not sufficient to cover all costs incurred by students in higher learning institutions. This means that students from poor families suffer more. Additionally, due to limited funds, there is no guarantee that all needy students receive loans from the government. Given the material poverty
of their families, the majority who do not get loans fail to continue with tertiary education.

The cost of education has tended to increase expenditure of the household at the expense of consumption of essential needs. Given the level of poverty of a majority of parents in Tanzania, many have to choose between feeding or taking their children to school. Women, Education and Development (WED) (1991:1) comments "...the re-introduction of school fees has proved to be an unpopular issue. The heated debates in the parliament and discontent of parents and students at the recent raising of the secondary school fees is an indication of such discontent". Although, there were some positive indications with respect to economic recovery during the 1980s, the impact of structural adjustment programmes on the social sectors and social equality, including equity in education, was negative (Buchert 1990; Shao, 1992). In 1989 the Minister for Education reported that the enrolment of primary school students had dropped by 10 per cent between 1984 and 1988 (Daily News, August 16, 1989). TGNP (1993:48) points out that: "since the mid – 1980s, many more children drop out of school than before...". Some parents have withdrawn their children from school and instead allowed them to work as casual labourers in coffee plantations or as house helpers earning some money to reduce living costs of their poor parents. This only ensures persistence of the vicious circles of poverty. Rusimbi (1994:7) points out that: "changes are taking place fast in the education system in the country.

These changes, which include privatisation of schools and schoolbook production, payment of fees, removal of a quota systems for girls and poor regions, to mention a few, seem to work towards eroding the whole foundation of the Tanzanian socialisation process. In the past, education was used to discourage elitist tendencies in the society. The present education system, however, is likely to be working in the other direction. As a matter of fact, elitism is becoming the order of the day".

Rusimbi (1994:7) further comments that the withdrawal of the government from supporting the educational sector is leading to the collapse of educational
structures - from primary to university level. However, at the same time, the private educational sector is becoming stronger and is in greater demand from the public. The poorer people seem to be stuck with under-resourced government schools while people with higher incomes have already started protecting themselves by sending their children to good private schools within and outside the country. At the same time adult literacy classes appear to have declined across the country, raising the illiteracy level from 11% in 1980s to 25% in the year 2000. It is likely to continue to increase by 2% annually (UHURU, 15 November 2001).

The persistent lack of access of girls and women to education has increased partly because of the re-introduction of cost sharing and partly because of the factors discussed in Chapter Three. Campbell (1991:167) has concluded that: “the Tanzanian education system is indeed facing serious crisis. However, the answer is not to return to a narrow access to education...”.

The Provision of Education for Visually Impaired Persons in Tanzania

Before the coming of the Western educational system, visually impaired people were integrated into the indigenous or traditional educational systems. Contemporary special needs education for visually impaired people can be traced back to the introduction of European education into the country. Documentation of such early schooling is meagre, but it has been said that it started in 1950 (see, for example, Choma, 1985; Kalumuna, 1991; Mlimahadala, 1996; Mujaya, 1978; Possi, 1986; Possi, 1994). The only detailed account is Bagandanshwa’s thesis of 1997. Being a visually impaired person himself and a school leaver of the first school for visually impaired people in the country, Bagandanshwa was deeply interested in tracing the beginning of education for visually impaired people in Tanzania. He interviewed Captain Varley who was among the first missionaries to start the service. He also interviewed Captain Johnson who was the successor of Captain Varley. Both were retired by the time of his study and living in England. In addition, he interviewed two visually impaired people who were among the first students to study at Buigiri School for Blind Boys in 1951, the first in the history of special needs education for the disabled people in Tanzania. However, Bagandanshwa
According to Bagandanshwa (1997), early educational services for visually impaired people in Tanzania took the form of private tuition in the home. The first person to learn Braille in Tanzania was Shedrak, who was taught Braille by an Anglican British missionary woman, Mrs. King, at Berega Anglican Church Mission in Kilosa District in 1930. This was done out of compassion. In 1932, the administration of the Diocese of Central Tanganyika of the Anglican Church sent Shedrak to Kongwa Bible School (the present day St. Philip Theological College Kongwa) to teach catechist Paul Milangasii, who had just become blind, how to read and write Braille. Up to this point, the main issue was how to assist specific individuals to be able to read and understand the Bible on their own (Varley, 1996). Although the learning of Braille was still home bound and private, it became gradually institutionalised.

In the 1940's the diocese started sending visually impaired people to the neighbouring country of Kenya, to the Salvation Army's Thika School for the Blind, for education. At this school, they learnt Braille, the Bible and other academic subjects. With all these efforts in place, the church was still faced by four problems. The first was how long it would continue sending people to Kenya for their education. The second was what to do with those coming back from Kenya after completing their education. The third was what to do with the visually impaired population in the diocese. The fourth was the expense of sending people to Thika School. It was obvious that it would become even more expensive as years passed. These problems haunted the administration of the diocese, and the search for solutions began (Varley, 1996).

In 1946, at Buigiri Mission in Dodoma region, Catechist Paul Milangasii taught a British sighted missionary from the Church Army Society, Captain Fred Varley, how to write and read Braille. From that time, Varley and Milangasii became more and more involved in preaching the gospel to visually impaired people. During his holiday in London in 1948, Captain Fred Varley successfully convinced the Church
Army Society in England that there was a further job to be accomplished in the Diocese of Central Tanganyika. Although the diocese had schools meant for all children, visually impaired people were not getting education. In an interview he said:

I frankly told the leaders of the society, that if we believe in equal creation by God, if we value all human beings as children of God, and if we believe that all people must have an opportunity to learn about Christ, then we should do something about visually impaired and blind people in Central Tanganyika being left out of education (Varley, quoted in Bagandanshwa, 1997).

The conviction of the Church Army Society that a school for visually impaired people should be built was approved by Bishop Jones of the Diocese of Central Tanganyika in that same year. However, it was not until two years later, in April, 1950, that Buigiri School for the Blind was opened. Captain Fred Varley became its first Head, and his long term friend, Catechist Paul Milangasii, was the first and only teacher at the school (Varley, quoted in Bagandanshwa, 1997). After the opening of the school, a number of problems emerged, including financing, staffing, lack of pupils and a shortage of teaching materials. The diocese took responsibility for financing the school. Various parishes and synods inside and outside the diocese donated money to run and expand it as the need for its services increased. The colonial government was not involved, and indeed showed no interest in the education of visually impaired people. It did not believe people with visual loss to be economically worth investment (Bagandanshwa, 1997).

The school started with six pupils, recruited from within the parishes. Many parents who had visually impaired children were ignorant about education for visually impaired people. This coupled with negative attitude about disabled people made some of the parents reluctant to send or to let their visually impaired children go to school at Buigiri. Additionally, poor infrastructure discouraged attendance. Many of the children were living in areas where transport and communication were a major problem. Church ministers were instructed by the Bishop to make it part of their duties to identify visually impaired children, and make sure that they went to school at Buigiri. The Bishop communicated with other Bishops within and outside the
Anglican Church about the school and asked them to help in recruiting pupils. As a result the enrolment rate shot up. Hence, what had initially started as a small school for a district, suddenly became a national school. The problem of teaching materials and what to teach then became urgent. Christian teaching, handicrafts and ordinary academic subjects were taught. The purpose was to enable those enrolled to know the gospel, develop skills for an independent responsible adult life and facilitate the possibility of visually impaired people rising to the top of the educational pyramid.

The acute shortage of teaching materials adversely affected the school. Three means were used to alleviate the problem. First, advantage was taken of the long-standing relationship between the Diocese of Central Tanganyika and Thika School of the Blind in Kenya. Braille materials provided from Thika Schools for the Blind kept the work at Buigiri going while other options were being explored. Secondly, donations were received from different international organisations. The Royal Commonwealth Society for the Blind (RCSB), the Church Army Society, the Royal National Institute for the Blind (RNIB), the National Library for the Blind (NLB) and the British Foreign Languages Bible Society (BFLBS) all donated braille books, materials and equipment to the school. Third, the staff at the school, and other interested individuals were encouraged to prepare stories and teaching manuals, which with basic and supplementary teaching books in various subjects were sent to the Scottish Braille Press in Edinburgh for transcribing (Bagandanshwa, 1997).

After opening the school, the time came for the Diocese of Central Tanganyika to consider what to do with its standard four school-leavers from Buigiri, as there were no established special middle schools or special units above that level for them to go to. In 1957, the first blind learner, Mr. Yohana Isabu, joined Kilimatinde Middle School in Manyoni (a mainstream school also owned by the diocese) from Buigiri School in order to continue his studies. There was appreciation within the diocese of the need for more suitable education for standard four leavers from Buigiri School. Consequently the diocese’s middle schools of Chamhawi (in Mpwapwa District today) and Kigwe (in the Dodoma Municipality today) opened resource rooms to accommodate visually impaired students. When Yohana Isabu
completed standard eight in 1960 and qualified for a place in standard nine (secondary education), the diocese decided that he should join the Dodoma Alliance Secondary School (the present day Mazengo Secondary School), another church owned school. On the advice of the headmaster of Mpwapwa Government Secondary School, Mr. Matthew Ramadhani, who was a delegate of the synod of the diocese, however, the provincial commissioner or Central Tanganyika intervened and ordered that he should join Mpwapwa Government Secondary School. Yohana Isabu joined this school in 1961 as the first blind person in the country to go beyond primary education. From 1961 to date, Mpwapwa Secondary School has remained with a resource room for visually impaired students (Bagandanshwa, 1997). In 1961, RCSB sent its officer, Mr. Salisbury, to Tanganyika to advise on the best possible system within which to educate people with visual impairments. Mr. Salisbury recommended an open education system under which visually impaired people could learn alongside their sighted peers. This influenced and contributed to the opening of more resource rooms in mainstream schools. It marked the start of expansion in integrated education in the country.

From the early 1960's onwards, the education of visually impaired people in Tanzania has rapidly expanded. For example, in 1962 the Lutheran Church at Lushoto District in Tanga Region opened Irente School for visually impaired girls. In the same year, the Pentecostal Church opened Furaha School for both visually impaired girls and boys at Tabora Town in Tabora Region. Government efforts to address the educational needs of visually impaired people began in 1963, with the opening of an Annex for visually impaired boys and girls at Uhuru Primary School in Dar-es-Salaam region. In 1970, a big change occurred in the education of visually impaired people in Tanzania, when the government declared that primary education was solely the responsibility and monopoly of the state. All primary schools in the country were nationalised as the result of the policy of Education for Self-Reliance. All integrated units for visually impaired people in primary schools thus came under the state for the first time. However, the special schools of Buigiri, Furaha and Irente were not affected because the policy was meant for regular schools only. They remained under the partnership between the state and the
churches which established them. Realising the importance of co-ordinating these schools, the government established a Special Education Unit in 1970 headed by a social welfare officer in the Department of Primary Education in the then Ministry of National Education. This Department gives directives and plays an advisory role for government and non-governmental institutions involved in special needs education (Bagandanshwa, 1997; Wimile, 1997). Through the efforts and actions taken by the state, the service had expanded from one primary school during colonial times to 3 special primary schools, 22 annex primary schools and 60 itinerant units by the end of the nineties (Information Centre on Disability (ICD), 1998).

As explained earlier, secondary education for visually impaired people started in 1961 at Mpwapwa (mainstream) Secondary School. However, there was a growing number of visually impaired students completing and passing primary education national examinations every year necessitating an increase in the number of secondary school places. Consequently, in 1973 two more mainstream secondary schools started enrolling students with visual impairments for both ordinary and advanced level studies. These were Shinyanga Secondary School, which enrolled male students for ordinary level studies, and Milambo Secondary School, which enrolled male students for advanced secondary level studies (Mlimahadala, 1996). Secondary education for visually impaired girls started in 1972 at Tabora Girls’ mainstream Secondary School. By 2000 there were 10 mainstream secondary schools enrolling visually impaired students in Tanzania, of which eight were under government control and two under the churches. Teaching was the first profession designed by the government for visually impaired people on completion of their secondary education. Mpwapwa was earmarked by the government in 1965 as the first teachers’ mainstream college to enroll visually impaired trainees.

University education for visually impaired persons in the country started in 1978 when two visually impaired male students were enrolled at the University of Dar es Salaam. Up to 2001, 38 visually impaired students had been enrolled of whom two were females and 36 were males. The Open University of Tanzania, which is a distance learning institution, was established in 1994. It started enrolling visually impaired students in the 1999/2000 academic year. The Open University enro
visually impaired students through a special programme funded by David Anderson Africa Trust (DAAT) based in England. The programme is designed to help visually impaired students access long distance learning courses through audio materials as the major means of acquiring knowledge. Additionally, the fund covers other university costs including tuition fees. The efforts of the university to assist visually impaired people acquire university education were made after recognising that many of them could not afford university fees and other associated expenses. Without such efforts, the majority of visually impaired people could not access this level of education. Many of them have to pursue access courses to enable them be enrolled for a degree course. Up to 2001, 40 visually impaired students had been enrolled of whom seven were females and 33 were males.

Two systems of education for visually impaired people have operated in Tanzania since 1950. The first is segregative, carried out through three special residential primary schools, Buigiri, Irente and Furaha, all of which were established and continue to be run by the churches. Bugiri, which was formerly for boys only, and Irente, which was for girls only, are now co-educational. The second system is integrative. This is the approach of the government schools that came into operation in 1963 when the first government primary school (Uhuru Annex) started to integrate visually impaired pupils into its mainstream classes. This system also operates in secondary and other learning institutions, including the University. In such a system, there is a resource room and specialist teacher in each institution who is able to assist visually impaired students. In 1990 the government introduced an itinerant programme as another means of integrating visually impaired children in primary education. This is a programme run jointly between Tanzania Society for the Blind (TSB) and the government, whereby TSB trains specialist teachers, supporting them with either bus fare or fuel for motor cycles to enable them reach the schools. Normally a visually impaired pupil attends a nearby mainstream school. The itinerant or mobile teacher visits these pupils, assisting them with Braille transcription of notes, classroom tests and other manuscripts of relevance, and assists regular teachers to correct exercises of pupils. Normally one itinerant teacher may have up to five schools to coordinate. In one of the five schools, a resource room is built for the facilitation of the programme.
In 1997, inclusive education was introduced as another approach to provide education for disabled children. The programme started with the training of the implementers who included class and head teachers of the earmarked schools, ward education officers, district education officers, and district school inspectors where the earmarked schools were located. After the training, a national resource team of ten people was formed to monitor the programme. It started as a pilot project in two mainstream primary schools in Temeke District in Dar-es-Salaam. Just before the start, community based awareness seminars were conducted to orient the community around the schools to the notion of inclusive education. The seminars were attended by the school parent committees and all academic and non-academic staff. The role of the trained teachers is to assist disabled pupils in coping with the teaching/learning environment, give remedial instruction, transcribe learning materials, design and make teaching gadgets and help with sign language etc. Pupils with different impairments, e.g. visual, hearing and intellectual impairments, etc., were included within the mainstream setting. Each of the two schools began with ten children in class one (a) and (b) streams. In each of the inclusion classes there were 35 children - 30 non-disabled and 5 disabled. This was in accord with the standard class limit set by the Ministry of Education and Culture for the successful practice of inclusion.

**Conceptualising Gender Bias in the Education for Visually Impaired Persons in Tanzania**

The history of special needs education in Tanzania reveals an alarming gender bias whereby girls/women with visual impairment have had less access across all levels of education. This situation reflects the subordinate place women occupy within the society. The circumstances of disabled women in the society are even worse than those of their non-disabled counterparts. As Vernon (1998) notes, "disabled women are the most socially, economically, educationally deprived and oppressed members of the society". Boylan (1991:31) writes that "... women who are disabled have less access to the educational system than non-disabled women or male counterparts". For example, while missionaries initiated educational provision for visually impaired males in 1950 in Tanzania, that for their female
counterparts only began in 1962. The failure of missionaries to initiate educational provision for visually impaired women resulted from biased gender assumptions that certain jobs are for men only and that women are not capable of performing them. As a case in point preaching was regarded as an exclusively male activity (Adam, 1981; Bagandanshwa, 1997). On the other hand, "the colonial administration's interest in education derived from its growing needs for middle layers of administrative personnel that could provide a proper level of communication, and for technical personnel that could secure economic development in the territory" (Buchert, 1994:16). The education being provided by both missionary and colonial government schools was male biased.

The education of females was seen in the context of their traditional domestic roles as wives and mothers and was domestically oriented. For example, it comprised cookery, housekeeping, childcare, nutrition, gardening, farming, etc. Buchert (1994: 19) comments that "the education of females was ... directly related to the matrimonial needs of males'. According to Rodney (1982: 251) "nowhere did the cash-crop economy or the export of basic ores make provision for educated women. As in the capitalist metropoles it was assumed that the civil service was for men. Therefore the extremely limited employment sector in the colonies had nothing to offer educated women...". Throughout this period no attempts were made to provide education for visually impaired women. This may partly be because visually impaired women were perceived as not fitting the traditional roles of a woman as determined by the male egoistic desires. In male dominated societies, women are expected to satisfy men's sexual needs. However, which females it is permissible to have sexual intercourse with and/or to marry varies in accordance with the cultural beliefs and values of the various ethnic groups (Sentumbwe, 1995:163). Boylan (1991:52) writes that the able-bodied often treat women who have disabilities as asexual. Thus, the patriarchal culture undermines the womanhood of a disabled woman. By a womanhood I refer to (1) matrimony, which implies (2) having a home (3) motherhood, and (4) ability to fulfil specific domestic roles" (Sentumbwe 1995:164). On this basis, visually impaired women were denied even domestic education like cookery, housekeeping, childcare, gardening, farming, etc. which was available for their fellow non-disabled women.
Although the government of Tanzania has made efforts to expand special needs education for all disabled people, the structure of the system has remained pyramidal with the majority at the primary level. As the educational ladder rises, there are fewer and fewer disabled students. Across all levels, moreover, females have lesser access relative to males. For example, in 1998 the total population of visually impaired pupils in primary schools was just 597 girls and 716 boys. In the same year there were 50 visually impaired girls and 110 boys in secondary schools (Ministry of Education, 1998). Tables 4.7, 4.8 and 4.9 further illustrate this pattern. Gender disparity in special needs education continues irrespective of the affirmative action taken by the Tanzanian government to lower the pass mark for visually impaired students when joining secondary schools. In an interview conducted by the researcher, Mr. Benjamen Kulwa, the national co-ordinator of special needs education (August 2000), said:

The pass mark cut-off point for able-bodied children is 75% minimal average marks. But, for visually impaired students we go lower as we have to consider that their attainment during their schooling and during examinations might have been affected by a number of factors. So we say at least the pass mark should not be below 32% minimal average. This is not the desired pass mark. But that was what we agreed. We thought that we should not leave the allocated places unfilled while we still have some students. We want to give them a chance to try and try, expecting that maybe at secondary level they might improve.

However, the efforts to lower the pass mark have not solved the problem of access of visually impaired girls/women to secondary education or to subsequent levels. Limited access to secondary education is partly a consequence of the failure of the government and the society to strike a balance for access as between visually impaired females and males. While there were three secondary schools for visually impaired males during the 1970s and 1980s, for example, there was only one available to females. Such unequal allocation of resources and schools does not only affect the field of special needs education, but all girls and women in Tanzania. During the same period, as WED (1991) points out, “there were 38
boarding secondary schools for non-disabled boys versus 15 for non-disabled girls”. This means that gender disparity in education has been and still is a big problem in Tanzania. Table 4.7 illustrates the extent of gender bias in allocating educational opportunities for visually impaired females.

Table 4.7: Potential Enrolment Allocation for Visually Impaired Boys and Girls Ordinary Secondary Schools Intake per year

<table>
<thead>
<tr>
<th>Name of the School</th>
<th>Allocation for Boys</th>
<th>Allocation for Girls</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mpwapwa</td>
<td>7</td>
<td>-</td>
<td>7</td>
</tr>
<tr>
<td>Shinyanga</td>
<td>7</td>
<td>-</td>
<td>7</td>
</tr>
<tr>
<td>Moshi</td>
<td>7</td>
<td>-</td>
<td>7</td>
</tr>
<tr>
<td>Kantalamba</td>
<td>7</td>
<td>-</td>
<td>7</td>
</tr>
<tr>
<td>Kilosa</td>
<td>2</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Ndanda</td>
<td>3</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Tabora Girls</td>
<td>-</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Korogwe Girls</td>
<td>-</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>33</strong></td>
<td><strong>16</strong></td>
<td><strong>49</strong></td>
</tr>
</tbody>
</table>

Source: Special Education Unit, Ministry of Education and Culture, 2002.

Note:
The selection of visually impaired students to join ordinary secondary education (O-level) every year, apart from the cut point pass mark, is also determined by potential opportunities which as Table 4.7 reveals, gives more opportunities to boys than girls. Table 4.8 further highlights such gender imbalance in actual selection of visually impaired boys and girls between 1998 and 2002.
Table 4.8: Selection of Visually Impaired Boys and Girls Joining O-Level Secondary Education, 1998 -2002

<table>
<thead>
<tr>
<th>Year</th>
<th>Boys</th>
<th>Girls</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1998</td>
<td>27</td>
<td>12</td>
<td>39</td>
</tr>
<tr>
<td>1999</td>
<td>27</td>
<td>17</td>
<td>44</td>
</tr>
<tr>
<td>2000</td>
<td>27</td>
<td>12</td>
<td>39</td>
</tr>
<tr>
<td>2001</td>
<td>39</td>
<td>23</td>
<td>62</td>
</tr>
<tr>
<td>2002</td>
<td>30</td>
<td>14</td>
<td>44</td>
</tr>
<tr>
<td>Total</td>
<td>150</td>
<td>78</td>
<td>228</td>
</tr>
</tbody>
</table>

Source: Special Education Unit, Ministry of Education and Culture, 2002

Notes:
Table 4.8 reveals that the total number of boys selected for five years was 150, almost twice as many as girls (78). However, the study was unable to verify whether or not all selected students got enrolled. The table also shows that there were cases where the selected students exceeded the potential allocated places, for example in 1999 and 2001. This happened because there were more students who passed, necessitating the government to admit beyond its allocated potential places. As Table 4.7 shows, the potential places for girls every year are sixteen versus thirty-three for boys.

Table 4.9: Actual Enrolment of Visually Impaired Female and Male Students in O-Level Secondary Schools in Tanzania, 1992 -1997

<table>
<thead>
<tr>
<th>YEAR</th>
<th>NO. OF FEMALES</th>
<th>NO. OF MALES</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1992</td>
<td>8</td>
<td>16</td>
<td>24</td>
</tr>
<tr>
<td>1993</td>
<td>No Enrolment.</td>
<td>No Enrolment.</td>
<td>No Enrolment.</td>
</tr>
<tr>
<td>YEAR</td>
<td>NO. OF FEMALES</td>
<td>NO. OF MALES</td>
<td>TOTAL</td>
</tr>
<tr>
<td>------</td>
<td>----------------</td>
<td>--------------</td>
<td>-------</td>
</tr>
<tr>
<td>1992</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>1993</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>1994</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>1995</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>1996</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>1997</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>1</td>
<td>13</td>
<td>14</td>
</tr>
</tbody>
</table>

Source: Special Education Unit, Ministry of Education and Culture, 2000

Note:
Table 4.10 indicates a negligible number of visually impaired female students accessing the advanced level of secondary education (A-level). This accounts for limited accessibility for those students at tertiary levels (see Table 4.11).
Table 4.11 Enrolment Visually Impaired Female and Male Students at The University of Dar es Salaam 1992 -1997

<table>
<thead>
<tr>
<th>YEAR</th>
<th>NO. OF FEMALES</th>
<th>NO. OF MALES</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1992</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1993</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>1994</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>1995</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>1996</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>1997</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>8</td>
<td>8</td>
</tr>
</tbody>
</table>

Source: Special Need Education, resource room, University of Dar-es-Salaam.

Structural Adjustment Policies and Their Impact on the Education for Visually Impaired Women

As argued above, SAPs have penetrated the whole life of the country since the second half of 1980s. In the educational sector, they have brought about a new perspective which puts more emphasis on individual concerns as opposed to collective endeavours as were formerly applied in the policies of Education for Self-Reliance and Universal Primary Education of 1967 and 1977 respectively. In 1995, the government noticed that, previously, "Tanzania has not had a comprehensive education and training policy. The programmes and practices of education and training in the past have been based on and guided by short and long term development plans" (United Republic of Tanzania, 1995: xiii). In its macro policy statement, the 1995 Education and Training Policy stipulates that: "given its limited domestic resource base, the government now advocates the reduction of subsidies, and the introduction of cost recovery and cost sharing measures where applicable" (URT, 1995:xi). This cost sharing policy has had a detrimental effect on visually impaired women's access to education. Although there is little official data available to substantiate the extent of this impact, fieldwork evidence gives the impression that the programme has failed to work for the benefit of visually
impaired women. This is in accord with the observation of Wimile (1997: 2) that: "...while cost sharing could be fine for the rich, it creates some problems for the disadvantaged groups such as the aged, women, workers and persons with disability."

Although from the year 2001, the government has renounced fees in primary schools, the cost of education for visually impaired people is still high. The waiving of the fees has been possible because of the debt relief from the IMF, World Bank and other donor countries. The conditionalities of debt relief are targeted at eradicating poverty amongst Tanzanians in low-income groups (Nipashe, 2001). Education extends an individual’s ability to achieve income security. The government asserts that:

Education is the process of initiating and preparing man through training, in his environment, to play active roles in society. It provides desirable and worthwhile broad and in depth modes of thought, skills, attitudes and understanding needed for the full development of the human thinking and actions. Education makes man aware of his own potentials and responsibility to change and improve his own condition and that of his society; it embodies within science and technology. Science and technology as an aspect of education, is one of man’s many experiences, ways of life and of doing things, in the relentless effort to understand and harness the environment. (URT, 1995:viii).

Were it not for the economic crisis, Tanzania would have wished to continue providing free educational services for all its citizens. As debt relief is extended, it is hoped that every Tanzanian should at least receive basic education to combat one of the enemies of development i.e. illiteracy. With education, society can have informed citizens who can make informed decisions. However, waiving of fees in primary schools does not address the transport costs to schools which enroll visually impaired students, nor has it eased the problem of food and equipment shortages facing those schools.

As of 2001, fees in public boarding secondary schools were Tsh. 60,000 (US $60.6) per year and in day secondary schools Tsh. 40,000 (US $40.4). In addition, parents need to buy uniforms costing about Tsh. 30,000 (US $30.3), bedding Tsh.
25,000 (US $ 25.3) and stationery about Tsh. 20,000 (US $ 20.2), as well as pay for examination fees at Tsh. 15,000 (US $15.2), transport with the precise amount depending on distance and at least Tsh. 30,000 (US $ 30.3) as pocket money. This totals Tsh. 180,000 (US $181.1 (US$ 1 = Tsh. 990)) excluding transport for boarding students, which frequently serves to exclude the majority of visually impaired students whose parents/guardians are very poor. This was observed in my fieldwork. The impact of transport costs on family income is particularly crucial, given that boarding schools are the dominant mode of provision of special needs education. The majority of visually impaired children come from rural areas, tens and hundreds of kilometers away from these schools. The difficulties they experience were elaborated upon by one of the research participants:

I passed my primary school examination and got selected for secondary education three years ago. But, you see, my parents couldn’t afford a train ticket for me and my escort from Mpwapwa to Tabora Secondary School where I was supposed to go, a two day journey. ...Again money for transport should be available twice a year for four years of my secondary education. And you know, for each trip I would need an escort because I cannot travel alone such a long distance... I had to stay at home... I was so sad not to go, but there was nothing I could do (Hundikwa, June 2000).

Tanzania is a vast country, (about 945,000 square kilometers), and, as revealed in Table 4.7, visually impaired students from all over the country have been allocated places in only 8 secondary schools. Travelling long distances is unavoidable for almost all of them. At the official fare rates applying in the year 2000, a visually impaired female student hailing from Ruvuma, and taking a course at Kilosa Secondary School in Morogoro, (about 1500 kilometers away), had to spend a total of Tsh.150, 000 (US $ 151.5) to cover her and her escort’s transport costs to and from the school for the two school terms of the academic year. Transport costs for such a student almost equal the total of all other costs combined. Considering the per capita income of Tanzanians - Tsh. 151,470/- (US $ 153) as converted from the Human Development Report, (2002) - even if the family uses its whole income for the education of their visually impaired daughter, there will still be a deficit of Tsh. 183,300 (US $ 185.2). As Wimile (1997:63) points out: “this is unaffordable for a poor family with four to six children in need of education”.

WED (1991:6) makes it clear that “with the reintroduction of fees and the increasing financial responsibility placed on parents for the education of their children...gains made in increasing educational opportunities for girls are going to be eroded”. WED (1991) found that there is ambiguous policy as far as school fees are concerned. On one hand the policy states that no children can be expelled from the school for non-payment of the school fees. But on the other, the heads of the schools are instructed to send away students if they have not paid the fees with instructions that they should not return to school without bringing fees.

There is also a policy which states that if a student's parents cannot pay fees, the local authority (local government/village government) should pay them. However, this has remained just a theory on paper. In practice, it has not worked. According to the heads of schools in poorer areas, only about a fourth of the students reported during the first week. Some took more than a month before reporting, explaining that their parents were looking for school fees and other related expenses. If students went to school without fees they were sent back home. In Handeni Secondary School, WED (1991) found that of the students not reporting during the first week, 68% percent were girls and of those who were sent away, 80% were girls. They concluded that although parents and teachers stated that there was no gender discrimination in paying school fees, it was clear that girls had greater difficulties in getting fees than their brothers. Furthermore, the Ministry of Education and Culture mandated secondary schools to withhold certificates of O and A. level leavers if any had outstanding unpaid fees.

The problem of unaffordable fees and other school-related costs was evident in the interviews with my research participants. Twelve (20.7%) had never attended any school, six of them because of school costs. For example Mamvula explained:

My mother knew that visually impaired people could be taken to Buigiri School to study. She got the news from her friend who had a relative teaching there. My mother's friend advised my mother to take me there too. I was seven years by then. But, I am now 15 years old and I have not been able to go. I don't blame my mother. She is alone because my father died when I was three. ...There is
I also met seven girls of school going age in Dodoma who were not attending school on the grounds that their parents were too poor to meet the costs of education for them, although these were not included in the sample due to age limit of ten to thirty five years. For example, a mother of an eight year old visually impaired girl lamented to me when I visited her home in 2000 that:

A teacher from Buigiri came here last year to see my blind daughter. He wrote down her name and wanted me to take her to Buigiri school. The teacher told me that before taking her, I should make sure she has two pairs of school uniforms, two pairs of shoes and pocket money for soap and skin oil. Again, Buigiri school is far, about ten hours to walk. I cannot walk with my blind daughter ten hours! There are no public buses which come to our village. The only transport we depend on here are bicycles; If I hire a bicycle from here to Buigiri and back it will cost me 3000 Shillings. I have not been able to get that money needed for all these things...

Twenty girls in the sample had been selected to join secondary schools. Of these, 5 completely failed to join and 4 joined but dropped out in the course of schooling because of difficulties of meeting school requirements e.g. fees, etc. Among those who continued, some were sent back home to bring school fees. This resulted in low performance for some students because they had spent so long out of school looking for school fees and funds to meet other costs. Some never returned at all. The Headmistress of Tabora Girls Secondary school said when interviewed:

Our school is supposed to admit 20 visually impaired girls in total. We have only three now. ...Some did not report at all, some started but dropped out before finishing. This is because of many problems we encounter here which completely put off blind girls. All writing machines are broken. There are no writing papers at all. Some parents wrote to us asking the school to collect the students because they could not afford bus/train fares. So, all sorts of problems. Even the performance of the three students we have is
very low, but I do not blame them. You cannot do much if you are not equipped. The school has no budget for special needs students. I do not know... The Ministry is quiet about these things. We are very unhappy about this, but what can we do?

Wimile (1997:37) points out that “the implementation of the policy causes a lot of inconveniences to persons with disability, with many of them being denied access due to cost sharing”. What Wimile argues is already happening in the field of special needs education in Tanzania.

**Summary and conclusion**

In this chapter I have discussed the development of education in Tanzania in general and special needs education in particular, with emphasis on policy reforms from colonial times to the present. My focus has been on gender inequality in the educational sector. Traditional education emphasised principles of good citizenship, acquisition of life skills and the perpetuation of valued customs and traditions. During the German and English colonial periods, education was restricted to a few individuals earmarked to serve colonial interests. Immediately after independence in 1961, the government passed the Education Act of 1962 to regulate the provision of education. This Act repealed and replaced the 1927 Education Ordinance. However, this did not bring the intended changes in education. As a result Tanzania embarked on a fundamental policy change by adopting socialism and self-reliance as a new policy perspective in 1967. This brought about significant changes in the educational system. A series of strategies were laid down including Education for Self reliance in 1967, the Education Act of 1969, the Adult Education Programme in 1970, the Musoma Resolution of 1974, the Education Act of 1978, and the Education and Training Policy of 1995.

Education for Self-Reliance, declared in 1967, facilitated the achievement of universal primary education (UPE). The reduction of school costs paved the way for access by both poor and rich. Access was increased for girls, who in many situations had been denied education on cultural and socio-economic grounds. Adult education was introduced to eradicate illiteracy. Up to the 1970s, Tanzania
was doing well in adult education and recorded the highest proportion of adults achieving literacy in Africa. Many secondary schools were established compared to colonial times so that more Tanzanians were able to get secondary and tertiary education. To bridge regional disparities in education the government introduced a quota system.

However, the general socio-economic crisis of late 1970s led to a major policy shift in the education sector. Hence, in 1990 the government constituted a National Task Force to:

a) Assess the critical problems which were inherent in the education sector
b) Provide an appropriate system to facilitate increased efficiency and effectiveness

Cost sharing was proposed by that task force as a measure to enhance cost recovery in education. However, this appears to have had adverse effects on the access of women to education, so much so that the gender gap, which seemed to be decreasing before the re-introduction of cost sharing, has now increased alarmingly.

Formal education for visually impaired people began in 1930 through home-based schemes. Institutionalized schooling began in 1950. Education for visually impaired girls was introduced in 1962. The government involvement in education for visually impaired people began in 1963. More sustained efforts of the government to provide education for visually impaired people started in 1970 when the whole education sector was nationalised. As Bagandanshwa (1997) says, from the start it was through cooperation between the voluntary agencies, the local people and foreign philanthropists that the services thrived. The models of provision currently found in the country are special schools run in partnership between the government and churches, integrated education through annexes and itinerant programmes, as well as a pilot inclusive programme.
Lack of access of visually impaired women to education has persisted since colonial times. After independence their access improved because of the initiatives of the new government. Achievements in special needs education, however, have been affected by the socio-economic crisis which, as discussed above, affected the educational sector in general. The measures of recovery, particularly cost sharing, seem to be to the detriment of visually impaired women more than to their male counterparts in consequence of the more negative attitudes towards the education of girls, especially those with impairments. In the following chapter, a detailed analysis of the constraints which debar the access of visually impaired women to education is given on the basis of the empirical research conducted for this study.
CHAPTER 5

OBSTACLES ENCOUNTERED BY VISUALLY IMPAIRED WOMEN IN GAINING EDUCATION IN TANZANIA

Introduction
This chapter gives voice to visually impaired women concerning various educational constraints they have experienced in their efforts to access and gain education in Tanzania. It focuses on the ways two particular cultures (Wagogo and Wanyamwezi) perceive women with impairments and their fate in the community. It is divided into eleven sections. The first looks at the usefulness of the concepts of deviance for an understanding of how women are perceived and how impairment in conjunction with gender leads to a negative imprinting of the image of disabled women. The second examines engendered roles and cultural practices as constructed and performed by the Wagogo and Wanyamwezi ethnic groups and assesses the ways disabled women fit into and participate in those roles and traditions. It also looks at access to and ownership of property among women in general and disabled women in particular. The third deals with society's perceptions regarding impairment. It focuses on the various meanings and labels attached to impairments and assesses how such cultural perceptions serve to undermine the access of disabled people, women in particular, to socio-economic endeavors.

The fourth section discusses how ignorance and negative attitudes of parents/guardians about visually impaired girls' education limit their access to education. The fifth section explores the ways through which overprotection of visually impaired girls within families narrows their chances in accessing and gaining education. Section six discusses how economic hardships within families have been a major hindrance towards visually impaired girls' quest for education. The seventh section examines sexual violence and early pregnancies among visually impaired girls as contributing immensely to limiting their access to education. The eighth section examines obstacles related to poor infrastructures and long distances to schools. The ninth section is about detrimental impacts of social practices and services. It discusses the ways through which teacher's
attitudes, unfriendly school environments and lack of special needs education facilities create circumstances in which visually impaired girls find themselves out of school. Section ten is about problems at the policy level. It analyses the reform policies in the educational sector and their impact on the development of special needs education. The last section summarises the main issues emerging from the chapter.

**Deviance Theory as Applied to the Wagogo and Wanyamwezi Cultures**

Wolfensberger (1972: 7) contends that “man's behavior is in good part determined by ... a combination of beliefs, attitudes, and interpretations of reality that are derived from one's experiences, one's knowledge of what are presumed to be facts, and above all, one's values”. Deviance in one culture might not be necessarily the same in another (Branfield, 1996; Goffman, 1960; Wolfensberger, 1972). It is defined in terms of the norms of a given society. For example, some scholars like Downes and Rock (1998) consider adulterers, burglars, homosexuals, abortionists etc, to be deviants. Deviance in this perspective originates from breaking sanctioned behaviors. For Aziz (1995) and others, deviance can be connected to racism. For them, there is a normative race which in most cases is white which is perceived as superior to other races. But, for scholars like Branfield (1998), Goffman (1960), and Wolfensberger (1972), deviance is studied in relation to body image. A normative human body has expected characteristics. As Goffman (1963:12) says, we then “lean on these anticipations ...transforming them into normative expectations, into righteously presented demands”. This deviation is what leads to what Branfield (1996) calls “Not Quite Human”.

Any exploration of the sociology of deviance must consider the ways in which deviation may be seen. As already argued, major theories cast deviance differently. It is clear, however, that there is some basic, if unwritten, agreement that deviance may be considered as negatively valued (Downes and Rock, 1998; Wolfensberger, 1972). In this chapter the analysis and discussion of deviance focuses on the body image.
A Normal Woman in the Cultures of Wagogo and Wanyamwezi

In the Wagogo and Wanyamwezi cultures, deviance applies to both criminal behavior and human body characteristics. However, I will dwell on human body characteristics and particularly on the properties of femaleness and body image. In the Wagogo culture, a normal woman should have the following characteristics: the ability to conceive and an attractive body without any invisible or visible impairment. Additionally, but very importantly she must undergo a process of burning a roundish mark like a coin on her forehead. This mark is called 'lunindi' or 'lulindi'. Then, two front teeth of her lower jaw must be pulled out. This is called nhyende. Also holes are pierced in the top and the bottom of her ear lobes. These are called 'malomwa'. Lastly, she must be genitally mutilated. This is done by removing the whole of the clitoris (clitoridectomy).

Of the 49 visually impaired women interviewed in Dodoma, 43 (87.8%) were genitally mutilated. Six (12.2%) were not genitally mutilated because their parents did not see the importance of doing so. According to their beliefs, genital mutilation is seen as a significant practice in that it maintains the customs of the Wagogo by preventing girls/women from prostitution and seducing their husbands when married. It is also believed to treat a certain disease locally known as 'lawalawa' which affects women's vaginas and to enable girls/women to deliver safely. Female genital mutilation (FGM) is part of the initiation ceremonies normally done to girls at puberty to mark their transition to adulthood. Some parents did not expect their visually impaired daughters to get married. Initiation ceremonies for them were therefore seen as a useless practice. It was revealed during interviews with the elders of the Wagogo that circumcision was one of the conditions for a woman to be married. An uncircumcised woman can be stigmatised and regarded as not a grown up person. This could sometimes result in punishment or isolation. Doyal (1995:87) comments that female genital mutilation is "...one of the most visible examples of patriarchal control over women's sexuality". In addition, for the Wagogo culture, "sterile women are disregarded and stigmatised. When couples fail to get a child because of one reason or another, always the blamed person is a woman. Men are seen as people who cannot be sterile" (interviews with elders of
the Wagogo. Although burning the forehead, pulling out of two lower teeth, piercing holes in ear lobes and circumcision are symbols of the Wagogo which all men and women must have, from other cultural perspectives they could well be seen as socially created impairments. For example as Hagrass (1997) points out, FGM causes hemorrhage, infection, tetanus, keloid formation, obstructed labor and even death. “Yet for sure FGM is considered a necessary passage into womanhood” (Makaranga and Koda 1997:57). Based on its biological effects the practice of FGM in Tanzania has been banned by the government. But the study found that it was still being practiced in high secrecy. On this, Mukangara and Koda (1997:57) comment: “the government has made FGM illegal and punishable as crime, but implementation of the law leaves much to be desired”.

Unlike in the Wagogo’s culture, neither men nor women in the Wanyamwezi culture practice circumcision, nor do they have external marks as symbols of cultural identity. A normal woman in the Wanyamwezi customs must be able to conceive and should not have visible or invisible impairments. When a woman is incapable of conceiving, sacrifices must be offered for cleansing. According to Pelt (1971:160), “in case of miscarriage, which is frequent, the foetus is buried somewhere, e.g. under a tree, or even in the house. After burying a miscarriage, the woman must bathe in hot water in which magical medicines are put beforehand”. It was revealed in one of the interviews with a village elder that failure to conceive was always shouldered by women. As a result, women who fail to conceive or frequently miscarry are often divorced and asked to return the bride price paid to their parents. This is so because in their tradition, a woman is married in order to propagate the clan which she has joined. Each cow paid in bride price is valued with the expectation of getting children. For them, children represent status and wealth. The interviews further revealed that sterile women lose their dignity and respect in society. Any woman who does not have the traits which are culturally embedded in these ethnic groups (Wagogo and Wanyamwezi) is regarded as deviant.
The Concept of Body Image in the Cultures of Wagogo and Wanyamwezi

This study observed that the manner of identifying people as deviant did not end with women only, but was extended to disabled people of both communities. Observing Bantu customs broadly applying to both Wagogo and Wanyamwezi, Pelt (1971: 160) argues that "formerly when the new baby was disfigured, it was, as a rule, killed". Impaired children were regarded as abnormal. It was feared that they had the power to bring evil or even calamities to their families and society. This could be avoided by their being killed. The parents of the child had to undergo an ordeal whereby a sacrifice had to be offered for cleansing. The occurrence of 'abnormal' children in the society was associated with the unknown powers of the spirit world. In an interview one elder of the Wagogo said:

If one is born disabled that is the work of gods. We can do nothing about it except performing 'kumbiko' or 'makumbiko', which is an offering to appease the spirits. We pour some local brew on the ground under a tree near the house. Then we slaughter a goat and pour some blood around that tree. But when a person is born normal and becomes disabled thereafter, somebody has to be involved (bewitchment). The family of the bewitched person or the bewitched her/himself may decide to forgive or seek revenge.

Among the Wagogo, people with impairments are de-valued. Moreover the interviews with parents/guardians show that there is a tendency among the Wagogo to de-humanise both parents of the disabled child and the disabled child her/himself. Thirteen (50%) of 26 of the interviewed parents/guardians said that they were often laughed at and mocked by some of the members of the community for having impaired children in their families. As a result some of the parents/guardians resorted to hiding their children to avoid shame. This followed from the belief that the community regarded disabled people as deviants.

In the case of Wanyamwezi, it was found that visual impairment is associated with 'Migawo', the ancestral spirit. Katulushi (2001: 33) describes the importance of the spirits of the ancestor in the African community. When Migawo is aroused people lose their senses and cannot eat anything except soft porridge. The ancestral spirit will talk and make demands and then leave the individual when these are fulfilled.
It is up to the individual to fulfill the demands. The repercussion of not doing so could result in loss of sight or drowning. The ancestral spirit lives in the water. Its demands are fulfilled by performing certain cultural rites. When this is done the sight can be regained. There is another thing called ‘makile’ in Nyamwezi language which specifically causes visual impairment. This happens when the child gets measles. Parents are not supposed to engage in sexual activities until the child is completely cured. To do so can cause blindness of the child or prolonged illness. A swollen stomach is also believed to be an outcome of parents’ sexual activity during the child’s illness period (Interviews with elders of the Wanyamwezi). Giving an example Masanja said,

I was told that my blindness was due to my parents’ engagement in sexual intercourse while I was suffering from measles. Any impairment to the Wanyamwezi has a cause. For example, the cultural belief is that to be physically impaired is bewitchment. People do not believe that there are physiological reasons, which may cause paralysis, only that is a bewitchment case. Even deafness and intellectual impairment happen by being bewitched. In most cases, we make offerings to propitiate the spirits, and some do get cured. I contracted measles when I was two years old. I did not receive conventional medication. My parents used to rub chicken faeces and African teak sap in my eyes. This was repeatedly applied. Eyes were not supposed to be washed until they closed completely, that is when water was used to wash the eyes. The belief is that when eyes begin to discharge it is an indication that treatment has been successful. However, such a treatment could not cure me from measles. Then my parents took me to ‘Uswezi’. The ‘Swezi’ are people famous for consulting diviners and spiritual dances. The ‘Swezi’ stayed at our home for a week performing rituals. On the seventh day, I sneezed and that was my recovery. But I had already lost my sight.

The interviews further revealed that in the villages, there was still strong belief in witchcraft. When a problem occurred nobody wanted to go to hospital. For example, Malago explained:

I have a young brother who is educated and a ward councilor but still has strong beliefs in tradition. He has two daughters, both with hearing problems. But still he is against taking them to hospital, saying that these are traditional matters. As of now one of the children is in devastating situation and the other has become
completely deaf due to lack of medical care. I took my own
tiative to take one of the daughters to hospital and by now she
has slightly gained hearing.

As observed from the interviews, the occurrence of impairment among the
Wanyamwezi is largely associated with witchcraft, social misconduct and
supernatural powers. In that regard, disabled people are seen as not normal.
Although this view seems to be losing ground, especially in towns, (Katulushi 2001:
33), in the rural where traditions and customs are still strong, people continue to
practice them.

Thus, both Wagogo and Wanyamwezi, have norms about personhood and body
image. As (Nicolaisen, 1995:38) says, “every culture must come to terms with the
anomalies that defy its basic assumptions, and the way in which societies do tells
much about their structure. We may expect therefore to find notions of pollution
and taboo as symbolic demarcation of boundaries between those conceived as
normal or full social persons and the disabled...”. Reactions to deviants vary
between one culture and another, and within sub-cultures. For example in Punan
Bah of Central Borneo, some of the treatments included not giving food to the
was taking care of one disabled grandchild said: “what is the point in feeding him,
he is the spirit”.

Events of a similar nature were observed during this study. In one case in Dodoma,
a certain family used to hide their ten-year intellectually impaired girl in an
enclosure where goats were kept. I visited the kraal and found the girl sitting under
a big tree. Traditional Wagogo kraal are circular in shape, built by using tree poles
or shrubs. The enclosures are neither thatched nor cemented. Their entrances are
closed by shrubs. With the assistance of the interpreter, I had a conversation with
the girl, and this is what she said:

This is the place where I always stay with the goats from morning
to the evening. When night falls, my mum comes and takes me
back to the house where I eat and sleep. My mum says that I am
not allowed to go out of the stable to play with other children
because people will laugh at me for having a big head. She says this is a shame to our family (Research diary).

Another example was in Tabora where one visually impaired elder said

My mother used to tie a string around my body and one end of that string to one of the poles of our house. She didn’t want me to go out of the compound. The string was long enough just to enable me reach the toilet. My mother did this deliberately because she thought that it was shameful for people to notice she had a visually impaired son. In the evening the string was untied for me to go to bed. But my father was not happy about it. When my mother tied a string my father used to cut it. They fought over this issue until the elders intervened. My mother lost the case and I was never to be tied anymore.

The examples presented above show the ways some cultures regard and treat disabled people. They are seen to have deviated from a so-called able-bodied norm and as such are sometimes seen as not quite human. Deviance distinguishes “between non-human and human individuals and between non persons and persons” (Nicolaisen, 1995:52; Katulushi, 1999). Images of deviance implicitly or explicitly provide one way of assessing how discrimination occurs in a society.

Engendered Roles and Cultural Practices in Wagogo and Wanyamwezi

Traditions and Customs
As Pelt (1982:18) says, "every group has a culture of its own, but not so that no comparisons can be drawn, or even the same concepts and forms cannot be found". As discussed in this subsection, Wagogo and Wanyamwezi cultures, distinct as they are, are characterised by more similarities than differences.

In the Wagogo and Wanyamwezi cultures food is made by women for men, and the better share in quality and quantity is given to men. Men and women eat separately. As a rule, men are served first. For the Wagogo, women and children usually eat from the leftovers. But in the case of the Wanyamwezi though women and men do not eat together, women and children do not necessarily eat leftovers. There are food taboos in the Wagogo’s culture which apply to uncircumcised men
and women. Interviews with the elders of the Wagogo, revealed that uncircumcised men and women are not supposed to eat rats, tail meat of the cow, liver, kidneys, heart, eggs or intestines. If they eat such foodstuffs whitish spots occur on the place where clitoris/prepuce has been removed. These eventually develop into sores and therefore take a long time to heal. As already discussed, Wanyamwezi do not practice circumcision.

In both ethnic groups, daughters as a rule do not sit close to their fathers or chat with them unless they are called; only boys are allowed. When greeting men, Nyamwezi women have to kneel down. But for the Wagogo, women greet men with their eyes averted, but do not kneel down. There is a taboo which forbids couples or one of the parents engaging in sexual intercourse when any of their children is ill. It is believed that if they dare doing so their ancestral spirits will become angry. The consequence is either that the child dies or becomes disabled. Seven cases of this nature emerged in this study, four from the Wagogo and three from the Wanyamwezi. Of all cases the disease singled out was measles. For example, one male parent from Dodoma commented:

I sued my wife to the police because she destroyed my daughter's eyes by having sexual intercourse with another man while the child was suffering from measles. By then we were divorced and my two-year daughter was still living with her mother. You know, in our traditions it is strictly forbidden to have either sexual intercourse or to give anything from the house to the outsider when a child is ill.

During initiation rites old women instruct the girls on their future roles as wives and mothers, and on different tribal customs. They are also taught to be obedient and submissive to men. Initiation is normally done after the first menstruation. For the Wagogo this is the time when genital mutilation is also practiced.

Katulushi (2000: 47-51) describes how traditional cultural practices have tended to encourage male control in some Zambian societies. On inspection, these customs and traditions highlight the subordinate position of women in almost all practices. As we shall see in the following sub-section, this subordinate position not only applies to social conduct, but also to gender roles and property ownership. It
begins from the household, extending to the community level. The influence of this subordination of women in general, and disabled women in particular, is one of the key factors leading to their exploitation, oppression and exclusion from socio-economic and political spheres.

**Division of Labour**

The gender division of labour provides the underlying principles of the difference in women's work and men's work. It also provides the rationale for the difference in meaning and value placed on their work (Nyerembe, 1995:2). From this perspective, Wagogo and Wanyamwezi are no different from many other African cultures. They are engaged in different activities in the household and outside which in most cases are categorised by their gender status. The economic activities which Wagogo and Wanyamwezi are engaged in occur within a subsistence (hand to mouth) economy.

In the rural areas, agriculture and livestock keeping forms the mainstay of the economy of these ethnic groups. The types of food crops the Wagogo grow include sorghum, millet, maize, yams, cassava and groundnuts. They also keep such animals as cows, goats, chicken and donkeys. Donkeys are also used for transport. The only cash crop which flourishes in Dodoma is grapes. Most of the farming is done on small scale. Responses of parents/guardians reveal that of the 26 parents/guardians interviewed, 24 (92.3%) were engaged in small holder farming only, 1 (3.8%) kept animals only and 1 (3.8%) both farmed and kept animals. None of them had additional gainful employment and none was engaged in business. Although none of the parents/guardians was engaged in business, small-scale business was practiced in the area, mainly by men. Food crops, which grow in Tabora include maize, rice, groundnuts, yams and cassava. They also grow tobacco and cotton as cash crops. Additionally they keep cattle, goats and bees for honey (research diary). Just as in Dodoma, farming in Tabora is practiced on a small scale.

Both Wagogo and Wanyamwezi use largely hand hoes in farming. But there are a few people who use animal ploughs. In taming animals, they have to walk in the bush sometimes practising a nomadic lifestyle. The greater proportion of farming
activities are performed by women. The main activity of the men is grazing animals, and, for the Wanyamwezi, keeping bees as well. Where petty business is engaged in it is often done by men. Women, in addition to their productive roles, also have the responsibility of rearing children and doing all domestic chores. Some of the chores include fetching water from as far as five to ten miles away following footpaths bordered by thorn bushes and collecting wood fuel using the same pathways.

The environment in which these activities are performed creates much inconvenience to visually impaired women. Physical constraints are further intensified by social barriers, i.e. negative attitudes as there are no efforts or arrangements made to remove those physical barriers or encourage the participation of visually impaired women. Interviews with visually impaired women illustrate that only 25 (43%) participated in the family/kinship matters while 30 (51.7%) said they never participated in this way. Three (5.2%) didn't respond to the question. Even those responding pointedly said they participated mainly in ceremonies or funerals through washing, cooking and cleaning. Only 5 (8.1%) participated in small-holder farming. Some of these women also perform their role of bringing up their children. The findings reveal that 41 (70.7%) of the interviewed visually impaired women had children.

In urban areas men are engaged in both small and large scale business and are employed in relatively more paid employment. Women are labourers in lesser-paid jobs in the formal sector. Primary school teaching and nursing are predominantly done by women in both rural and urban areas. But at secondary and tertiary levels teaching is dominated by men (Research diary). The majority of women are not engaged in wage or salary employment. The findings revealed that 29 (50%) of the visually impaired women interviewed earned their living through street begging. 12.1% were engaged in petty business. Only 5.1% were employed in gainful employment. Gender roles and negative attitudes have created a lot of restrictions for these women in taking part in mainstream activities. This has direct consequences for their access to education and other social services because, as Vernon (1997) points out, the provision of education as a social service is
Inheritance and Ownership of Property

Many women are discriminated against with regard to ownership and inheritance of property. Only sons and male clan members inherit land and other family property. Women are regarded as not permanent members of the family due to an assumption that they will get married and move away. It is therefore assumed that they should not be given a share of wealth as this would enrich other families and clans to whom are connected through marriage (TGNP, 1997). However, the situation is now changing slowly due to an increasing realisation of women’s rights in the society and cultural intermingling.

Responding to the question about the position of girls/women in respect of property inheritance and ownership, nine (34.6%) parents/guardians said that a girl could inherit and own property. Sixteen (61.5%) parents/guardians said that a girl could not inherit and own property and 1 (3.8%) parent/guardian did not respond (interviews with parents/guardians). Village elders who were firmly attached to Wagogo traditions and customs said that “sons do normally inherit their father’s bows, arrows, cattle and all the properties. A girl cannot inherit for fear that she can take the property to her husband”. Bows and arrows are symbols of manhood, masculinity and bravery. According to the Wagogo, these are traits of a man. The idea is that when a man inherits and owns family property, there is the continuity of the family's wealth. Normally, it is the first son who inherits such property. Where a family doesn't have a son then the right of inheritance and ownership goes to the first son of the uncle from the father's lineage. But among the Wanyamwezi, both women and men can inherit and own property. One of the elders of the Wanyamwezi said:

Traditionally the Nyamwezi give equal rights to inheritance and ownership of property to the children irrespective of being a male or female. However there is a slight difference. For example, if there are Tsh. 10,000/= (US $ 10.1), the male will get Tshs. 7,000/= (US $ 7.1) or 6,000/= (US$ 6.1) and female will get Tsh. 3,000/= (US $ 3.0) or 4,000/= (US $ 4.0). A female gets less for
she is staying at home on a temporary basis as she is expected to get married and take her share to where she would be married.

As a principle, what is argued here applies also to both disabled women and men. But, in reality, disabled men are not entrusted with bows and arrows (among the Wagogo) because they are not regarded as having the qualities of 'normal' men. Fieldwork findings revealed that among the Wanyamwezi, too, disabled women and men are discriminated against in the ownership and inheritance of property.

Perceptions and Attitudes about Impairment among the Wagogo and Wanyamwezi
Perceptions are the way individuals receive, assimilate and respond or react to information or situations. They are interpretations or impressions based on how one understands something (Bagandanshwa, 1993; Thompson, 1995). According to Houshberg (1984), the strength and dominance of perceptions are always dependent on the physical world – that is, perceptions are always established and built on the processes going on in the outer world of the individual. This outer world is composed of norms, values, social relations, social expectations of the group, and the level of economic development inherent of the community. It is finally shown or expressed by the behaviour, attitudes and stereotypes the individual develops toward a given stimulus. Hence, perceptions and attitudes (be they negative or positive) towards impairment and disabled people develop from the social relationships in the society.

As already discussed in the section on deviance, there are social expectations of a 'normal' child which, according to the Wagogo and Wanyamwezi, do not apply to an impaired child. Thus, when a mother gives birth to an impaired child or one of her children becomes impaired, an immediate response is disappointment because the child has deviated from their expectations. The child is regarded as anomalous. This initiates a particular/unusual social relationship between the child and the family and finally between the child and the community. For the Wagogo and Wanyamwezi some of the roles and responsibilities expected of the child are to take care of their parents when they become old and to participate in all community development. The family takes all possible means to socialise and develop the new
born child with the expectations that he or she will eventually be of mutual benefit to them and the community as well. But, the occurrence of an impaired individual in a family is not received happily because traditionally such an individual is regarded as useless. Such an attitude further affects perceptions about impairment.

The findings revealed that 13 (50%) of parents/guardians had negative perceptions about the impairment of their children. They believed that the impairments of their children were due to either being bewitched or cursed. They had no hope at all for their children. The other 13 (50%) of the parents/guardians had positive feelings. They believed that the impairments of their children might have occurred naturally or were God given (interviews with parents/guardians). Additionally it was observed that the general perception of the community of visual impairment was negative (interview with parents/guardians in Dodoma). In both cases parents and the community had lost normal expectations of the roles and responsibilities of visually impaired women at family and societal level. As a result of such negative perceptions, people with impairments have been labeled with dehumanising terminologies/phrases which target their impairment and their body images. It was found that 42 (72.4%) of visually impaired women interviewed had experienced having various labels attached to them by members of their community. For the Wagogo such labels included: ‘masikini’ meaning dull, of poor quality or feeble; ‘chidula’ an inanimate object; and ‘ifuma’ meaning idiot or zombie. With the exception of ‘chidula’, which is applied to visually impaired persons due to its connection with lack of vision, the rest apply to all types of impairments. These labels are sometimes used in distinguishing disabled from other people. They apply to both disabled men and women. Instead of being called by their names, some members of the community call them by these labels. For instance Mamvula said:

Although they know that my name is Mamvula you would always hear them calling me ‘masikini’. I hate this because it dehumanises my dignity and my personhood. Why not call me by my name! Don’t they know it? Do I look different because of my impairment? I have lost sight but not my integrity and dignity.
These were the feelings and experiences shared by the majority of visually impaired women interviewed in Dodoma. As Hagrass (1997:88) says, “such social concepts and the meanings embedded in them are what inhibit the full participation of many disabled as they are vulnerable to any negative words which might injure their pride”.

Some of the labels applied to visually impaired women among the Wanyamwezi were ‘nusu mtu’ meaning not a whole person and maiti ya wima’ meaning standing corpse. ‘Nusu mtu’ applies to all types of impairments. But ‘maiti ya wima’ applies to visual impairment only. It denotes something which cannot move independently due to lack of self-determined direction. A visually impaired person is compared to a standing corpse because he/she is considered incapable of moving in any direction without guidance. Also a visually impaired person is compared with a ‘mlango gwa wima’ meaning a door. A door is always fixed to the wall and never moves. Likewise he/she is compared to ‘kivimbi cha wima’ meaning a tree.

In an interview one elder of the Wanyamwezi said, “kivimbi’ is a kind of a tree, which grows at the end of the terrace. Such a tree is good for a shed. When people get tired in the field they go and sit under the shade of that tree to relax. A blind person is like a tree that cannot move”. The association of loss of sight with failure in movement is a result of the way people perceive an impairment not only to affect a certain physical part of the person but also to spread so as to involve all his/her other faculties (Hagrass, 1997; Sentumbwe, 1995). The Wanyamwezi also label totally mobility-impaired people as tortoises because of the way in which they move. Those who limp or walk with the support of crutches are called ‘visuta’ meaning staggering. An intellectually impaired person is labeled as ‘mlemaa’ meaning a person who is unable, incompetent, powerless or hopeless. Like the Wagogo, both disabled men and women in the Wanyamwezi experience the same negative perceptions. These labels serve to undermine their talents, abilities and potentials in different aspects of life.

There were mixed feelings about the distinction of visual impairment from other impairments. Forty (69.0%) of the visually impaired women interviewed viewed visual impairment as more damaging than other types of impairments. Nine
(15.5%) viewed it as less damaging than other types of impairment. Seven (21.1%) perceived all types of impairment as equally damaging, and two (3.4%) did not respond (interviews with visually impaired women). Also interviews with parents/guardians showed that sixteen (61.5%) perceived visual impairment as most damaging. Two (7.7%) perceived intellectual impairment as most damaging. One (3.4%) regarded mobility impairment as the most damaging. Three (11.5%) perceived all types of impairment as equally damaging. Two (7.7%) said none was damaging and two (7.7%) did not respond. Thus visual impairment was singled out as most damaging of all types of impairment. The argument was that one cannot see the beauty of the world. Even walking is difficult. Without sight, individuals miss out so much. They cannot see even their faces and can't read newspapers, watch television, etc. It takes time to cope with changes taking place or to familiarise oneself with a new environment. Without sight a person can even sit on a snake without noticing.

Loss of sight creates heavy dependence on sighted people, even in confidential matters. For some people, being without sight is the same as being dead. Sight is life itself (interviews with visually impaired women; interviews with parents/guardians). The view that visual impairment may be one of the most damaging of all types of impairment may be influenced by the practical experience of visually impaired women themselves and their parents/guardians. However, there was consensus among village elders/village heads that all types of impairment had adverse effects on the lives of individuals (interviews with elders/village heads).

Given perceptions about impairment by their families and communities, some visually impaired women had developed negative feelings about their impairment. Such negative feelings might have been influenced by socialization process at the family and community levels and from their own experiences in life (Stewart, Powell and Chetwynd, 1979). Hence, socialisation and experience are central to determining response (reaction) to the stimulus referred here to as impairment. The reaction towards disabled people is always influenced by how the individual perceives him/herself and wishes to be perceived by society and the general attitudes of society towards impairment and disabled people. Reactions to 'Ifuma',
I 'masikini', 'nusu mtu', 'kivimbi cha wima', 'mlemaa' and 'maili ya wima', overtly or covertly, devalue the personhood of visually impaired people. Given these perceptions, parents and guardians who have visually impaired children may not feel that they are obliged to incur expenses in trying to educate them. The effects of such perceptions are particularly damaging to visually impaired women who suffer not only from the labels attached to their impairments but also from the social construction of their sex as women:

We find that... loss of sight for a female is almost always accompanied by loss of status, privileges and rights both in society and within the family. In society discrimination against women in general reaches its peak against blind women in particular. This coupled with prejudice and ignorance relegates her to the position of an inferior being, and object of false pity and mindless charity (Shah, 1992:20).

Ignorance and Negative Attitudes of Parents/guardians about Visually Impaired Girls' Education

The education of a child begins very early in life. The family initiates the learning process when parents and the siblings teach the newborn child what is required for the child's development. Then peers, the school and the community continue the process until death. All levels are very important in determining the life opportunities of an individual. A failure at any level will consequently narrow chances of an individual's life opportunities. It is for these reasons that girls' educational opportunities have to be examined right from the family level.

Lack of knowledge of parents/guardians about the availability of educational services is one of the obstacles which hinders their active participation in seeking education for their visually impaired daughters. According to Ramey (1982), their own education is the greatest contributing factor to their involvement in the future development of their children's education. But experience also forms an essential part in raising one's awareness about the existence of a phenomenon. Of the twenty-six parents/guardians interviewed, 21 (80.8%) were illiterate. This demonstrates how lack of educational opportunity is a general feature among the Wagogo. This may influence their lack of participation in giving education to their
visually impaired girls. Additionally, of the parents/guardians interviewed, three (11.5%) had no knowledge about educational services for visually impaired people. They had no idea that a visually impaired person could go to school. Consequently, they made no efforts to take their daughters to school. Also three (11.5%) had negative attitudes about visually impaired girls' education. That is, they didn't think there was any importance of allocating resources to educate their visually impaired daughters. As a result, of the 58 visually impaired women interviewed, six (10.3%) never attended any school.

Among both the Wagogo and Wanyamwezi there are negative attitudes about educating girls. Such attitudes become intense when the girl under question has an impairment. As Nunu said:

I successfully completed primary school and I was selected to join secondary school where I only reached form two because of problems at home. My parents refused to pay for my transport and other required necessities. Whenever I told them what was needed at school, they refused to provide for me. My district council was paying my school fees. My parents were required to provide me with uniforms, transport and other basic needs. Although they were capable of meeting those costs, they refused. Every time during holidays when I told them about the school's problems and needs, there used to be a quarrel and sometimes I was forced out of home. Their major argument was why should they spend so much on a daughter. They said that after all I was supposed to be married. So they told me that I should just stay at home until such a time as somebody would come to marry me.

Twenty one (80.8%) of the parents/guardians interviewed had negative attitudes about girls' education. They said that when resources were meagre they would prefer to educate their sons. Hence, right from the family level boys and girls do not have equal chances. Some parents still give boys a higher status than girls' and consequently more and better chances to education.

**Overprotection of Visually Impaired Girls within Families**

Overprotection means excessively protected, especially of a person in one's charge (Thompson, 1995). It restricts an individual from exercising freedom and
participation in certain activities. In many cases it dehumanizes and denies one's
development of human capabilities. It is a situation that can create an inferiority
complex and lack of self-confidence in the person so overprotected. As illustrated
in the following boxes, the study found several cases of overprotected visually
impaired girls/women within families.

Box 5.1: Fight to Protect a Visually Impaired Daughter from Going to School

Mahewa, who at the time of this study was a single parent, was born in 1974. She is third born of a family of 8 children, 7 of whom are girls and one a boy. She lost her sight at the age of 12 due to measles. At that time she was enrolled in a village primary school. Her parents took her to Mvumi Hospital but measles had already attacked her so much that her sight could not be regained. Then her parents consulted a witch doctor who said that the loss of her sight was connected with bewitchment. A grandmother on her father’s lineage was the suspect. It was said that she was jealous of Mahewa’s beauty which would attract men to compete for marrying her. Mahewa was the most beautiful girl in the family. Bride price paid for a beautiful woman like her sometimes amounts to between 40 and 60 cows. The sorcerer was not happy because if Mahewa’s father got this many cows he would become rich. So, she thought one way of stopping this was to destroy Mahewa’s eyes. This could work because visually impaired women did not get married. The reasons for such hatred of the grandmother toward her own son were not explained by the witch doctor. The loss of sight was a great disappointment for Mahewa, her parents and siblings. She could no longer go to school. Her teachers were unhappy as well, not only because Mahewa lost her sight but also because she was very bright and hard working. One day the Village Executive Officer brought visitors to their house. The visitors explained that they had come to take Mahewa to school. Mahewa and her parents were not happy about it. They wondered how a visually impaired person could go to school. How could she see! They had never heard of any visually impaired person going to school. Likewise, they never realised that there were educational services for visually impaired people. Hence they thought that the strangers had come to take her with the intention of killing her. Mahewa said:

On the day the officers came to our village to take me to school, there were cries everywhere in the village. People in the village thought I was going to be murdered. This was because the officers who came to take me to school were all strangers, but people were also wondering how a visually impaired person could read and write. I too was crying and refusing to go school. There appeared a fierce resistance whereby my father cut one of the fingers of the Village Executive Officer with a machete, which injured him badly. In fact it was a real fight. My father told him that if I was murdered he (the Village Executive Officer) would be the next. Using their authority, the strangers eventually took me to school. After completing my primary education I attended a course
on telephone operation. After the course I was employed as a telephone operator. I gave half of my first monthly salary to my father. On receiving it my father greatly regretted cutting the Village Executive Officer. He apologised to him. He also gave him some of the money I gave him from my first salary.

This case study illustrates the extent to which overprotection can deter girls’ access to education. Wimile (1997) points out that overprotection and humiliating sympathy deny the exposure of disabled people to challenges, which can develop their potentialities and abilities. They therefore remain ignorant and heavily dependent on able-bodied members of the community for all services. Thanks to the strangers, Mahewa finally got an education which has changed her life from dependence to independent living. But the findings revealed that such cases of overprotection had left some of the girls locked indoors.

Box 5.2: Refusing to Entrust the Life of her Daughter to Strangers

Vumi, a single parent of three living children and four dead ones, was born in 1965. She is the last born of the family of 9 children. She lost her sight at the age of four months due to unknown causes. Her parents took her to Mvumi Hospital but her sight was not restored. She never got primary education due to overprotection of her parents. She said:

I started hearing about schools providing education for visually impaired people very long ago. I think I was about 9 years old. But my mother refused to take me. She worried that I would not be cared for the way she used to. As a result I never attended primary school. At the age of 18 two social welfare officers came at our house. They told my mother that they had to take me to Singida Vocational Centre for blind women for vocational rehabilitation training. At first, my mother refused, saying that she could not entrust my life to strangers. But the social welfare officers threatened to take her to the police station. My mother was not prepared for that so she surrendered. I stayed at the centre in Singida for three years. Before going there, I could not walk on my own. After getting mobility training I could then walk independently to anywhere I wanted to. While at Singida, I learnt also how to read and write in Braille. Additionally, I learned domestic and home-craft skills. Having seen the ways it changed me from hopeless situation to a useful person who can participate in many family activities, my mother now understands that education for visually impaired people is very important. She keeps on regretting that if she had not protected me from going to school, perhaps my life could have been more successful. But as for now it is too late.
Causes of overprotection vary considerably. For Mahewa (Box 5.1) it was an outcome of an ignorance which subsequently took the form of suspicion. Even though the strangers informed the parents and villagers about the provision of education services for visually impaired people, there were doubts about the truth of the information. In the case of Vumi (Box 5.2), overprotection was influenced by fear about how strangers might treat her. Thus overprotection is often a psychologically induced response to a suspected or negative stimulus. Yet, whatever form or reaction it may take, overprotection is a hindrance to visually impaired girls' access to education.

Economic Hardships within Families
Economic hardship was a typical characteristic of all parents/guardians interviewed. They were all living below the poverty line and did not earn enough to meet the basic needs of their children. According to the World Bank Report (2001: 31) "between 15 million and 18 million Tanzanians live below poverty line of US$ 0.65 a day". The findings reveal a big problem parents/guardians faced in financing school costs for their visually impaired daughters. One of the schoolteachers interviewed in this study said:

The majority of pupils who dropped out from this school lacked money for transport. Normally the school sends them home on holidays while parents have to bring them back to school after holidays. However, many parents fail to secure money for this purpose. So their children remain at home.

Some of the parents, who failed to secure bus fares for their children, tried other alternatives like using bicycles or walking. But this depended largely on the distance to school. Lihewa's case provides an illustration. She said: "The school used to take us home during holidays. Normally on my way back to school my brother escorted me on foot. We had to start off early in the morning at 6.00 am and reached school at 6.00 p.m. Then my brother slept at school and could start off back home the next morning". Sometimes the pupils delay returning to school for about one month to three due to the delay in getting transport fares and other
school requirements in time. Beginners in Form One or Five could delay to report for about one month or a term (six months). Delaying the start of school caused a lot of difficulties in catching up with the rest of the class. Under normal circumstances, punctuality and regular attendance of visually impaired women is paramount because the environment is seldom inclusive and they need enough time to master it. As shown in the following extracts, one of the worst outcomes was that some of those interviewed had to stop schooling due to lack of school fees, transport and other basic requirements.

Manjala commented: I dropped out of school in 1995. At that time I was in standard five. You know, at the beginning, everything was being taken care by the government. However, since the introduction of cost sharing, things started changing slowly. Our parents were told to share in transport costs. The school was responsible for taking us back home during holidays, while our parents were supposed to take us back to school. But, in that particular year (1995), my parents could not find enough money for me to go back to school after holidays. Therefore that was the end of my school.

Wendo said: After I completed primary school in 1988, I was selected to join secondary education at Korogwe Girls Secondary School. Unfortunately, I was not able to join because my parents were too poor to meet my school costs. My efforts to look for support from other sources were in vain. I then went to see my local government on this issue. However, they refused, saying that they had supported me during primary schooling and that by then it was the responsibility of my parents because the education I would receive could benefit them more than the government. After a long struggle, the local government accepted its obligation to support me by providing half of the costs on condition that the village leadership should contribute the remaining half first. But the village leadership failed to find the required money, and that was the end of my schooling.

Mahila lamented: I was selected to join Korogwe Secondary School to start form one. In our class, we were five girls of whom four passed the examination to join secondary education. I was among the four. Unfortunately, I failed to report at the secondary school I was admitted to due to lack of money. We were required to buy uniforms, mattresses, bedding, school fees, caution money and all those things you know a secondary school girl student should have. My parents could not afford to get some cash to meet
those school requirements. On due account, I had to remain home until now.

Mandeje explained: After I completed my primary education in 1996, I was selected to join Kilosa Secondary School. So in 1997 I started form one there. That first year, my former school (Buigiri School for the Blind) paid for all of my costs. In 1998, the responsibility was shouldered on my parents. However, my parents were economically unable to foot the responsibility shouldered on them. I then approached the District Development Director who nevertheless rejected to support me, saying that it was the responsibility of my parents/guardians. I never gave up. Three times, I went to see the head of my parish. He, too, said that the church had no money with which to support me. I then went back to my former primary school, which supported me in the first year to inform them that I had failed to continue with schooling due to lack of money. I told them all the efforts I had made. They advised me to sue the District Development Director. But, for me that was impossible. Instead, I went back to the District Development Director trying to beg humbly, telling him all efforts I had made until then. Again, this did not work. He told me that it was up to me. His harsh words hurt me so much so that I could not eat properly for about a week. After that, I took my matter to the village council. They too refused to help me by saying that they have no money for cases like mine. Furthermore, my efforts to seek assistance from my relatives yielded nothing. That was the end of it.

Those voices represent the troubles the majority of visually impaired women from poor families have in accessing and gaining education. They explicitly reveal a very low participation of relatives, community, local government, church, and other non-governmental institutions in promoting and supporting education for visually impaired girls. This means educating a visually impaired girl from a poor family remains largely a family responsibility. As a result, families which are too poor fail completely to secure funds for their daughters to go to school. Four out of 12 visually impaired girls/women never attended any schooling because of poverty of their parents/guardians. Findings show that 12 (22.7 %) of the visually impaired girls/women interviewed either had no schooling at all or dropped out at a certain level as a direct consequence of economic hardship.
**Sexual Violence and Early Pregnancies**

Violence against girls and women is rampant in Tanzania and takes various forms including sexual assault, rape and defilement. Girls and women experience this violence in households, schools and work places. According to Mukangara and Koda (1997:58), the situation is particularly alarming because many cases of rape, assaults and defilement are never reported due to social stigma, biased laws and cumbersome legal procedures. Having acknowledged the high occurrence of sexual violence against girls and women, the Parliament of the United Republic of Tanzania enacted a law known as Sexual Offences Act of 1998. Inter alia, the Act protects women from all forms of sexual violence and abuse. Despite this law, the abuse of female students persists in Tanzanian schools. Girls start experiencing sexual violence from very early in their lives. In schools this is mostly done by male students. As revealed in the extract below, however, sometimes school staff members who are entrusted to socialise girls into acceptable moral conduct are also involved. As a consequence girls are socially and psychologically affected to the extent of abandoning schooling. For example, Madala who was 18 years old, was supposed to be still in school at Hombolo Primary School in 2000, but had to stop after being impregnated by one of the teachers. Another girl called Liso who was 17 years old, refused to go back to school at Hombolo Primary School after holidays for fear of the school watchman who had raped her. Box 5.3 illustrates one of the serious incidents of sexual violence reported during this study.

Box 5.3: Sexual Violence in Schools

Majimbi, last in a family of 4 children, was born in 1979. She began school at Hombolo at the age of six. However in 1987 she stopped schooling due to serious shortage of food. As the problem persisted her parents sent her to Buigiri School for the Blind in 1988. But following the sexual harassment she experienced, she dropped out. Narrating the scandal Majimbi said:

“When I was in standard two at Buigiri Primary School, one day my class teacher instructed two male pupils to come to my dormitory to call me. So they came. They told me that I was needed by the class teacher. But, my fellow female pupils with whom I was chatting were suspicious as it was already dark. Anyway, they told me, ‘just go’. We walked up to the standard two classroom where that teacher was waiting for me. It was about 8 p.m. when I left the
dormitory. As we reached there the teacher thanked the boys and told them to leave. Knowing his bad behaviour when he is drunk, the two male pupils decided not to go far. They stood by the window outside, watching. The said teacher was visually impaired. He came closer and ordered me to lie down on the floor. I was very frightened and I asked him why. He kept quiet. When I resisted, he threw me down onto the floor and took off my underpants with excessive force which tore their elastic. Then, he started raping me. When I shouted for help, he seized me by squeezing my throat so hard so that I could no longer shout. I started bleeding in my vagina and was in great pain.

Realizing what was happening to me, the two male pupils who were gazing at the window immediately went to report the issue to the head teacher. Soon there were many pupils and some teachers at the scene. They said to the teacher "what are you doing to the girl. What did you call her for?" Then they arrested him saying that otherwise he might escape. That same night they went to report the incident at the police station which was about 5 km away. The policemen came with a nurse. After the nurse examined me, she said that I was badly wounded. The following day the incident was reported to the local education authority. When the case began, the teacher pleaded not guilty. But after the evidence of the three girls with whom I was chatting that evening and that of the two boys who were sent to call me had been produced, the teacher finally pleaded guilty. He confessed of raping me but he said he was drunk. He was imprisoned for 10 months. However, he continued to receive half of his salary. After those ten months, they said that the case was over and he was reinstated and continued to teach. As I said earlier, he was my class teacher. When reinstated, he continued to harass me in different ways. He said that he could not continue teaching me. He insisted that even if I did my exercises, he would not be correcting them. He complained to me: "was it not you who accused me to the Police who imprisoned me for 10 months and reduced my salary by half? You just go on eating the school food, but as far as I am concerned I cannot teach you. If you dare to come in my class, I will keep on beating you". I said to myself, "I cannot leave school just like that". I valued my education. I didn't give up. Sometimes he struck me on my hands so hard that I failed to hold a spoon because my hands were so swollen. He used to command me stand up in the classroom. Sometimes, I had to stand up from 8 am when the classes began, up to 1 pm when the first session ended. Sometimes he locked me in the classroom during lunch hours so that I missed my lunch. Sometimes he stood at the door of the dining hall letting other students in. But when I reached the door, he would tell me that I was late. He would kick me out and close the door so that I could not get my meal. That is the kind of harassment that made me abandon school. I said to myself "this is
more than enough, I cannot continue staying here tolerating those persecutions".

Two female teachers of Buigiri where Majimbi schooled confirmed that what Majimbi had told me had happened. They said that cases of sexual harassment of female pupils at the school were common. In an interview, one female teacher said:

As female teachers, we are very concerned about the situation. It is really paining us to see our girls' lives being destroyed. Some time ago, we tried to do something about it, but we were completely silenced. We wrote confidentially to our council's education officer, giving him the names of the male teachers we witnessed sexually abusing our girls. The name of the school head teacher was also in the list. But you know what happened to us? We were called by the council's education officer. He told us to shut our mouths, otherwise we would lose our employment. The council's education officer and the school's headteacher are great friends. So, what do you expect? They protect each other. In such a situation, we had to keep quiet, if we dare say anything, we would be jeopardising our jobs.

As already noted, sexual violence against school girls sometimes causes early pregnancies. Early pregnancies among school girls leave their lives uncertain. Their education is discontinued which makes it difficult for them to be absorbed into wage or self-employment. In addition they are forced to become mothers while they are still very young. This affects them psychologically and lowers their self-esteem. Although not always the case, many of these girls attempt abortion, while others abandon their children. Pregnancy among schoolgirls in most cases is a result of sexual attention by boys and men, including teachers, especially in the absence of a strong guidance and counseling services and family life education. School authorities expel pregnant schoolgirls on the grounds that they have acted immorally. Such a regulation affects girls more than boys due to the difficulty of identifying and proving those responsible boys or men (Mlawi 2001: TGNP 1990). Research suggests that at primary level alone an average of 3,000 out of 200,000 girls enrolled drop out annually due to pregnancy. The numbers also seem to be increasing every year (Mlawi 2001). As revealed in the subsequent discussions this applies also to visually impaired young female students.
Responding to the issue of early pregnancy Mahewa said: "in our class we were 10 pupils, four were boys and 6 were girls. Unfortunately, five girls got pregnant in the course of schooling. As a rule, they were all expelled from school. So I remained the only girl who completed standard seven in our class". There are reasons that schoolgirls get pregnant. There are some who get pregnant by being raped. Others get pregnant because of basic human needs. TGNP (1990:3) comments "for some girls sex had become a means of earning cash to pay for costs of schooling, travel and personal needs". The interview with Matika is illustrative of this. She said:

I discontinued schooling because of being pregnant. This happened while I was in standard five. I was in need of money. My parents were too poor to support me. One young man volunteered to give me some cash. That was the beginning of our relationship. As a consequence I conceived and that was the end of the school story. After realising that I was pregnant, he cut off communication and that was over.

Another factor causing schoolgirls' pregnancy is lack of sex education. Sex education gives guidance and counseling to young people about sex. In Tanzania, sex education has yet to be introduced in the school curricula. Absence of such a subject has caused a lot of problems to girls and boys particularly at adolescence when they begin to become sexually active. An example from the interview with Nyemo reveals this situation. She said:

I dropped out of school at standard four because of pregnancy. A certain young man approached me and wanted to have sex with me. At first, I refused telling him that I was scared of pregnancy. But the man tried tirelessly to convince me that there was a great pleasure in having sex. He also promised to marry me in case of conceiving. In fact, I had never had sex before. He repeatedly pressed me so much that I eventually consented. But I refused to marry him because after we had stayed together for a while he started harassing me.

Young men pressuring girls to have sex at an early age has become a common problem among many communities in Tanzania. It has left many of them not only expelled from schools but victims of sexually transmitted diseases and sole carers
of children. Many become mothers at a tender age when they are incapable of managing even their own lives. The findings of this study suggest that a large number of girls drop out during and at the end of primary school cycle, as well as in the first few years of secondary education because of pregnancy.

**Long Distances to Schools and Poor Infrastructures**

Traveling long distances to and from school presents a hazard for girls. Before the period of cost sharing, the government used to meet costs for escorting visually impaired female students. This has been ended and instead the responsibility has been shifted onto the parents who are often too poor to meet it. Many parents fear to let their daughters travel long distances to schools alone. This may lead to denial of opportunity to education for girls who live far away from schools. Girls are vulnerable to sexual abuse, which may, because of lack of security, result in devastating effects such as rape, pregnancy or death. One of the secondary school teachers interviewed (August 2000) confirmed that the long distance to school was a problem for visually impaired female students. He said that there were reported cases of the harassment experienced on their way to and from school. In one case the outcome was pregnancy. This not only reduces the chances of girls to attend school, but also creates other psychological problems.

According to the interview one visually impaired girl student, who was in form three, was raped in one of the toilets of the train as she was traveling home. When she was inside, a man forced the door open and entered. The rapist fulfilled his evil by warning her not to scream for help. By then, it was midnight and the majority of the passengers were asleep. The carriage itself had no light. As a consequence she got pregnant. When she went back to school, she kept quiet about it until the teachers suspected. When they asked her, she told them the story. Although the teachers were sympathetic, it could not help. She had to leave the school.

The obstacle of long distance is further exacerbated by poor infrastructure. Most visually impaired children, as observed in this study, come from remote areas where public transport is not available. Most of the roads are inaccessible, particularly during the rainy seasons. When going to school, the majority of visually impaired women whom I interviewed had to walk between 20 and 50 miles before
they were able to catch a bus to school. Some were escorted by their relatives on bicycles to places where they could catch a bus. Some of the women used donkeys, which carried them and their luggage. On some occasions, movement between one area and another was completely cut off. Such a barrier emanating from poor infrastructure, as this study found, caused so much inconvenience that some of the students had to delay going to school for a considerable time. This had a serious impact on their academic performance and achievements.

Frequent delays and poor transport infrastructure led some of the students to despair and they stopped going to school completely. Ndaro provides an example. She said: "I stopped schooling at standard five. You know that year of *el nino* it rained so heavily that two bridges which were connecting my village with other places were washed away by *el nino* rains of 1997/98. The bridges remained unrepaired for about a year. All that time I had to stay home. After the bridges were replaced, I said to myself I can't go back to school. I found myself too old to continue schooling".

**Detrimental Impact of School Practices and Services**

*Teachers Attitudes and Unfriendly School Environments*

According to Allport (1935), an attitude is a mental state of readiness organised through experience and exerting a directive or dynamic influence upon the individual’s response to all objects and situations with which it is related. Benton (1962) attempts to give a generalised definition by stating that attitude is a word having no precise meaning when used to describe human beings psychologically. It generally refers to inclinations, presumed to be enduring, to react in a certain way in response to certain kind of situations.

Emphasising that an attitude predisposes one to make a preferential response and avoid the implication that response itself is affective or evaluative, Rockeach (1968) defines attitude as a relatively enduring structure of beliefs, relating to an object or situation which predisposes an individual to respond in some preferential manner. However, most people tend to agree with Oppenheim's (1966) observation that an attitude is a state of readiness and tendency to act or react in some way when confronted with certain stimuli. According to Mujaya (1982), the
reaction to stimuli may be positive or negative depending on the perception and experience of an individual towards the stimuli.

In this connection it is very obvious that a disabled student will not benefit from education without the readiness of a teacher to accept and respond positively to her special needs. This study observed that some teachers had negative attitudes towards visually impaired female students. As Box 5.4 illustrates, this discourages some students from continuing with their education.

Box 5.4: Pupils Under Custody

Kamunde, born in 1971, is a visually impaired woman who was the victim of teachers' negative attitudes. This happened to her while she was in standard six at Misungwi Integrated Primary School which enrolls both visually and non-visualy impaired pupils. There were five visually impaired pupils in her class. Four were females and the fifth was a male. She said:

There arose a misunderstanding between the head-teacher and female visually impaired pupils of my class. As a result the head teacher told us that he would make sure that no one among us would pass her final national examination; and that is what happened. The beginning of the incident was that there were some boys who used to come to our dormitories and throw stones and sand inside. We reported this to the assistant head-teacher. After listening he told us to go back and wait for him at our dormitory. When reporting the incident, the head teacher was there too. To our surprise, instead of the assistant head teacher, the head teacher came himself. He asked us why we were at the dormitory during class time. We explained to him each and every thing. But he furiously ordered us to go to the class immediately. The next morning at about 9:00 am we had a class with him. Before he started teaching, he called our names and ordered us to go out of the class saying that we had scorned him the day before by taking our matter to the assistant head teacher while he was present. We wondered whether what we did was wrong. He insisted that he would never teach us unless we apologised and asked for forgiveness. At 10:00 am we went to his office to discuss the matter with him, but he told us to walk out saying that we were late. The next day at 8.00 am we went back to his office with the same purpose, again he said we were late. As usual we were told to go out. In class he continued to force us out during his lesson. We felt devalued. Due to such disappointments we eventually decided to quit the school. We had no clear direction as to where we wanted
to go. By then it was around 5:00 am. I still remember that day. It was a Sunday. We left the school and told our fellow female pupils in the dormitory that should any teacher ask about us, they were to tell him/her that we had gone to hospital. Unfortunately that very day, there were no buses traveling between Misungwi Primary School and Mwanza or Shinyanga, the places to which we wanted to escape. As a result we had to sit at a certain café, which was at the bus stand. As we were sitting there one of the head teacher's sons came and told us that his father was looking for us and that he himself was helping his father. He continued to tell us that his father ordered him to take us back in case he found us. We stood up and started to go back to school. On our way we met the head teacher going to the police station to report the incident. We were under custody for the whole day. A few days later he suspended us from attending classes. Then he took the issue to the District Education Authority. The District Education Authority sent one of its officers to investigate and settle the matter. The head teacher told the education officer that unless we were discontinued, he would not go on teaching. We were called one after another to make our statements. Finally we were told to go to class. But, when the head teacher came to the classroom during his lesson, he stated clearly that the future of our education was in his hands. He might decide either to destroy it or forgive us. After the national examination none of us passed, despite the fact that in classes we were leading even sighted pupils. It was later discovered that our examination papers were deliberately not sent to the respective authority for marking. This was revealed to be so after one parent of our fellow pupil went to the National Examination Council to complain. There he was shown examination papers from all primary schools enrolling visually impaired pupils in the country. Papers from our school were missing.

Punitive school environments lead to despair. Unreasonable punishment may result in bad performance or students dropping out. Hinda said, "you know, one of the reasons why I dropped out of school is that teachers and non-teaching staff at school were oppressing us very much by saying that our behavior was not good. For example, I myself experienced a corporal punishment because one of the non-teaching staff reported to the teachers that I was arrogant. My refusal to plead guilty led to a miserable school life. When this became too much I decided to quit".

Currently there is ongoing debate as to whether or not corporal punishment helps to mould the behavior of the students. Inflicting pain might have positive effects, but in most cases it leads to negative and undesirable results. It creates an
unconducive teaching/learning environment, which distorts the teacher-student relationship. As the example in Box 5.4 shows, students sometimes develop hard feelings toward their teachers and attempt to abscond from schools or a particular lesson.

I also observed in this study that dilapidated buildings created an unpleasant environment for students. As indicated in Box 5.4 the boys were throwing stones and sand into girls' dormitories through worn out windows. Hence the lives of visually impaired female pupils were insecure. Pupils feared and distrusted the school environment. As a result some of the pupils decided to quit the school. Additionally it appeared that lack of food or balanced diet contributed directly and indirectly to an unconducive school environment. Susan said: "students at our secondary school used to scramble for food. So for visually impaired students it was hard to get food in such a situation. There were no good arrangements. I remember some occasions where I missed my meal and how this affected my concentration in class." To emphasise this Hundikwa said: "during my school time at Hombolo we used to have only one type of food i.e. stiff porridge with beans. Vegetables, fruits, meat and rice were hardly found in a school meal. It was difficult for me to cope with such a circumstance." Majimbi added:

I left schooling in 1987. By then I was in standard three. The main reason for leaving school was shortage of food. That year (1988) no visually impaired pupil returned to the school. Let me tell you, we starved a lot during the three years I stayed there. There was a big problem of food. We had only one meal per day. For supper we only got porridge. On some occasions we got porridge in the morning and had another meal in the evening. But there were a few incidences where we had no meal for the whole day. When the situation got worse, no visually impaired pupil returned to school after holidays. For three years, the school remained without any visually impaired pupil.

Such an atmosphere undermines students' enthusiasm to learn. Food is very important for body and mental health. It is a source of energy that enables one to work effectively. Its deficiency leads to many problems. Poor performance
jeopardizes the chance for further education. Majimbi's argument is further supported by the enrolment and completion records of her school (see Table 5.2).

**Lack of Special Needs Education Facilities**

Special needs education facilities form an essential component of the learning/teaching process. They include Braille, talking and large print textbooks, teaching gadgets, typewriters, typing papers, Perkins Braillers, braille papers, cassettes, tape recorders and magnifying glasses. Without those facilities and equipment, the performance and academic achievement of the learner must be affected. The findings show a great shortage of these basic requirements to the process of learning (See Table 5.1).

Table 5.1: Availability and Condition of Learning/Teaching Materials as Reported by Visually Impaired Women

(a) At Primary School:

(i) Availability

<table>
<thead>
<tr>
<th>Remark</th>
<th>Textbooks</th>
<th>Perkins Braillers</th>
<th>Tape/cassette recorder</th>
<th>Compact cassette</th>
<th>Typewriter</th>
<th>Braille/ writing paper</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enough</td>
<td>-</td>
<td>26 (44.8%)</td>
<td>27 (46.6%)</td>
<td>27 (46.6%)</td>
<td>26 (44.8%)</td>
<td>26 (44.8%)</td>
</tr>
<tr>
<td>Not enough</td>
<td>46 (79.3%)</td>
<td>20 (34.5%)</td>
<td>19 (32.8%)</td>
<td>19 (32.8%)</td>
<td>20 (34.5%)</td>
<td>20 (34.5%)</td>
</tr>
<tr>
<td>None</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>No response</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
</tr>
<tr>
<td>Total</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data generation
(ii) Condition

<table>
<thead>
<tr>
<th>Remark</th>
<th>Textbooks</th>
<th>Perkins Braille</th>
<th>Tape/cassette recorder</th>
<th>Compact cassette</th>
<th>Typewriter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Good</td>
<td>NIL</td>
<td>8 (13.8%)</td>
<td>8 (13.8%)</td>
<td>NIL</td>
<td>6 (10.3%)</td>
</tr>
<tr>
<td>Good</td>
<td>15 (25.9%)</td>
<td>16 (27.6%)</td>
<td>16 (27.6%)</td>
<td>20 (34.5%)</td>
<td>13 (22.4%)</td>
</tr>
<tr>
<td>Bad</td>
<td>20 (34.5%)</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
<td>22 (37.9%)</td>
<td>14 (24.1%)</td>
</tr>
<tr>
<td>Very bad</td>
<td>11 (19.0%)</td>
<td>10 (17.4%)</td>
<td>10 (17.4%)</td>
<td>4 (6.9%)</td>
<td>13 (22.4%)</td>
</tr>
<tr>
<td>No response</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
<td>12 (20.7%)</td>
</tr>
<tr>
<td>Total</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data generation

(iii) Ratio of facilities/equipment to Students

<table>
<thead>
<tr>
<th></th>
<th>Textbooks</th>
<th>Perkins Braille</th>
<th>Tape/cassette recorder</th>
<th>Compact cassette</th>
<th>Typewriter</th>
<th>Braille writing paper</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ratio</td>
<td>1:3</td>
<td>1:2</td>
<td>1:8</td>
<td>-</td>
<td>1:2</td>
<td>-</td>
</tr>
</tbody>
</table>

Source: Field data generation

Note: 'No response' refers to those who never attended any schooling.
(b) At Secondary Schools:

(i) Availability

<table>
<thead>
<tr>
<th></th>
<th>Textbooks</th>
<th>Perkins Braillers</th>
<th>Tape/cassette recorder</th>
<th>Compact cassette</th>
<th>Typewriter</th>
<th>Braille writing paper</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enough</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Not enough</td>
<td>11 (19.0%)</td>
<td>11 (19.0%)</td>
<td>11 (19.0%)</td>
<td>11 (19.0%)</td>
<td>11 (19.0%)</td>
<td>11 (19.0%)</td>
</tr>
<tr>
<td>None</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>No response</td>
<td>47 (81.0%)</td>
<td>47 (81.0%)</td>
<td>47 (81.0%)</td>
<td>47 (81.0%)</td>
<td>47 (81.0%)</td>
<td>47 (81.0%)</td>
</tr>
<tr>
<td>Total</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

(ii) Conditions

<table>
<thead>
<tr>
<th></th>
<th>Textbooks</th>
<th>Perkins Braillers</th>
<th>Tape/cassette recorder</th>
<th>Compact cassette</th>
<th>Typewriter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Good</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Good</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bad</td>
<td>2</td>
<td>7</td>
<td>7</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>Very Bad</td>
<td>9</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>No response</td>
<td>47 (81.0%)</td>
<td>47 (81.0%)</td>
<td>47 (81.0%)</td>
<td>47 (81.0%)</td>
<td>47 (81.0%)</td>
</tr>
<tr>
<td>Total</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

(iii) Ratio

<table>
<thead>
<tr>
<th></th>
<th>Textbooks</th>
<th>Perkins Braillers</th>
<th>Tape/cassette recorder</th>
<th>Typewriter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ratio</td>
<td>1:6</td>
<td>1:4</td>
<td>1:10</td>
<td>1:4</td>
</tr>
</tbody>
</table>
Source: Field Data

Note: 'No response' refers to those who either never attended any schooling or did not reach secondary education.

Generally, the tables highlight the great inadequacy of all items. Additionally, even for those few learning/teaching facilities available, none was in a good working condition. There was a need to share such learning/teaching facilities as existed, sometimes at an alarming ratio. The shortage of facilities was greater in secondary than in primary schools. Moreover, the condition of the learning/teaching facilities was worse in secondary than in primary. The explanation for this is that from 1971 to 1995, provision of primary education in Tanzania was being strongly supported by Swedish International Development Agency (SIDA). By virtue of this support, provision of special needs teaching learning facilities/equipment was part of the package. SIDA provided Braille transcription of textbooks and other publications of relevance to primary schools only. It provided typewriters, typing papers, thermoform machines, Braille papers, cassette copiers, Perkins Braille machines, cassette recorders and compact cassettes and supported the Tanzania Braille Printing Press for the production of primary school braille books. It also facilitated training of specialist teachers for both short and long courses (Interviews: Officials of the Ministry of Education and Culture, August 2000).

In contrast, secondary education was solely a responsibility of the government. However, in some cases local and international non-governmental organizations, such as Tanzania Society for the Blind (TSB), Tanzania League of the Blind (TLB), Sight Savers International, Christoffel Blinden Mission (CBM), etc, gave irregular support directly to the government or to the schools and sometimes to individual students. Unlike SIDA these organizations had no bilateral agreement with the government. The support they provided was on charitable grounds. Such support was extended to both primary and secondary education (Tanzania Society for the Blind, August 2000; Tanzania League of the Blind, August 2000). The types of aids given included brailon braille and typing papers, braille kits, Braille textbooks, cassettes, tape recorders, etc. Moreover, they facilitated training of specialist
teachers for short and long courses within and outside the country. As already explained, however, such backing was very minimal and irregular. This adversely affected secondary schools, which were totally under the government and received no assistance from SIDA. A letter written by the head master of Kilosa Secondary School, (August 20, 1999) to the Principal Secretary for the Ministry of Education and Culture expresses concern on this issue. It reads:

Reference is made of our discussion held in your office in April 1999. I have 22 visually impaired students at my school, 12 boys and 10 girls. The main problem is facilities. For example we have only 7 typewriters and one Perkins Brailler; we do not have cassette recorders and duplicating machine. During examinations we have to travel to Mzumbe (100 kilometers) to duplicate their examination papers. This costs a lot of money for teacher's transport and night allowances. Moreover braille papers are hard to get, we have to travel to private shops in Dar-es-Salaam (300 kilometers) where one ream is sold at Tsh. 28,000/= to 30,000/=.

Worse still I do not have specialist teachers. I had two specialist teachers, but one of them had gone for further studies after which he was transferred. Now I have only one specialist teacher who does not satisfy the need of visually impaired students. I advise that these students be transferred to other schools which might have enough special facilities and specialist teachers, otherwise we would not be according them justice (Matutu, 1999).

A similar case was revealed in an interview with the headmistress of Tabora Girls Secondary School. The school had only one worn out Perkins Brailler which was shared by three students. In terms of Braille textbooks, there were only three titles of English literature and one title of Kiswahili literature for the whole school from form one to four. There were no textbooks at all for other subjects. There wasn't a single sheet of Braille paper (Research diary: 11 September 2000). Shortage of teaching/learning special needs facilities/equipment was endemic in all secondary schools enrolling visually impaired students (Ndeki 2000). Interviews with all 11 visually impaired women who reached secondary education revealed that they encountered a lot of obstacles concerning special needs education facilities. Box 5.5 presents the experiences:
Milembe was born in 1974. She has 3 sisters and 3 brothers. She completed her primary education in 1987. In 1991 she completed her secondary education. Two years later she attended a teachers training course. At the time of this research she was working with the Tabora Municipality as a primary school teacher. Narrating the circumstances of her secondary school life, Milembe said:

Generally we had very few titles of Braille textbooks, which however were outdated and some were torn. Due to lack of Braille references, the only option was to depend on the notes from our fellow students no matter how unreliable they were. Notes from our fellow students had a lot of problems because we were just copying from what they had jotted down in classes. Some of the notes had spelling errors, skipped words or sentences. All Perkins braille and typewriters were worn out. Five students shared one Perkins brailer while we had only 10 typewriters working to be shared by 20 students. We had a serious shortage of Braille and typing papers. Consequently we experienced a lot of difficulties during note taking, writing and during examinations. In case of taking and writing notes we had to do it in turns. One could begin writing. Whether or not completed she had to give the Perkins brailer to her fellow student after half an hour. It continued that way until finally all of us had written something. It was a very tiresome exercise.

When we fell short of braille papers, we sometimes wrote our notes on rough papers, which had already been brailled on the other side. In classes, we just listened without taking notes. We could sometimes stay even for a month without writing any notes, either because of a shortage of braille papers or because of shortage and in bad condition Perkins brailleers. During classroom tests and examinations, we had to share the available 10 typewriters. Leaving aside the problem of sharing, the typewriters themselves were not reliable. You could write while the ribbon was off place. So by the time you thought you were through, the invigilator would come and tell you that “hey sorry, you have written nothing”. You panicked and got totally confused. Even if you were given extra time, you would not be in a mood to do well. There was also a problem of live readers. We were given sick students to read for us. The arrangements were that live reading had to be done after classes when students were supposed to be engaged in self-reliance activities. In order not to affect those activities we were given sick/weak students or those excused duties. But because of such weakness, they were not very effective, as they got tired easily. Sometimes we had to ask our friends. But this would depend largely on their willingness and so many other circumstances. In that way, our success depended largely on others. We could not write notes or read at the time we
wanted. The unavailability of the assistance caused us to lag behind academically. Hence, many of us failed to get the pass-mark cut off point for advanced secondary education or for post secondary training. Depending on others made us inferior and we could not in any way be proud of whatever little we achieved academically. One could say for instance “look! She has made it because of my assistance.”

Within primary education, facilities in special schools were better than in integrated ones. Special schools are jointly run by the government and churches. Given the assistance of churches, special schools had relatively more resources and support than integrated ones. Such difference was reflected in admission and retention rates across schools as indicated in Tables 5.2 and 5.3.

Table 5.2: Enrolment and Completion Record at Hombolo Integrated Primary School 1989 – 1999.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>ENROLMENT</th>
<th>COMPLETION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1989</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>1990</td>
<td>3</td>
<td>-</td>
</tr>
<tr>
<td>1991</td>
<td>11</td>
<td>-</td>
</tr>
<tr>
<td>1992</td>
<td>6</td>
<td>-</td>
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<tr>
<td>1993</td>
<td>8</td>
<td>1</td>
</tr>
<tr>
<td>1994</td>
<td>4</td>
<td>-</td>
</tr>
<tr>
<td>1995</td>
<td>-</td>
<td>-</td>
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<td>1996</td>
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<td>-</td>
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<tr>
<td>1997</td>
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<td>-</td>
</tr>
<tr>
<td>1998</td>
<td>8</td>
<td>-</td>
</tr>
<tr>
<td>1999</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>TOTAL</td>
<td>52</td>
<td>3</td>
</tr>
</tbody>
</table>

Source: Field data 2000.

By 1999, 32 (61.5%) of 52, were supposed to have completed standard seven at Hombolo and 19 (54.3%) of 32 were supposed to have completed the same level at Buigiri. But, only 3 (9.4%) of the 32 pupils completed standard seven at Hombolo while 10 (52.6%) of the 19 completed the same level at Buigiri. The rest,
29 (90.6%) of Hombolo and 9 (47.4%) of the students at Buigiri, dropped out in the course of schooling. In the year 2000, 20 pupils were supposed to be continuing with schooling at Hombolo, as well as 16 at Buigiri. However, only 9 (40%) were still continuing with schooling at Hombolo, while 11 (60%) had dropped out. At Buigiri all 16 pupils who were supposed to be in school were still continuing. The total enrolment capacity of Hombolo was 35 (100%) pupils but in 2000 only 9 (25.7%) were enrolled. At Buigiri the capacity was 30 (100%) pupils and 28 (93.3%) were enrolled.

Table 5.3: Enrolment and completion record at Buigiri Special Primary School from 1989 – 1999.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>ENROLMENT</th>
<th>COMPLETION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1989</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>1990</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>1991</td>
<td>1</td>
<td>1</td>
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<tr>
<td>1992</td>
<td>-</td>
<td>4</td>
</tr>
<tr>
<td>1993</td>
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<td>3</td>
</tr>
<tr>
<td>1994</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>1995</td>
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<tr>
<td>1996</td>
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<td>4</td>
</tr>
<tr>
<td>1997</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>1998</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>Total</td>
<td>32</td>
<td>28</td>
</tr>
</tbody>
</table>

Source: Field data generation 2000.

Note:
Although Hombolo Primary School enrolls both boys and girls, in case of visually impaired pupils it enrolls girls only. Sighted pupils are non-boarders while visually impaired pupils are boarders. Buigiri, which is a special school, enrolls both visually impaired boys and girls. While 52 visually impaired pupils were enrolled at Hombolo for the period of ten years, at Buigiri 35 pupils were enrolled. Those who started in 1989 should have completed in 1995.
Visually impaired women who attended Buigiri School explained that there were some, but not very serious, problems in respect of facilities. In contrast, the interviews with visually impaired women schooled at Hombolo indicated that the situation was very bad there. The following interview extracts illustrate this problem. Nenelwa said, "We faced a serious problem of writing machines. Perkins braillers were in bad condition while all typewriters were out of order and none of us were taught how to use typewriters. We neither had tapes nor tape recorders. We did not have enough Braille text-books for reference. Occasionally, this meant we were unable to do our class tests". Ndaro continued, "Braille and writing papers were a big problem. Sometimes we had to stay for two months without writing any notes. We were going to the class just to listen. It was hard to cope with our fellow sighted pupils in the class or to concentrate in our subjects effectively. Almost all the time visually impaired pupils were lagging behind sighted ones in tests and examinations". Lihewa added, "Despite all those problems, there was no school arrangement for live reading. Teachers could enter the classroom to teach without arranging for any remedial classes to let us compensate or catch up with the rest of the class. No wonder I failed my national examination".

Admitting that the problem of facilities still existed at Hombolo school, its head teacher said: “for a long time now our school has lacked Braille text books and other equipment in general. Also there has been a serious shortage of braille and other types of papers for writing notes and exercises. Due to lack of papers, sometimes pupils have failed to do their tests. At the time of examination the problem of papers necessitates us to read questions for visually impaired pupils instead of brailling for them to read on their own”. In such a situation it proved difficult for visually impaired pupils to attain substantial achievement in their lessons and in the pursuit of further education.

Problems at the Policy Level
Education policy reforms in Tanzania have so far passed through three major changes. Education before independence and subsequently up to 1966 was provided by the government in collaboration with churches and charity organizations. Fees and other costs were a responsibility of the individual. The
second phase was from 1967 to the signing of IMF conditionalities in 1986. That was a time when education was solely a public responsibility given as a free social service at all levels.

The third period is from 1986 to date. It replicates the first phase with fees and other costs re-introduced and emphasises collaboration between government and NGOs or private firms. There has been an attempt to revive the deteriorating economy under Structural Adjustment Policies (see Chapter Four). In none of these periods, however, have efforts been made to identify special needs education as a developmental issue.

**Effects of SAPs**

One of the effects of SAPs on education has been the re-introduction of cost sharing in school fees and other direct costs. According to the 1995 Education policy, the government is supposed to reduce its expenditure and request the community, parents and end-users to share the cost of education. This study found that in special needs education, parents/guardians have had to take on the burden of the educational costs for their visually impaired children. They must meet costs of transport, uniforms and pocket money at primary level. Food, accommodation, tuition fees, stationery etc., remains a responsibility of the government.

At secondary level, parents/guardians have had to share costs in tuition fees, transport, uniforms, caution money, bedding and pocket money. Food, accommodation and stationery remain a government’s responsibility. However, the study found that at Buigiri Special School in Dodoma and Furaha Special School in Tabora, all costs except pocket money are being met by the school. These are schools which are run jointly by churches and the government. In contrast, at Hombolo Mainstream Primary School which is run by the government, parents/guardians have to meet costs in transport, uniforms and pocket money. In this school there were many dropouts. Thus it seems cost sharing affects government schools more than schools with church support. The effect of cost sharing in education is greater in secondary schools where fees are higher (see Chapter Four). Moreover, the community has no arrangements in place to provide for those who are unable to meet the costs because of poverty. In practice end-users are often too poor to meet their own school costs. Hence, the study revealed
that while the implementation of the Structural Adjustment Policy in education has limited access of all students from poor families, combined with social constructs of sex and impairment, visually impaired girls/women are the most affected.

The findings further show that cost sharing not only restricts access of visually impaired girls/women to education, but also creates many problems for them. The incident of a school girl who was raped in a train because the government had waived transport support for teachers to escort students presents an example of the effects of structural adjustment on the educational lives of visually impaired female students. 46 (79.3%) of the visually impaired women interviewed explained that they had experienced severe financial constraints at different times. This was particularly true for those who reached secondary level of education.

**Lack of Special Needs Education Policy**

Policy is very important. It gives directives and defines the roles and responsibilities of stakeholders and interested parties. It also establishes co-ordination mechanisms. The term “co-ordination system” means permanently existing, or putting in place mechanisms of integrating efforts by different subsystems, individuals and component parts of the whole for the achievement of set objectives and goals (Bagandanshwa, 1997:217). The study found that special needs education for disabled people has never been the subject of an independent policy or even a sub-policy in Tanzania. The Commissioner for Education stated “when we were designing our 1995 education and training policy, I remember there was an omission of that (Ndeki, August 2000). As the above quotation shows, it means that there is no permanent mechanism for integrating efforts across different subsystems, individuals and component parts of the whole for the achievement of set objectives and goals of special needs education. Thus there are no proper arrangements for assisting those poor visually impaired students who fail to continue schooling because of economic and other constraints. The efforts of Wendo and Mandeje, referred to above, illustrate the severity of the problem. Lack of definition of duties and responsibilities makes every key player shy away from taking action, leaving visually impaired students to be deprived of their fundamental right to education.
A zonal special needs education inspector further explained the situation as follows:

There is a great problem of co-ordination of the provision of special needs education. For example, all primary schools are run under local authorities. But the administration of special needs education units is under the central government. Additionally, although they are located in one of the districts of the region they admit children from the whole region and beyond. So it is difficult for that particular district to spend its levy on children who are not residents of that particular district. Pupils from other districts and regions may suffer a lot until their local authorities send money to the district where the school is located. Sometimes, it happens that those pupils drop out because of the failure of their local authorities to remit funds in time. Sometimes they never provide funds at all. Worse enough, there is no stipulated special needs education structure. There is only a special education department at the ministerial level. At zonal, regional and district levels the structure does not exist. Hence there is lack of co-ordination of these services (Nondi, 2000).

As this inspector's comments suggest, lack of specific policy/sub-policy on special needs education has resulted in the neglect of special needs programmes. Had such a policy been enacted, it would have facilitated development of the specific projects and strategies aimed at improving the structure and content of special needs education. From its inception in 1950, such special needs education as there is in Tanzania has always been run as a charitable service. There is neither specific policy, nor comprehensive budgeting at local and central government to meet educational costs for disabled children.

Summary and conclusion
This chapter, has presented, analysed and discussed the constraints experienced by visually impaired women in their struggle to access and gain education in Tanzania. The findings, make clear that those constraints reflect the cultural construction of gender and disability. Culture as understood and exercised by particular people provides the raw material through which concepts and meanings are constructed. According to deviance theory, visually impaired women deviate
from traits of a normal woman. This affects their status and deprives them of opportunities in decision making, inheritance and ownership of property. They are patronised as objects of pity and charity. Some of the parents/guardians overprotect, neglect or reject them. Some of them consider investing money on their disabled children's education to be a waste of resources. The few who happen to go to school are further confronted by disappointing circumstances such as sexual violence, early pregnancies, insecurity in travelling long distances etc. In schools, circumstances such as teachers' negative attitudes towards disabled scholars, unfriendly school environment and lack of special needs facilities create further barriers. The government itself overtly or covertly contributes to creating and perpetuating some of those obstacles. For example, the reform policy which introduced structural adjustment programmes in 1986, whereby school fees were re-introduced, did not consider ways through which the educational needs of the poor could be met. As my fieldwork has revealed, this intensifies the economic hardships of poor families, which cannot afford private alternatives. Absence of social policy on special education has further exacerbated the situation of children with impairments. Visually impaired women have frequently found their opportunities terminated.
CHAPTER 6

OUTCOMES OF EDUCATIONAL OBSTACLES, COPING STRATEGIES AND NEW PATHWAYS TO EDUCATION IN TANZANIA

Introduction
The problems visually impaired women encounter in their efforts to access and gain education in Tanzania mean that some of them never attend any classes while others fail to go to as far their abilities would permit. In such a context, it is clear that education fails to serve its intended purpose. A meaningful education is one which helps an individual to sustain independent living and enjoy a good quality of life. We need knowledge and skills in order to manage our own lives through self-reliant activities and competition in the labour market. Knowledge and skills which one acquires from education play a decisive role in one's life. Byrne (1987:27) comments that the primary aim of all educational efforts should be to help individuals achieve the highest level of attainment of which they are capable.

Much has been said in Chapter 5 about the constraints visually impaired women encounter in their efforts to access and gain education. In this chapter I assess how such obstacles imprint themselves in the lives of visually impaired women, i.e. the way in which they have constrained their ability to become independent and lead productive lives. Because of the obstacles they face, women are not able to fully or adequately access educational opportunities and in consequence some of the views about disability held by members of their communities are confirmed, through a kind of self fulfilling prophesy. Thus they seem to be dependent, incapable, etc. This chapter also examines various coping strategies women with limited education have used in seeking to generate an income and become financially independent. Finally it discusses the views of visually impaired women about how their educational needs might best be met. Several case studies drawn from the experience of visually impaired women are presented to illustrate their situation.
Outcomes of Educational Obstacles

It is inevitable that an inaccessible and inadequate educational system results in damaging outcomes. Under this theme, illiteracy and ignorance, unemployment and poverty are analysed as major outcomes of educational obstacles facing visually impaired women in Tanzania.

Illiteracy and Ignorance

Illiteracy is not merely the inability of an individual to read and write, it contributes to ignorance whose consequences for an individual are adverse. The literal meaning of the term ignorance is lack of knowledge, unawareness and unconsciousness (Thompson, 1995; Urdang, 1991). Ignorance was and still is one of the three arch enemies which Tanzania declared it would fight right from independence in 1961. Others are poverty and disease (TANU, 1967). All development strategies adopted since then focus on the elimination of these three enemies of development. Despite efforts made since, including heavy investment in education, illiteracy persists. According to the World Bank Report of 2001 "thirty two percent of Tanzania's population aged 15 years and above is illiterate". The report also notes that the adult illiteracy for males in 1995 was 21% while that for female was 43%. Generally speaking, illiteracy and ignorance appear to be a national epidemic. However, their magnitude increases in accord with the inequalities in the social structure of the country. Proportionately illiteracy among disabled women may be higher than that of any other group given that negative societal attitudes targeting impairments push visually impaired women to the extreme margin of society. Findings from this study reveal that 12 (20.7%) of the visually impaired women interviewed had had no formal schooling. This may suggest that visually impaired women have less access to education than women in general (43%). But, in reality, the age variable used (10 – 35) in selecting the sample has limited the understanding of the actual prevalence of illiteracy among visually impaired women. If the sample, for example, would have gone beyond 35 years, we might have obtained a different picture.
Although 46 (79.3%) of the visually impaired women interviewed had attended school, only 11 (19%) had progressed to secondary and post-secondary education. Thirty-five (60.3%) had attended primary education. Of these, 9 (25.7%) did not even complete primary education. With the exception of 3 (5.2%) visually impaired women who were civil servants, most had no access to Braille or audio materials after their departure from school. The implication is of a high level of ignorance about new inventions, innovations and challenges. This was found to be most prevalent in rural areas where the general population has little access to various sources of information, including radio, newspaper, books, and television.

After school life, most visually impaired women lacked sufficient information to make informed decisions about their lives. For instance, when faced with problems, such as illness, some tended to resort to belief in supernatural powers. Mduji exemplifies this. When I visited her, she was not at home. She had gone to a diviner for consultation about the sickness of her 2-year-old baby. I decided to drive to the diviner's residence and found her there. My interview with her took place in one of the diviner's huts. Mduji had a strong belief in superstition and said that she wanted to find out who the enemy was. She said, "My baby is very sick. I am sure someone must be involved". Ignorance had prevented Mduji, who had never attended any formal schooling, from correct information about causes of disease or of preventive and curative measures.

In both rural and urban areas, a difference was observed in terms of status between illiterate unemployed visually impaired women and literate employed ones. Illiteracy and unemployment can lower self-esteem and reduce the freedom to make decisions. Boxes 6.1 and 6.2 illustrate the ways through which an unemployed illiterate person can experience a subordinate life as compared to the employed literate person who will have much fuller control of his/her life.

Box 6.1: Status of unemployed illiterate visually impaired woman in the family and society

Ng'atilwa, who at the time of this study was a single parent of two children, was born in 1980, the last in a family of eight children. She became blind at the age of
five due to measles. When medical solutions failed, her parents consulted witch doctors. They were told that there was a certain enemy who had bewitched their daughter on grounds not known. Ng'atilwa herself believed that the sorcerer succeeded in bewitching her because of God's will. She said, "You know even sorcerers do pray to God for their success". Ng'atilwa was not sent to school. As a result she faced serious hardships in her life. She lived in a small single room hut built of tree poles and earth. The roof was thatched with earth as well. The hut did not have a concrete floor. Its door was made of small tree poles tied together by ropes. There was a very small window for ventilation so that when the door closed, the room was almost dark, even in daytime. She had no bed. She and her two babies slept on animal hides. She had only one dress. She had neither shoes nor slippers. Each of her children had also only one dress apiece. She said to me "look, my baby boy has only one shirt. Touch him. He is half-naked. He does not have a single pair of shorts. Although it is embarrassing, I must tell you the truth. Even myself, I too do not have any undergarments. I have got only one blouse and this piece of cloth (Khanga) to cover my body". Her first child was not in school due to financial constraints.

Ng'atilwa was relegated to live life as an inferior being by some of her siblings, her partner and the community at large. Her mother was the only person who seemed to care and who provided for her and valued her dignity. She further said:

"I am left helplessly. I contribute nothing for myself or my family's maintenance. Many people do not regard me as a worthy human being. You see, even the father of my children does not value me much. He has married a sighted woman whom he treats better. As for now, he never helps me with anything. No clothes even for his own children. You see, he takes me for the sake of just fulfilling his sexual desire and nothing else. I can't resist this because I, too, am sexually active and I cannot prevent feelings. But for sure, there is no true love between us. I face a hard life. It is only mum who supplies me with anything I need in life. I am afraid that she is becoming too old to continue supporting me. All my sisters mind their own business".

Admittedly, such treatment of an illiterate, visually impaired woman is not solely a consequence of lack of education. There are other factors to consider such as stereotypical attitudes about disability, gender and class, as well as the state of the economy. But as Vernon (1998:77) notes, "...education is commonly perceived to be 'the key to liberation'". This was similarly the view of the great majority of the visually impaired women who were interviewed in the course of this study. They expressed their concern that education was both a means and ends to status in
society. Schools provide skills, knowledge, credentials, awareness, critical ability and self confidence that have direct use in practical life. Box 6.2 highlights the importance of education by focusing on the experience of an employed literate visually impaired woman.

Box 6.2: Status of an employed literate visually impaired woman in the family and society

Kaundime, who at the time of this study was a married mother of one child, was born in 1968. She was a first born of the family of seven children. She lost sight two weeks after her birth due to measles. Her father took her to hospital, but it was in vain. A witch doctor was then consulted to find out the cause. He said that Kaundime had been bewitched by her grandmother on her father's lineage on the grounds of hatred. The grandmother disliked Kaundime's mother so much that she warned her son not to marry her. The bewitchment of Kaundime was believed to have been done as a punishment to both the father and mother who disobeyed the warning not to marry each other. Her parents sent her to school where she successfully completed advanced level of secondary education. She qualified for university studies. Unfortunately, joining instructions reached her very late, by which time she was already pursuing a diploma course in education. At the time of the interview, she was teaching in one of the government secondary schools and was enrolled in undergraduate degree course at the Open University of Tanzania. Her life circumstances and status were much better than those of Ng'atilwa (Box 6.1). She was living in a better furnished house which had electricity, water, ventilation and good security. She said, "Generally my siblings, parents, other relatives, friends and neighbours have a positive attitude towards me. They all respect me as a full human being". There is a great co-operation between Kaundime and her neighbours. For example when she was in labour, six women volunteered to take her to hospital at night. Even after delivery they continued to assist her. Unlike Ng'atilwa (Box 6.1), she was living independently and she was of great help to her family. She said, "With my income I am able to get my basic needs and give some support to my parents, siblings and other relatives". Thus, Kaundime was able to fulfil her roles as a responsible woman.

It is widely accepted that even a minimal level of education contributes to people's well being, improved quality of life, better health, increased opportunities for employment, smaller families, less infant mortality and so on. Moreover, education contributes to people's understanding of their rights and obligations as citizens (Cotton, 1995; Gorgendiere, 1995; Sibanda, 1995). 54 (93.1%) of the visually impaired women interviewed recognised the importance of education for individual development and that of the nation at large. They concurred that the prevalence of
low status among visually impaired women in the family and society was, inter alia, largely a result of illiteracy or poor education.

**Unemployment**

There is a distinction between work and employment. Work may be defined as any purposeful mental or physical activity that produces something of value. It does not necessarily involve financial remuneration. In contrast, "employment" can be defined as work for cash income. Again there is a distinction between self-employment and being an employee (employed by a firm or another individual). In the former the income is received from sale of one's own personal enterprise or from services rendered. When one is an employee, income is received as a reward for producing for the owner of a firm or industry called the employer. According to Wield and Chataway (2000), 'unemployment' means being without work in either paid employment or self-employment. Oudheusden, (1995:172) comments,

> Though work does not make life perfect, being without is bound to make life imperfect. There is no doubt that work creates a feeling of usefulness and self-fulfilment, it gives satisfaction, builds up personal dignity, brings a rhythm in our daily life and offers opportunities for interpersonal contacts that provide the sunshine and the rain required for any growth and maturation. ... work often has an additional surplus value for the disabled people as it can help them to overcome functional impairment and minority complexes.

Work forms an essential part of every human being requirements for living satisfying lives. With either wage employment or self-employment, particular skills are necessary for raising productivity. In wage employment, the selection of employees is based on suitability and acceptability. According to Vernon (1998), "suitability is functionally specific relating to individual skills and qualifications required for a successful carrying out of the job in question. Acceptability on the other hand, is functionally nonspecific and centres around highly subjective judgements such as will the recruit fit in? Is he or she dependable, reliable and hard working?" Twenty one (36.2%) of the visually impaired women interviewed had either never attended any school or completed primary education. Based on the suitability criteria, they lacked skills to compete in the labour market. However,
as can be deduced from Table 6.1, the acceptability criteria has also contributed to a high level of unemployment of visually impaired women despite the various levels of education attained. Oudheusden (1995) comments that, as rewards are to be paid from the profits of the sales of products produced, the employer will select workers who produce more and cost him less. Those who in his or her opinion won't give the maximum profit are less likely to be employed. It is of course most unfortunate that anyone's atypical appearance leads to disadvantage in the labour market, as people still connect it with a typical behaviour and incompetence.

Stereotypes play a significant role in determining whether a worker is deemed acceptable or not, and stereotypes regarding each group are widespread. Disabled people are frequently stereotyped as dependent, helpless or "unfit" and, therefore, as less productive. In addition to these prejudices, employers fear costs associated with absenteeism, transport problems, higher insurance premium etc with disabled employees. Furthermore, women suffer additional stereotype of being regarded as "weak" and "emotional". As shown in Table 6.1, when stereotypes extend to an illiterate or less educated disabled woman, her likelihood of getting employment diminishes.

Table 6.1: Unemployment and Income Earning Situation of Visually Impaired Women Interviewed

<table>
<thead>
<tr>
<th>Self-employment in small scale farming</th>
<th>Self-employment in petty business</th>
<th>Wage employment</th>
<th>No employment</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 (8.6%)</td>
<td>7 (12.1%)</td>
<td>3 (5.2%)</td>
<td>43 (74.1%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

Data from my fieldwork suggest that unemployment of disabled people is prevalent in both rich and poor countries. Elwan (1999) has argued that disabled people are much less likely to be employed than the rest of the population. As Wimile (1998) points out, lack of education, vocational skills and stereotypical attitudes towards disabled women seriously undermine their employability particularly in wage
The findings of this study support this argument. Table 6.1 indicates that only 3 (5.2%) of the visually impaired interviewed were employed in the formal sector in urban areas. One of those three had completed primary education, another had completed ordinary secondary education and the third had completed advanced secondary education. All three had a reliable source of income. As for the rest of the sample, seven (12.1%) were in petty business and five (8.6%) were involved in small-scale farming.

Of the seven engaged in petty business, one had never attended any school, four had completed primary education and two had completed ordinary level of secondary education. Two out of those five engaged in small scale farming never attended any school and three had completed primary education. Those engaged in agriculture grew groundnuts, millet, maize, tomatoes and onions. All of these were food crops for home consumption and in many cases were not sufficient to sustain them for a year. There are two explanations for this. First, they had small plots on which not much could be grown. Secondly, the area is semi-arid with unreliable rainfalls. Those who engaged in petty business seldom realised sufficient profit for sustainable living. The commodities they sold included groundnuts, guavas, bananas, sugarcane, fruits, local brew, charcoal, locally extracted salt, rice, maize, yams, beans, etc. With the exception of local brew, the women walked around the streets selling their goods. On many occasions they did not succeed in selling all the items they had. A number of them complained that several times they had to return home with the unsold items, some of which were perishable and could not be kept for a long period. As Table 6.1 indicates, 43 (74.1%) of those interviewed had neither wage nor self-employment. Of these, 10 (17.2%) depended on their parents/guardians/siblings and four (6.9%) depended on other relatives and neighbours. However, the majority, 29 (50%), earned their living mainly through street begging. Begging does not fall under either self or wage employment as defined above, but was found to be an important source of earning a livelihood. As may be imagined, begging is an activity no one would resort to if he/she could avoid it. Begging dehumanises a person.

 Fifteen (25.9%) of the visually impaired women interviewed had applied without success for soft loans from a number of mainstream credit institutions including
Co-operative and Rural Development Bank (CRDB), Shirika la Uchumi la Wanawake Tanzania (SUWATA) and Poverty Africa. The conditions of getting loans from mainstream funding agencies were difficult. For example, in some cases borrowers were required to write project proposals for funding. Due to the level of their education, many could not manage this nor did they have the funds to pay an expert to write one for them.

For credit institutions to release funds, borrowers first had to have deposited a certain amount of money. This condition frequently ruined the possibility of visually impaired women borrowing. (Research diary, 10 August 2000). In some cases, borrowers had to submit a mortgage as security for the loan, which entailed having ownership of valuable property. Visually impaired women seldom owned properties. Accounting for the inaccessibility of loans, one of the leaders of TLB said:

> You may wonder, while the government has allocated special soft loans funds for women and youths, (800 million Tsh for each group), that nothing has been done for disabled people. I believe disabled people account for 10% of Tanzania's population. This shows the extent to which our government ignores disabled people. The same mentality extends to NGOs, which provide soft loans to various groups of the society. Personally, I visited some of those NGOs, for example Pride, Meda, Poverty Africa and Kruu, and was told that they had no less restrictive conditions for disabled people to get loans. They told me that disabled people were supposed to apply through the normal procedures. Now, just see the way our society distrusts disabled people and neglects their potentialities. How many people believe that a visually impaired person can manage a business! To be honest, the real situation of disabled people of this country is disappointing (Mlimahadala, 2000).

The government decided to take affirmative action for women and youths after realising their vulnerability in the prevailing labour market. This was also part of the strategies for poverty reduction. However, according to Mlimahadala (2000) disabled people were not part of the strategy.

Nevertheless, in Tabora it was found that there were two International Disability NGOs, namely Swedish Handicapped International Aid Foundation (SHIA) of
Sweden and Action on Disability and Development (ADD) based in the UK, giving loans to disabled people. Each had its own programme. Both schemes had similar conditions and structures. Their conditions were less restrictive than other programmes, with low interest rates. They were providing loans to disabled people with all types of impairments.

The funds for the programmes were very limited however. Before borrowing, applicants had to form small groups of not more than five people. Normally the members of the groups organised themselves depending on how they related to and understood one another. This was important because the group had to repay the loan of the member who for one reason or another might fail to repay. That meant that although loan was given to a group, every individual group member received an amount of money to run his/her income generating activity separately. The groups did not necessarily limit themselves to one type of impairment. Before getting the loan, members had to undergo a two week entrepreneurship seminar on how to run a project.

Each group received not more than Tsh. fifty thousand (Us $ 50). Distribution to individuals varied between Tsh. five to ten thousand (US $ 10) depending on the type of income generating activity in question. At the time of the research, five out of nine visually impaired women interviewed in Tabora were involved in the schemes, three in the SHIA scheme and two in the ADD scheme. They were among the seven who were engaged in petty business in the sample. As explained earlier, they seldom generated enough income to sustain their living. Moreover it was observed that some of the borrowers were experiencing difficulties in repaying the loans and could not manage to meet the time limit (weekly) of paying a certain amount of money as required. This resulted from poor project management, for example, misuse of the funds and poor keeping of the accounts. There was also lack of reliable market for their commodities. SHIA and ADD established the schemes as revolving loan funds. Therefore the failure of the borrowers to repay their loans in time meant failure for more disabled people to benefit from the loans. Consequently, SHIA and ADD decided to suspend their activities in order to review the schemes and to put in place a different approach for the running of such schemes in order to ensure success and sustainability of the programmes.
As Majimbi explained, unemployment can have a very devastating psychological outcomes. She said,

> You know, I am very much longing for something to do. Staying idle is very boring. Sometimes I feel very lonely, especially when my parents and siblings go out either to work on farms or for a walk somewhere. If it were not for my impairment, I am sure you wouldn't find me here. I would have gone to seek a housemaid job somewhere in town. I wouldn't mind becoming a housemaid provided I was earning my living. If it were possible, I could go with you to town at least to get some refreshment.

Majimbi's statement reveals a sense of frustration. She wished to be employed even if the pay was low. In the Tanzanian context, a housemaid's job is not a highly paid activity and is normally done by either illiterate or semi-educated girls aged from 12 to 20 years. But she made a significant point that there is greater opportunity of employment for illiterate or less educated non-disabled girls than for those who are disabled. All unemployed interviewees saw education as a key to success in life. Nyamizi said, "if I were educated I am sure this problems of unemployment and poverty I am facing would never exist. Maybe I would have a better life". Interviewees explained some of the difficulties they faced as the result of lack of employment. Joha said, "Because I am unemployed, I have a lot of problems in caring for my family. I have no money to meet the basic needs of my children such as food, clothes, medical treatment, etc. In fact without employment life is hard". Similar views were shared by all unemployed visually impaired women who participated in the study. The most serious outcome of unemployment is absolute poverty.

**Poverty**

This study revealed a high incidence of poverty facing visually impaired women in the communities they lived in. In the course of interviews the researcher found herself in a dilemma when her research participants expected her to provide solutions to their most pressing needs. For example, Majimbi said: "I am very happy that you have come. I hope I will have something to eat from you because I
am so hungry. We eat only once a day. I had my meal at three o'clock yesterday, it is about twelve noon now and I am not sure if will have something to eat today". In another case even before the interview started Ng'atiliwa explained, "My daughter has only one dress. She has to stay naked each time I wash it until it dries, as I can't afford another dress for her to change into. Can you help me with some money to buy her a second dress please?" Another episode was with Zubeda who greeted me by saying "Although I knew you were coming, I am not sure if I will be able to talk to you because my little son is very ill. I am supposed to take him to the hospital but I don't have a bus fare and it is too far to walk. Can you please help me with a bus fare so that after talking to you I can immediately take my son to hospital?"

Commenting on the impact of poverty on people with impairments, Ghai, (2001:29) says:

Poverty de-individualises, and alienates those affected from the mainstream of society. Marked by feelings of helplessness and hopelessness, poverty places limitations on the person, in terms of the personal and environmental resources to improve the quality of his or her life. As the most vulnerable and least vocal members of any society, poor disabled people are often not even perceived. While the unparalleled economic growth of the twentieth century is celebrated, the issues facing disabled living in the remote villages, urban slums and tribal belts... escapes notice.

As the World Bank Report (2001:31) indicates, poverty is prevalent within the general population. Between 15 million and 18 million Tanzanians still live below the poverty line of US $ 0.65 a day. Of these, nearly 12.5 million live in abject poverty, with less than US $ 0.50 a day. The rural survey by Research on Poverty Alleviation (1998) shows that poverty incidence is between 51 and 52 percent among the dependent age groups (those younger than 15 or over 65). Poverty is even more intense for visually impaired women who, as Table 6.2 indicates, are hardest hit psychologically, socially and economically. Analysis of Tanzanian survey data reveals that households with a member who has a disability have a mean consumption less than 60% of the average (and a head count 20% greater than average) leading to...the conclusion that disability.... is a hidden face of
African poverty” (DFID, 2000:4). Recent World Bank estimates suggest on a broader scale that disabled people may account for as many as one in five of the world’s poorest people. Disability limits access to education and employment and leads to economic and social exclusion. Poor disabled people are caught in a vicious cycle of poverty (DFID, 2000).

But, what is poverty? Many studies on poverty have defined the concept (see Atkinson 1991; Bigsten, 1983; Fields, 1980; ILO/JASPA, 1982; World Bank, 1993, 2000, 2001). Semboja (1994: 40-1) has usefully divided definitions into two main categories, absolute poverty and relative poverty. According to him:

A practical and commonly used definition of absolute poverty is the inability to attain a specified (minimum) standard of living. The definition focuses on the absolute economic well-being of the poor, in isolation from the welfare distribution of the entire society. The relative poverty approach focuses on the economic well-being of the poorest x% of the population. It takes into account the welfare distribution of the entire society.

Since this study focuses on specific individuals (visually impaired women) without any reference to the entire society, the first definition (absolute poverty) is adopted as an analytical model of poverty in examining and assessing how their life situations are affected by low income.

Economic Dependency

“While people in the rich world are talking about Independent living and improved services, we are talking about survival” (Joshua Malinga quoted in Stone, 2001: 50). “Understanding survival means thinking about disability in relation to poverty and development” (Stone, 2001: 50). Economic dependency is a typical characteristic of absolute poverty. It occurs when an individual fails to raise income necessary for self-support. As indicated in Table 6.2, the majority of visually impaired women interviewed depended largely on their families or community.
Table 6.2: Incidence of Dependency among Visually Impaired Women Interviewed

<table>
<thead>
<tr>
<th>Living independently</th>
<th>Depending on their parents/guardians /siblings</th>
<th>Depending on other relatives and neighbours</th>
<th>Depending on street begging</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 (25.9)</td>
<td>10 (17.2)</td>
<td>4 (6.9%)</td>
<td>29 (50%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data generation

According to Table 6.2, 74.1% of the visually impaired women interviewed were unable to raise income to meet a minimal standard of living. They depended on their parents/guardians, brothers, sisters, other relatives and good Samaritans. The combination of attitudes that regard disabled people as unproductive accounts for the lesser involvement of visually impaired women in the socio-economic activities of families and the communities in which they live. As a result many have failed to raise their own income. Begging helps those visually impaired women who lack support from their relatives to meet their subsistence needs through the charity of good Samaritans, without whom their lives would be extremely difficult. In this sense the community directly maintains and sustains poor visually impaired women. The cases of Lydia, Sechelela and Lulu best illustrate this point. They suffered from lack of support from families/community and the state in providing mechanisms which might allow them to succeed in either the formal and informal sectors. In consequence they had no reliable sources of income causing many uncertainties for them in terms of food, clothes, shelter, health services, gender violence, dignity, life insecurity, etc.

Under-nutrition

Energy is needed to keep the body warm. When we think, walk or do any activity, we need energy. Food also provides nutrients to build bodies. The body also needs vitamins and minerals for metabolism and to keep skin and mucous membranes healthy (Balldin, Hart, Huenges and Versluy, 1975). Crow (2000:52) defines under-nutrition as sustained nutritional deprivation resulting from hunger. Parker and Wilson (2000:84) regard under-nutrition as a precipitating factor which both "weakens resistance to acquiring disease and lowers the ability to fight it once it
does occur”. They point out that "under-nutrition is associated with particular forms of death in children and infants, forms that are related to low body resistance: infectious (e.g. measles), parasitic (e.g. malaria) and respiratory (e.g. tuberculosis) diseases, plus those associated with childbirth”. Although we cannot precisely establish the linkage of under-nutrition and the causes of visual impairment in our sample, Parker and Wilson’s argument may throw light on this. In our sample, 41 (70.7%) of the women interviewed, lost their sight due to measles. Their loss of vision may well have been related to the nutritional level in their parents' households and the poverty situation of their parents/guardians during their childhood development. As Table 6.3 shows, shortage of food was a common problem among almost all visually impaired women interviewed.

Table 6.3: Availability of Food at the Surveyed Households of Visually Impaired Women

<table>
<thead>
<tr>
<th></th>
<th>Very Satisfactory</th>
<th>Satisfactory</th>
<th>Very Unsatisfactory</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5 (8.6%)</td>
<td>7 (12.1%)</td>
<td>46 (79.3%)</td>
<td>58 (100%)</td>
</tr>
</tbody>
</table>

Source: Field data

According to Table 6.3, 46 (79.3%) of visually impaired women were stricken by hunger. Some of them could pass a day without anything to eat, while others only had one meal a day. Breakfast for the majority of them was a mere dream. Majimbi said, "let me tell you, we never afford breakfast at all. We eat once per day. Meat for us is something we hear about from neighbours. We cannot afford to buy it. We eat only stiff porridge made of maize flour with green vegetables. We cannot afford to eat rice, except occasionally during festivals. We just put salt in food and nothing else". Mnyaso said, "we normally eat once a day. We take our meal at 3 p.m. and don't eat again until the same time the following day. There is no food to eat as the diet schedule requires. On some occasions when there is severe hunger we substitute our meals with such petty things as groundnuts or sugar cane". Majimbi's and Mnyaso's comments illustrate vividly that how they were experiencing food shortage in their households. Hunger was not a problem of disabled people only, but also affected the entire population of Dodoma region. In view of this problem, The World Food Programme (WFP) was providing food
support to schools in some of the villages visited by the researcher in rural Dodoma, so that pupils were getting porridge at 10 am and lunch at 1 pm. This support was aimed at reducing malnutrition among pupils.

*Inadequate Clothing*

As with food, clothes are a component of basic human needs. Apart from making a person look smart, clothes protect the body from exposure to cold. Chances of contracting diseases such as pneumonia for children and adults are said also to be reduced by adequate clothing. Hence, clothes are important for both personal status and good health. Observations and interviews revealed that the majority of visually impaired women lacked or had very poor clothes for themselves and their children. One of them said, "I have only one dress. At the time of washing it I usually borrow one from my mother, until mine dries up" (Marry). It was observed that the majority of them were experiencing a shortage of clothes and shoes. Many were walking on bare feet. Very few had slippers and fewer had shoes (see the photographs in Appendix). Likewise, they were lacking toilet and washing soap. Nor could they afford body oils. (Research Diary, May, June, July, September, 2000). As Joha said, "I neither have soap nor body oil. I take a bath without soap everyday".

*Inadequate Housing*

"For a non-disabled person, the environment in which he/she lives is usually barrier-free. He/she may come and go and move around without any hindrance. For the disabled person individual, however, the environment in which he/she lives may become a place of confinement" (Nzioka and Kimani, 1992).

In Tanzania, the majority of disabled persons live in the rural areas where 80 percent of the population also live (*World Bank Report*, 2001). Disabled persons living in towns and rural areas encounter various accessibility barriers in their homes and public places. In visiting the homes of the visually impaired women who participated in this research, it was possible to observe how inadequate housing created physical barriers in their day to day lives. Those living in town were found in squatter settlements where living conditions were deplorable. They
could not afford to rent decent houses. Instead, they were living in very small rooms, sometimes sharing one room with as many as four other people including their children. For some, the same room was used as a living room, bedroom, kitchen and store (see photographs in Appendix 9).

A similar situation was found in the rural areas although the design of buildings was different. In those areas, in the same room you could also find chickens, goats or calves (Research diary, May – July, September, 2000). Most indigenous houses in rural areas were built with wooden poles and mud, with mud roofing. Ventilation was often poor. As a result, the smoke from wooden fires caused respiratory illness and fostered the 'red eye' look. TGNP (1993:109) comments, "in both urban and rural areas, mud-walled (not baked brick) housing is very common, and contributes to a high state of insecurity. Thieves easily break into such houses, and many cases of rape occur within women's own homes as a result". What TGNP points out may occur to visually impaired women given that they are living in similar poor houses with no security at all. As Mdzelu said, "I don't have a good place to sleep. The house in which I live is decrepit, letting in rain. It does not have any window. It has a very weak door made of plur (thin long pieces of wood) sewn together by strings. In general, it is insecure". In some houses there were no chairs to sit on.

Most of the interviews were conducted while sitting on the floor. A number of visually impaired women had no beds, mattresses or bedding. Most of them, particularly in the rural areas, slept on hides or mats. Some of the households had no toilets. In consequence, they were using their neighbours' toilets which in some cases were very far away. Such situations created inconvenience to visually impaired women (Research Diary, May - July 2000). Lamenting about the problem of poor housing Kalumbu said:

There is a problem of accommodation. My partner has another girl friend. That girl friend of his has a baby. So the four of us sleep together in this room. I very much wish to live in a decent house, but my dear, cash is a problem. After all, how could I afford a decent house when even getting something to eat is a problem! Actually, if it were not for poverty, I would not like to share a room with a woman with whom I share a man. Anyway, God knows....
Inaccessibility of Health Care

Disabled people from poor families lack accessibility to health care but at the same time frequently suffer poor health. "Family members often become ill, and some of the diseases are potentially disabling" (Elwan, 1999:21). The problem of accessing health care is intensified by the ongoing structural adjustment programmes whereby user subsidies and policies that guaranteed free medical services have been abandoned and replaced with user charges. Every poor person in Tanzania is swallowing the bitter pill of structural adjustment in respect of health, but women, particularly in the rural areas, are worst affected, especially those heading households. This was found to be especially serious for the poor and unemployed visually impaired women interviewed in this study. Many had no savings with which to meet user health charges for themselves and their children. The outcomes were either partial or no medical services at all. Almost all of the interviewees had experienced difficulties in accessing medical care services of one kind or another. Sechelela said, "look, I am pregnant. The nurses at the prenatal clinic told me that I ought to have a delivery kit. Surely, I don't have the money to buy it. I wonder what I shall do. There is only one month left till my expected delivery date". A delivery kit consists of cotton wool, a surgical blade, an umbilical cord clamp, 2 syringes, cut gut, surgical gloves, ligno cane, dettol and spirit. It costs about Tsh. 10,000 (equivalent to 10 US $). Such an amount is very great considering that 74.1% of the visually impaired women interviewed had no reliable source of income (see Table 6.2). Apart from the delivery kit, there are other charges associated with delivery services. They include the consultation fee, operation charges in case of complications and medication. All these are largely unaffordable to visually impaired women.

Generally, treatment is very costly. For example, research in Tanzania suggests that "medical care for a simple case of malaria in low cost private hospitals and pharmacies consumes as much as half the monthly wage, and malaria is endemic among children, women and men" (TGNP, 1993:46). As the findings of this study revealed, such costs are unaffordable for any person who earns nothing. Some women had sick children and could not afford to take them to hospital. As Chausiku said, "my baby is suffering from cold and is coughing. But I do not know
what to do because I have failed to get even Tsh. 500 (0.50 US$) to buy him cough syrup". Her comments reflect the extent to which visually impaired women with children were overburdened as far as their own health and that of their children was concerned. Of the 42 women interviewed who had children, 28 (66.7%) were single parents. They were facing more difficult situations than those without children.

At the same time, there were costs associated with having no children. This can be shown by the example of Nzilamwa. Nzilamwa had lived with a partner for two and a half years without conceiving as she had wished to. Throughout this time she struggled to get money to consult a gynaecologist about her problem but was unsuccessful. Explaining her problem she said, “truly to be poor is costly. I have always wished very much to consult a gynaecologist so as to find out as to why I do not conceive, but money has been a problem. You see, it is about two and a half years now since I started living together with my boyfriend, and I have not conceived”. Nzilamwa’s cry for a child stems from the fact that women without children were stigmatised as abnormal. According to the Wagogo’s culture, a sterile woman is either divorced or her partner may decide to practice polygamy. But in addition, a child can assist a visually impaired woman in various ways. However, as Nzilamwa said, her poverty had seriously denied her medical interventions. “The rising costs of health care, which have accompanied liberalisation and cost sharing policies of SAPs, put poor women more at risk than before” (TGNP, 1993:100).

**Gender Violence**

Sexual violence was discussed in Chapter 4 of this thesis and identified as one of the major obstacles inhibiting visually impaired women from accessing and acquiring education at various levels. In this section of the chapter, it is discussed as an outcome of men abusing women sexually for a number of reasons as discussed below.

Firstly, prolonged impoverishment of women pushes some of them into exchanging sex for financial support or material goods. Such economic vulnerability increases
the power of men over women and can subject them to gender violence (Bujra, 2000; Mlawi, 2001; TGNP, 1993). Secondly, some women submit themselves to men in the expectation of marriage. On many occasions, however, this submission results in neglect, desertion, harassment and sometimes to single parenthood.

Findings from this study reveal that some of the visually impaired women interviewed experienced gender violence with devastating psycho-social effects on their lives. Kurwa, who had six children and was deserted by her partner said, "My children and I sometimes sleep with empty stomachs. I feel too burdened to take care of these children alone. But anyway God knows!" Commenting on the issue of gender violence Kimodoi (2000), a secretary of Tanzania League of the Blind (TLB) women's department commented:

Such a need for survival makes them vulnerable to the sex business as they are easily tempted due to hunger and other basic human needs. At first, men approach them with a lot of promises including marriage. But once they fall in love they are in for that. After fulfilling their sexual desire, men run away, sometimes without giving them anything. In some cases this happens when these women have either already conceived or have children. Also there is a belief among people in some Tanzanian communities that a disabled woman is free from sexually transmitted diseases, particularly HIV/AIDS. Hence, some men take visually impaired women as sexual partners on grounds that they are free from HIV/AIDS. Because of being impaired, not many men would go out with an impaired woman. But, after fulfilling their sexual desire or after staying with them for a while, or once they conceive, these men desert them.

Asha said,

You know, every man comes to you with promises of marriage. But sooner or later he disappears. You think maybe let me try to have another one You never know, not all men are alike. Again you end up being cheated. Up to now I have four children, I don't know where the fathers of three of them are, and I don't remember who the father of the fourth is. I think this is a gift from God. When they grow up they will help me.

Although this mother put her future hope in her children, there is no guarantee of this. Some of these children may end up begging in streets given their lack of
education, vocational skills and capital. Sexual abuse de-humanises visually impaired women. They were being treated as virtual cesspits where men went and fulfilled their sexual desires. In his study, Wimile (1998) observed that poor disabled women are often victims of sexual offences such as rape, sodomy and the like. When a woman engages in sex work, it is the man who will have the final say on the sex act. The cases of two of the women quoted above, Kurwa and Asha, who both had children from different fathers, suggest engagement in dangerous sexual affairs. It can be presumed that these women may have had little choice but to enter into sexual relations without precautions. Given the current epidemic of HIV/AIDS, such women were not only left with the burden of having to care for their children, but also were vulnerable to dying slowly. Ghai (2001: 30) comments that "for those experiencing the triple marginalisation of poverty, gender and disability, death is very close to life - an isolation, degeneration, anguish and pain that are matchless".

**Coping Strategies**

Having discussed the outcomes of limited access to education on the lives of visually impaired women, and the ways which this had constrained their ability to become independent and lead productive lives, we move to a discussion of the ways women have struggled to cope with limited educational provision. Poverty has been found to be the most damaging outcome. But in the midst of hardship, they still maneuvered to find some ways through which life was made possible even if very difficult. The study identified various strategies visually impaired women were using to get by. Admittedly, none of these strategies showed a possibility of breaking the chain of dependence. They were micro-activities which generated insufficient income to guarantee self-esteem and improved quality life. They were means just for survival.

It has been revealed elsewhere in this study that 74.1% of the visually impaired women interviewed were economical dependants, with the majority (50%) begging in streets. It was observed that most of the women who begged used their children or children of their neighbours as guides in going to different streets to beg. In most cases, one or both parents of those children was visually impaired. Those who
used their neighbours' children had to divide the income they generated each day into two parts, one part for themselves and the other for the families of those children they borrowed to guide them on the streets. Lulu said, "my main economic activity is begging in streets. Actually it pays. There is no day I come back home empty handed. I sometimes get Tsh.1000/- or 800/-. Because I don't have a child, as a rule I have to divide what I get every day with my fellows who give me a kid to guide me in streets". It is in this context that children are seen as very important first as a means for bringing cash home, and, secondly, as guides in moving around. As Lulu argued, those who didn't have children faced problems. Arrangements for borrowing children were not always possible. The child sometimes could be assigned other activities by his/her parents. If the parents found a visually impaired woman benefiting much from their child, a sense of jealousy could develop. As a result they could become reluctant to allow their children to be involved in the activity. As the case of Nzilamwa illustrates, a woman might wish to have her own child irrespective of her ability to take care of such a child. The need to use children for domestic chores and economic earnings seems to originate from what TGNP (1993:48) points to as the rising cost of living, which has increased the workload for women. "Women have remained responsible for domestic work in maintaining their households and families". Using children in begging may not be what these visually impaired women desire, but it shows that they are not passive victims, but rather feisty survivors. The majority of these children do not attend school, however, which can be a matter of concern. Lydia, who migrated from a rural village to Dodoma town, said:

I don't have any income. In fact there are no other activities through which I earn my living. I only depend on street begging in town. I am glad that I have come here because if I had remained in the village, life would have been much harder as there are no people from whom you can beg there. Life here is a lot better because whenever I go out begging, I at least get enough money for a kilo and a half of grain. My son has been very helpful for me in this aspect. He does not go to school because I cannot afford the costs. Although I am not happy about it, what should I do? If he could not escort me to beg in streets, what would he eat after coming back from school? Survival matters more than anything else. Actually I am afraid about his future. I'm sorry for not sending him to school. But think about food. Shall we not die without it?
Lack of education for children, caused by the inability of their parents to meet their school costs, may eventually lead to their becoming beggars like their parents. Wimile (1998:45) observed that "Shaaban Ramadhan, an 11 year old boy, refused an offer for school extended to him by one distinguished and wealthy person in Tanzania on the grounds that his grandmother with whom he was living was against it". The said grandmother was a street beggar. She used her grandson as a means for increasing cash earning. Yet the end result of his lack of schooling may be the vicious cycle of poverty across generations.

As part of the coping strategies, visually impaired women tried to seek support from non-governmental organisations. They had to work hard in searching for support before they could find organisations which were willing to assist them. In Dodoma there was an organisation called 'Upendo', which provided cooked food, clothes and medical services to disabled people. Normally visually impaired women and other disabled people got lunch from this organisation three times a week, on Mondays, Tuesdays and Thursdays. They were given rice or stiff porridge with beans. Sometimes they were given uncooked food like maize flour and beans to take home to cook for themselves. There were also some organisations and well wishers who occasionally supported them. For example, Sister Teddy sometimes provided lunch and gave uncooked food and clothes. Although visually impaired women acknowledged that such humanitarian support was very helpful, in a sense they felt humiliated by it because they knew organisation sometimes used disabled people to fundraise, collecting second hand clothes and food stuffs from donors/charitable organisations within and outside the country. Thus, visually impaired people saw themselves regarded as objects of pity and charity. Sechelela commented, "Just imagine, we go to queue to these places four days a week to be given food. I tell you, it is really embarrassing and humiliating for me. I wish I had a job to sustain myself. But my dear, hunger is something else. Nobody could have survived without food. If it was not 'Upendo' and Sister Teddy, I would have been dead by now".
Because of limited accessibility to health services the study found that some visually impaired women depended heavily on herbs and traditional healers when they got sick. Majimbi said, "there are times when I cannot afford medical costs. When that happens I normally go to my grandfather to obtain some herbs. My grandfather is very famous for traditional medicines". Many people have been helped using herbs. For example if you suffer from malaria, you can use this tree they call 'Muarobaini'. It cures more than forty different kinds of diseases. Also in case of delivery, many visually impaired women were helped by traditional midwives. Where there were no complications, delivery could be straight forward. But given the environment in which delivery took place, risks were inevitable. For example using unsterilised tools could cause infection in the baby, the mother or both.

Use of herbs and traditional midwives were found to be particularly common in rural areas where the general population was facing difficulty in accessing medical services. The underlying reasons were either inability to pay for the service or distance from such services. Mdzelu said, "I don't have money to pay for the treatment or to pay for the bus fare. Due to my impairment I cannot walk for such a long distance on my own". Health services were in most cases located in towns or in ward headquarters. That meant that only a few villages had dispensaries of their own. However even where health centres were close at hand only few had enough essential drugs, bandages, needles and syringes. Problems in the health sector for the general public, particularly in rural areas, suggest that even if people could afford services, they were seldom available. The situation was different in towns where private health services flourished. However, visually impaired women had limited access to the private alternatives where charges were high. Accessing a doctor for consultation in a private hospital costs more than buying some of the drugs. Thus, they resorted to buying drugs from pharmacies and medical stores without prescriptions.

New Pathways to Education

People have their own ideas, and feelings drawn from experience in life. Listening to them and learning from their expertise provides insights on how their situation might be improved. This section discusses what visually impaired women
themselves perceived about their educational needs and the ways they could best be met.

In Chapter Four discussion was centred on the system of education visually impaired women encountered. It was noted that there are three educational modes practised in the provision of special needs education. They include special/segregated education, integrated schools and inclusive education. Inclusive education, which was introduced in 1997, at the time of this research, was being practised mainly in two schools in Dar es Salaam as a pilot project. Thus none of the visually impaired woman interviewed received education under this model. Some had attended segregated schools, but it was impossible for the three segregated schools, 22 integrated (annexes) and 60 itinerant centres across the country to enrol all visually impaired children of school going age in Tanzania. The total enrolment capacity of these institutions was just 1,313 every year (Ministry of Education and Culture, 1998). According to statistics, there are currently about 240,084 visually impaired children of primary school going age, 122,443 girls and 117,641 boys. This means only a negligible number (0.55%) have access to primary education every year (Hagrass, 1997; Human Development Report, 2002; Institute of Education, 1984; the World Bank Report, 2001; WHO, 1980). Although only estimates, these figures signify that unless some radical changes in the educational system are made immediately, the envisaged educational goal of education for all visually impaired children in Tanzania will not be met. As a UNESCO report notes, the situation in Tanzania is applied more generally:

Experience, especially in developing countries, indicates that the high costs of special schools means, in practice, that only a small minority of students, usually an urban elite, benefit from them. The vast majority of students with special needs, especially in rural areas, are as a consequence provided with no services whatsoever. Indeed, in many developing countries, it is estimated that fewer than 1 percent of children with special educational needs are included in existing provision. ...there are million of adults with disabilities who lack even the rudiments of basic education. It is particularly important to recognise that women have often been doubly disadvantaged, bias based on gender compounding the difficulties caused by their disabilities (UNESCO, 1994:62).
It was after carrying out in-depth interviews with visually impaired women about educational obstacles they faced in accessing and acquiring education, and the outcomes of those obstacles experienced, that the notion of inclusive education was considered as an alternative model.

_Inclusive Education_

Inclusive education is a notion which originated from the Salamanca (Spain) meeting in 1994, where different stakeholders in the international educational affairs sat down to discuss the best ways of providing education for all children with special needs world-wide. Elaborating on the meaning of inclusive education, UNESCO (1994: 61) states:

The fundamental principle of inclusive schools is that all children should learn together, wherever possible, regardless of any difficulties or differences they may have. Inclusive schools must recognize and respond to the diverse needs of their students, accommodating both different styles and rates of learning and ensuring quality education to all through appropriate curricula, organisational arrangements, teaching strategies, resource use and partnerships with their communities. There should be a continuum of support and services to match the continuum of special needs encountered in every school. Within inclusive schools, children with special educational needs should receive whatever extra support they may require to ensure their effective education. Inclusive schooling is the most effective means of building solidarity between children with special needs and their peers. Assignment of children to special schools - or special classes or sections within a school on permanent basis - should be the exception, to be recommended only on those infrequent cases where it is clearly demonstrated that education in regular classrooms is incapable of meeting a child's educational or social needs or when it is required for the welfare of the child or that of other children.

Thus, inclusive education entails enormous resources to be mobilised to meet the diverse needs of disabled children. For children with visual impairments, special educational needs requirements include well trained specialist teachers, as well as such special facilities as adapted computers, embossors, Perkins braillers, thermoforms, inter-lining frames, braillon, manila papers, tape recorders, compact
According to an interview with the Commissioner for Education (2000), the cost of education for one child at a primary day school was Tsh. 97,000/- per year; and at secondary school Tsh. 400,000/- per year, not including teachers' salaries. The costs for a visually impaired child are four times this. Due to such high costs, it is argued that embarking on inclusive education in poor countries like Tanzania will remain an elusive goal for now (Kalabula, 2000). This is all the more true given that special needs education in developing countries to a greater extent is still donor funded with very low participation of parents, communities or states. But such ideas are greatly criticised by Stubbs (1996) and others. For them, minimal resources and lack of resources are not the main obstacles to successful inclusion. Stubbs (1996) argues, "in fact, disability programmes seem to thrive best when resources are minimal, and community self-reliance is optimal". Stubbs (1996) does not overlook and dismiss the importance of resources and materials for the successful implementation of inclusive education. However, she insists on the political willingness to include these programmes in mainstream development plans. The interviews with visually impaired women concurred with the latter idea, that what is crucially required is a collective moral and material commitment of families, communities and states to create an inclusive educational system. That means that every member of the society has a role to play if inclusive education is to be successful.

*Role of the Society in Inclusive Education*

The importance of parents/guardians in shaping the lives of an individual should not be over-emphasised. According to the views of visually impaired women the future of an individual and his/her place in society is influenced by the socialisation she experiences. Her family plays a decisive role as a primary agent of socialisation. Love and care, acceptance and overprotection are crucial issues in socialisation. The future of an impaired child depends largely on the reactions of parents to the onset of impairment and the measures that follow this. Generally the views of visually impaired women were that they needed love and care from their
parents as well as acceptance and exposure to challenges that would develop their talents and potential so that they could become useful members of society. They believed that education matters greatly because it is the source of knowledge and skills to combat illiteracy, ignorance and poverty which limit one's avenues to development. As already argued, education is expensive. Kashindye said:

In case of scarce resources parents ought to allocate it to the education of their visually impaired daughters because while the other members of the family can earn their living through other different means, the employability of their visually impaired daughters depends entirely on the extent to which they had achieved in education. Parents ought to know that costs of staying with an illiterate impaired girl are much higher than giving her education, because feeding and taking care of the person for the whole of her life is not only costly but may also lead to suffering after their deaths. In the same vein, those with good income should aim at giving their visually impaired daughters good education even if it means sending them to better private schools.

As noted in Chapter Five, 12 (20.7%) visually impaired women had never attended any school. Among the reasons given were poor infrastructure, poverty and inconvenience of travelling long distances. Some visually impaired women dropped out as a result. The interviews revealed that some of these problems could be minimised if there were schools at their localities. As Ng'atilwa commented: "I didn't get any education because my parents were unable to meet the transport costs for me and for the escort. I used to cry every time when I saw my friends from my village going to school". Hence, visually impaired women argued that community schools were best and that it should be ensured that all children had access to them. But, this could only be achieved when the society had removed all physical barriers and had changed negative attitudes about the educability of a visually impaired woman. Therefore, schools must be flexible in accommodating varying needs of different categories of disabled people. Marchesi (1994:1) comments, "...when the mainstream school attempts to integrate children with special needs, it will have to contemplate a change in the way in which education is put into practice at the same time. A change, a reform, which must be based on the principles which uphold special education". This requires all communities allocating resources, including meeting the costs of education for those visually impaired children whose
parents prove unable to do so. Interviewees also argued that local governments should consider setting comprehensive and appropriate programmes in place to support the educational needs of visually impaired girls.

In line with changes of educational provision at the local level, visually impaired women also had several recommendations directed towards central government. One of these related to fees. The question of cost sharing in education was one of the problems noted as inhibiting their inclusion. As the case of Wendo in Chapter Five illustrates, most of these women faced great hardship in their search for school fees. Such a situation led to the thinking that government should waive fees in special needs education in order to make schools inclusive for all. Furthermore, if there were to be inclusive schools at different localities, all teachers must be trained in special needs education. Therefore it became obvious from the interviews that the government could not successfully embark on inclusive education without introducing a special needs course in all teachers training colleges.

As noted elsewhere, most of the visually impaired women had no reliable sources of income. It was a matter of concern to them that they lacked appropriate skills to compete in the labour market. They believed this could be minimised by introducing vocational education in the school curricula so that after leaving school at different levels they would have acquired practical skills to apply in their daily living. Emphasising this point, Chausiku said, "During the cold season here in Tabora, people struggle to get sweaters for their children. Had I learned how to knit while I was in school, I would have been knitting sweaters to sell to these people. I am sure I would have been earning my living out of that business. But poor me! I didn't learn how to knit because the school I attended didn't offer handicraft classes".

The current trend in disability and development is to establish partnerships between government and non-governmental organisations. Disability needs to be seen as a developmental issue included in all developmental programmes and disabled people should be considered in the process. Emphasising this point Yamazaki (2001:45) comments, "partnership should be a relationship in which
those involved are equally valued and respected. Therefore, it should be understood as a process to pursue mutual benefit rather than a static relationship in which one is depending on the other”.

Visually impaired women believed that development agencies and non-governmental organisations were very important for supporting and promoting inclusive education through joint endeavors with the government. But it was believed that organisations like TLB should take the lead in matters concerning education for visually impaired women. Such NGOs should put pressure on government to ensure that there is an improvement in special needs education services in terms of access, equity and quality.

In general, the views of visually impaired women accord with what Kalabula (2000) says:

The theoretical interest shown in special education should be backed up by practical action to make the dreams come true. Dependency on donors or the present day co-operating partners should be minimized. The African governments must budget for special needs education. It is better to spend a lot of money now on educating special educational needs children to make them self-sufficient in their lives to avoid their perpetual dependency on the state’s handouts for the rest of their lives. Although it is a myth now, it can be realised if barriers in one individual's mind were broken and if this 'barrier busting syndrome' was emulated by the next person, yet another.

Summary and conclusion

In this chapter it has been shown that illiteracy, ignorance, unemployment and poverty are some of the major problems facing visually impaired women in Tanzania. The problems are complicated and are the result of many factors, one of the most important of which is a largely inaccessible educational system. I have argued that the general economic crisis experienced by Tanzania has undermined the ability of the government to provide social services for the general public. However, within this context there appears to have been particular neglect of the
educational needs of visually impaired women. Although the government has championed the need for integrated education, in practice it has catered for the schooling of only a tiny minority of visually impaired women.

It was the view of those women interviewed that their limited educational opportunities have had significant impact across all spheres of their lives. A considerable number of them cannot read and write and hence remain inadequately informed citizens. A lack of information means that they are often ignorant of many issues to the extent that they are unable to make informed decisions and choices. Moreover, illiteracy has contributed to visually impaired women's unemployability, denying them the means to raise income necessary for independent living. These women believed that a form of inclusive education was the best model for meeting the special needs of visually impaired children in Tanzania. Under this model all visually impaired children could attend school within their localities and could learn along side with their siblings and peers. This would ensure that every child of school going age had access to school in the community where she/he lived.

Of all the outcomes of their limited educational opportunities, those who were interviewed believed that income poverty was the most serious problem. Abject poverty had greatly exacerbated the difficult conditions in which visually impaired women found themselves as far as their survival and other basic needs were concerned. But the women interviewed were not passive recipients of their fate. This chapter also explored the coping strategies which they adopted in their fight for survival. Many had turned to street begging which, as Lulu pointed out, kept them going, although not very satisfactorily. In some cases, children became useful resources for bringing income home and for guiding them in streets. The use of children in begging may not be what they desired but signifies their determination to survive.

Although many of the visually impaired women interviewed firmly believed that the problems they faced were related to their lack of schooling, the issue is necessarily complicated. The obstacles they encountered in accessing education and
remaining in school necessarily put them at a disadvantage. Indeed the potential value of education is illustrated by the small number of women in the sample who had completed secondary school, secured jobs and were able not just to support themselves but also to contribute to the welfare of their families. But this not to say that education of itself or on its own is always a guarantee of a ladder out of poverty. Once having secured an education, visually impaired women often continue to face discrimination and institutional obstacles. Education may be part of a solution, but there is also need for broader changes in attitudes towards disabled people and discriminatory practices by employers and others. In any case our study was not extensive enough - nor indeed have enough visually impaired women completed secondary education across the country as a whole - to permit evaluation of the independent benefits of education. But it is important not to underestimate the value which disabled women themselves placed on education as, at the least, opening up the possibility of new opportunities and greater personal independence. Indeed, Katulushi (2000: 251-52) regards an empowering education as necessary in dealing with "moments of crisis" as well as developing "critical skills necessary in complex socio-economic, political, moral and religious contexts".
CHAPTER 7
THE DESIGN AND IMPLEMENTATION OF EDUCATIONAL REFORMS WITH RESPECT TO VISUALLY IMPAIRED WOMEN IN TANZANIA: THE WAY FORWARD

Introduction
This study has explored cultural, social, economic, political and physical obstacles inhibiting accessibility of visually impaired women to education in Tanzania. It has aimed to reveal those obstacles and examine the ways in which they contribute to the denial of those women's access to education. The study has demonstrated that the problems associated with visually impaired women gaining full access to education are complex. They are complicated by gender discrimination and attitudes targeted at their impairments. It has contributed to knowledge and theories about gender, disability, education and development. The study has clearly shown that the obstacles visually impaired women face in accessing and gaining education are not caused by their sex or impairment but by society's failure to provide educational and other social services for them. These findings have emerged through examining the lived experience of visually impaired women in relation to their struggle for education. In this way, the study has raised the voices of those unheard and has placed them at the centre of a social theory of oppression. It is clear that education is a powerful tool for the empowerment and development of visually impaired women. It is not an alternative to charity; rather it is a fundamental human right.

Contextualising the Social Model within the Study
As discussed in Chapter 1, there is much debate among disability activists adhering to the social model concerning the neglect of the lived experience of the body in the theorisation of social exclusion (Morris, 1991; Oliver, 1996; Thomas and Corker 2002). According to Tremain (2002:33), social exclusion of disabled people occurs as a result of "disadvantage or restriction caused by a contemporary social organisation that takes little or no account of people with impairments". This applies to the special education needs of visually impaired people in Tanzania,
given that of the 240,084 visually impaired children of school going age (122,443 girls and 117,641 boys) only a negligible number (0.55%) have access to primary education each year. Lack of learning/teaching facilities in appropriate formats, negative attitudes, inaccessible buildings, distance and inaccessible transport are all manifestations of society's failure to address the educational needs of visually impaired people, the consequences of which are particularly adverse for visually impaired girls/women. Visually impaired women in Tanzania have little access to education due to the restrictions of the social organisation that pays little attention to their needs. As Vernon (1998:249) points out, "...disabled people constitute an oppressed minority on the basis of their collective experience of discrimination in a society which fails to take account of their specific needs".

Alongside with the ways in which social responses to impairment shape the lives of visually impaired girls/women, the study found that their impairment contributed to restricting their participation in some community activities. Vernon (1998) asserts that "...there are many disabled people for whom working is difficult in consequence of their impairments....". This is a serious issue in developing countries where many still earn their living through traditional means such as digging, grazing animals, fishing, hunting, fetching water, collecting fuel wood, etc. The organisation of these activities restricts the participation of people with certain impairments. The study has demonstrated how a combination of social exclusion and restrictions caused by impairment has resulted in poverty. Most of the life options for illiterate and poor people in developing countries are energy consuming requiring physical body fitness. The findings of the study support the argument of Vernon (1998:251) that "...impairment is significant in shaping individual experiences of disability". Thus in order to best understand experience of disabled people, particularly in developing countries, the social model of disability has to include 'impairment' in its theorisation.

Gender and Disability Issues Emerging from the Findings in Relation to Education and Development

Gender inequalities and stereotyped attitudes towards impairment, present in any culture, are products of socialisation. They are not fixed, but change with time
depending on the level of development and its accompanying social order. Within a particular community there can be variations in cultural prescriptions from one period to another and from one ethnic group to another. What might be regarded as unpleasant in one culture may not necessarily be so in another. For example, the Wagogo practice genital mutilation and see it as a matter of pride. On the contrary, Wanyamwezi regard it as an injustice. In a sense, the culture of any community can be thought of as a vast, generally invisible, social control system that programs individual members of the group to act in a particular way favored by the group as a whole, and to become ultimately an expression of the group’s ideal. As Murphy, (1990, quoted in Hagrass, 1997:83) puts it:

...the mental constructs by which we make sense of society are loosely related (sometimes inversely) to what is really going on. We take these conventional views of our social system as matter-of-fact, true representations of social reality, but they are socially constructed realities, human artifices whose purpose is to perpetuate society, not clarify it. In addition, they do so, not by casting a clear light on social life, but by rendering it opaque, even mystical. Because of this, the collective illusions by which we live are vulnerable, fragile, transient. The social order is in good part a mental order, and all disturbances of society involve perturbation of the mind, and vice versa.

Culture defines what is legitimate and what is not, and rewards and punishes those who do or do not conform. According to Mbunda (1991), at the heart of culture is its ideology and its system of ideas, special belief, and values. The power of ideology as a social control mechanism is that it operates, not by force, but by consent, usually unconscious consent. And the message is transmitted all the more effectively because it comes through institutions perceived as neutral e.g. churches, schools or social clubs.

Culturally, both Wagogo and Wanyamwezi have certain normative expectations of a normal woman. Those who depart from the norms of an ideal woman are labeled as deviants. They are regarded as subordinate individuals. For Corker and Shakespeare (2002), subordinate groups are defined by their bodies, according to norms that diminish and degrade them. Such aesthetic scaling of bodies is not only
central to the construction of difference, but it also underpins the processes of oppression. Women, for example, who are sterile, are labeled as deviants in both cultures. They are defined as unfit for marriage and if married are subject to divorce. Among the Wagogo any uncircumcised woman is stigmatised and regarded as not suitable for marriage. Thus Koda and Mukangara's (1997: 57) comment that, "girls who are not circumcised are less respected even after bearing children or getting married. FGM is associated with ancestral and spiritual powers which cannot easily be ignored". Such a belief makes the campaigns against FGM in Dodoma and other areas in Tanzania where it is practiced unsuccessful. Men fear to marry uncircumcised women even though they may look beautiful. Although less so now, in former days a man who married uncircumcised woman would be mocked through ceremonial dances and songs. Occasionally such a man would suffer isolation by his family and the community at large. By virtue of the cultural values and norms of the Wagogo and Wanyamwezi, any visually impaired woman is considered as abnormal and lacking qualities to fulfil the nurturance roles of a normal woman. These cultural constructions of ideal women are transmitted from one generation to another through socialisation. This perpetuates the subordination of disabled women.

Both the Wagogo and Wanyamwezi are partrilineal societies. They see men as strong and courageous and women as gentle and weak. Men own virtually all basic resources, including houses, farms, livestock and major tools of production such as bows and arrows, hoes, axes, sickles, and spears. They also own women, by virtue of bride price. Hence, women are valued as sources of wealth for different families. That is the justification for treating them unequally. Women own gardens, pots, baskets, domestic utensils, beadwork and other ornaments. Differences in roles between men and women in these cultures are described in ideologies of masculinity and femininity. Certain activities are traditionally defined as more masculine e.g. hunting, fighting and guarding. Others are defined as more feminine such as fetching water, collecting wood fuel and cooking. Such engendered roles consequently lead to variations in the development of men's and women's capabilities and opportunities for education, training and employment. This results in what Elson (1991) calls "male bias in the development process".
Visually impaired women’s experience among both the Wagogo and the Wanyamwezi, is one of invisibility. The loss of sight of visually impaired women relegates them to a position of deviance that exacerbates the already weak position of women in society. They have been labelled with different names such as vivimbi vya wima or vidula. As Khalfan (2001:6) comments, “... all of these names show negative and diminutive aspects and disregard the status of people with disabilities”. He continues by arguing that “the importance of definitions is more than a matter of semantics since they can influence the way in which people with disabilities are seen by society and by themselves. They also influence the type of provision made to meet the needs of persons with disabilities”. In both cultures, visual impairment is found to be particularly damaging, as it is associated with darkness. Among the Wagogo and the Wanyamwezi, loss of sight creates heavy dependence on sighted people. The mental constructs by which the Wagogo and the Wanyamwezi make sense of a visually impaired person serve to dehumanise their personhood and status, consequently defining no positive roles for them in society. Such culturally embedded views are transmitted through socialisation to younger generations. In consequence, there are visually impaired women who have developed hard feelings about their impairments. Some of them experience isolation from their siblings, parents and the community at large and receive little support.

The question of minimal role expectations for visually impaired women affects even their nurturance role. While visually impaired men are assisted to marry and raise a family, visually impaired women are denied these opportunities. Marrying involves paying a bride price which for the Wanyamwezi and the Wagogo is a good number of cows and goats. In cases where suitors do not have flocks or herds, a great deal of money is charged. Cows and goats or money are a very important source of wealth in the Wagogo and the Wanyamwezi. Sometimes the bride price amounts to as many as 40 cows, depending on the beauty of the bride. The parents of a visually impaired man are willing to help their son marry as part of the efforts to make him independent. The wife(s) married are then engaged in the economic activities of farming and rearing cattle. Through income earned with the
support of his wife and children, a visually impaired man becomes a successful member of the community. On the contrary, visually impaired women are regarded as worthless commodities and their parents have little hope of receiving any bride price for them.

It appears that non-disabled men are not interested in marrying visually impaired women because of fear of being laughed at and mocked on grounds that it would be difficult for their wives to fulfil their role of bringing up children. Also there is a belief among members of the community that visually impaired women are liable to give birth to children with visual impairments. This further diminishes their chances of marrying sighted men. In addition, it is assumed that visually impaired women may not be able to fulfil such engendered roles as fetching water, cooking, collecting fuel wood or digging with a hoe.

As Table 2.6 illustrates, no visually impaired woman in this study was living with or married to a sighted partner. In the interviews, some revealed a fear that sighted men would mistreat them. The study found that visually impaired women were the preferred marital partners of only poor visually impaired men who were unable to pay for bride price to marry sighted women. However, many such couples just ended up living as partners without having gone through official marriage procedures. That is to say, no arrangements had been made in conformity with customs. In the cases of such informal arrangements observed in this study, parents and guardians seldom visited them, showing that the union had not been blessed or accepted. Most of visually impaired men who marry sighted women are either from well-to-do families or are themselves better off economically or have certain social status. This is particularly true of those who have acquired a higher level of education. When this happens, official arrangements are made in accordance with customs and their unions are blessed. Lack of efforts to remove physical and cultural barriers and encourage the participation of visually impaired women in various activities perpetuates their vulnerability and exclusion, not only in marriage but also in other aspects of their lives.

Hagrass (1997) explores how the experience of visually impaired women reflects the power relations which are exercised to control their bodies. As Shah (1992:20)
points out: "... loss of sight for a female is almost always accompanied by loss of status, privileges, and rights both in society and within the family". This study confirmed that some of the parents/guardians overprotect their visually impaired daughters but at the same time fail to develop their potential (refer to Boxes 5.1 and 5.2), given that a visually impaired woman is simultaneously considered as a shame in the family and a non-productive member. This is the reason behind many parents/guardians considering that investing in visually impaired girls' education is useless.

As was pointed out in Chapter 5, parents favour boys getting education on the grounds that they are potential breadwinners, which means they are a good investment. Such attitudes make visually impaired girls feel that they are uneducable, invalid, inferior, unable to live a full life, unable to make any decision about themselves, a burden to society and that their needs should be met through charity. Thus, they become viewed and come to view themselves as incapacitated individuals in all spheres of life. This raises a very significant question about how these girls can improve their self-image. The question needs to be addressed, as it is through such attitudes that visually impaired women come to be at the bottom of the barrel and it is here that their image needs to be overhauled.

Gender discrimination in education experienced by visually impaired women problematises their full engagement in productive activities. They are denied knowledge and skills required to succeed in wage employment and self-help income generating projects. Due to restricted participation in economic and development processes, many of them have failed to obtain income to live decent lives. Consequently the majority of them have resorted to begging, particularly in towns, in order to survive. The problem with begging is that, apart from being dehumanising, it denies many of the children of these visually impaired women their right to education. This is, firstly, because their parents are too poor to meet their school fees; and, secondly, because these children are crucial in guiding their parents/guardians in begging as well as helping them with domestic chores (girls especially). This brings about a vicious cycle of poverty. Mass poverty affects disabled women the most in that they are the poorest of the poor.
Poverty discredits their status contributing to their poor self-image. In contrast, education plays an important role in raising the self-image of disabled women. It becomes a tool for empowerment and a sign of individual achievement. Hence, the persistence of negative attitudes about visually impaired girls' education means that these women are continuously denied tools with which to engage in the development process as productive individuals. In this context, we can argue that the politics of gender and disability affect the access of visually impaired women to education and thereby their participation in the development process.

**Main Policy and Research Issues Emerging From the Study**

This section highlights deficiencies of several policies and Acts relating to education whose impacts have had severe outcomes, firstly, for the access of visually impaired women to education and, secondly, for their independent living. Those policies are Special Needs Education, Adult Education of 1970, Universal Primary Education of 1974, the policy of Expulsion of Pregnant School Girls as implied in the general Act of Education of 1978, Education For All of 1990 and The Reform Policy of 1995 which introduced cost sharing as part of the structural adjustment policies.

What has been found in the study is that the perception and attitudes of the Wagogo and the Wanyamwezi communities towards gender and impairment and their implications for the education of visually impaired women are a reflection of the society more broadly. According to Bagandanshwa (1993), many people across all segments of Tanzanian society still consider disabled people to be unproductive and hence unable to play a significant role in community development. Disabled women are objects of particularly negative attitudes in society. Such perceptions not only affect visually impaired women directly, but they also negatively affect the planning and rendering of services for them in society.

Throughout the study, it has been seen that the educational needs of visually impaired women have received little attention in terms of the design of special needs education in the country. Both politicians who make policies and technocrats who implement them would seem to have attitudes which overtly or covertly are indifferent to the educational needs of visually impaired women. There is a belief among the politicians and technocrats that disabled people ought to depend on
their families for everything. They hardly recognise disabled people as potential contributors to the socio-economic fabric of the country. They have instead perceived them to be passive recipients of special services and financial benefits. To be more precise, disability is yet to be considered by politicians and technocrats as a developmental issue. It is rather regarded as an object of charity. Hence, education is not provided to disabled people as their basic human right but rather as some sort of a favour.

Special Needs Education Policy
From the inception of provision of education for visually impaired people, under the church in 1950 and later in 1970 when all schools were nationalised, there have been no special needs education policies developed from which comprehensive programmes could have been designed to give special needs education a priority in all development plans. Provision has been ad hoc without paying attention to specific needs which visually impaired people have and which need to be taken on board in order for them to access to and gain education in an equal basis. Special needs education is managed under one small unit established in 1970 without even a status of a directorate. It exists as an advisory body to the Commissioner for Education, with quite limited decision making powers. Although different levels are grouped under one unit, there are no specific desks for these levels within the unit, e.g. secondary education, teachers training, adult education etc. Thus the structure of special needs education does not reflect the structure of general education. For example, the administration of special education at primary level is detached from mainstream management and administration. Officials responsible for certain duties in mainstream education are not necessarily responsible for the same duties in special needs education services.

Because there is no liaison between the Special Needs Education Unit and the power structures in the general education services, there is considerable ambiguity of roles and duties as between different authorities and positions (Bagandanshwa, 1997). For example, in 1972 all public primary schools were decentralised to local education authorities, who were then responsible for planning, establishing and managing all public schools providing primary education (Mkaali, 1996). But,
special needs education remained centralised and thus detached from the local levels. In consequence, local governments do not feel that special needs schools are supposed to be solely run by them. This is reinforced by the fact that such schools enroll students from different parts of the country. This view was supported by the Zonal Special Needs Education Inspector who explained that there was a great problem of co-ordination of special needs education, given that all primary schools enrolling visually impaired pupils were situated in just one of the districts of the region. It was difficult for that particular district to spend its levy on children who were not residents of it. Pupils from the rest of the districts within the region and outside it suffered a lot if their local authorities did not send money to support them. Those pupils sometimes dropped out because of the failure of their respective District Education Authorities to remit funds in time. Sometimes they never provided funds at all (Nondi, 2000).

Special needs education sector is left largely in the hands of charity organisations and churches which give support in terms of equipment, teaching-learning materials, etc. The government just pays the salaries of teachers. There is no adequate budgeting to cover the costs of education in special needs education. Commenting on this problem, the headteacher of Buigiri School for the Blind said,

For the past five years, that is, from 1994, the government completely stopped sending subsidies to schools enrolling disabled students. But since 1999 it has started giving subsidies again. However, the subsidies provided are quite unsatisfactory. For instance in November 1999, my school, which has 61 pupils, received only Tsh 399,999/- as a general fund for an indefinite period. It is indefinite because it did not define the period which was to be covered whether a month or a year. But from my experience this can mean a budget for the whole year (Hosea, 2000).

When research for this study was being carried out in Dodoma, nine months had already passed since Buigiri School had received government assistance. Hence, the provision of special needs education continues to be in accord with a charity model with financial and material support coming from charity organisations and churches within and outside the country.
Also, lack of special needs education policy has made it difficult for the government to enforce the compliance of parents/guardians to take their visually impaired daughters to school and to incur expenses for them. Existing laws only require parents/guardians to take their non-disabled children to school. Given that girls’ education has traditionally been not a priority, when a daughter has an impairment the prospect of her being sent to school diminishes further. As Boxes 5.1 and 5.2 illustrate, many parents/guardians do not feel duty bound to send their visually impaired daughters to school, and the community around them shares the same attitude. However, when state provision is made available, some parents/guardians take it, and indeed in some cases see it as a great relief. The example of Matika reveals this. She said, "My parents always regarded me as a burden and would wish me to go back to school immediately. They kept on asking me when the school would open again".

From the local up to the central government, there are no comprehensive plans and co-ordination strategies to meet the educational needs of visually impaired students. This is evident even in the general policy reform of 1995, which did not include the special needs of disabled people. This reflects the extent of lack of political will to prioritise the needs of this sub-population as a developmental concern. According to the Commissioner for Education, special needs education was overlooked when the 1995 Education and Training Policy was being designed. The policy was drafted without involving or consulting professionals in the disability field or disabled people themselves. This is in accord with what Coleridge (1993: 4) has observed:

Programmes and projects in disability, especially in developing countries, are still in the main designed exclusively by able-bodied people, and tend to leave disabled people out of the decision making process. The case for regarding disabled people as an integral part of the development process, capable of running their own lives and acting as full partners rather than passive recipients of rehabilitation, has hardly been made.
Inclusion of disabled people through participatory approaches remains an as yet unmet challenge. We argue that the lack of awareness of disability issues on the part of development agencies combines with traditional values to exacerbate the marginalisation of disabled people. The principles underlying participatory development are human rights and equity. This approach locates the locus of development in people; it stresses that all people have equal rights to better conditions of life and livelihood and argues for the rectification of existing imbalances in social, economic, and political power. Proponents of participatory development argue that people should become subjects of the development process, analysing their own needs and deciding their priorities, rather than being objects, and that their knowledge should be valued and utilised. The concept of participatory development seeks sustainability through collective efforts of people. Its strength lies in its efforts to support people to empower themselves and to ensure that their priorities are reflected in the objectives of development activities (Friedmann, 1996; Oakley, 1991; Yamazaki, 2001).

Adult Education Policy of 1970
The post-colonial government started to put emphasis on the education of the adults who for one reason or another had not accessed education under the colonial education system in 1970. Special attention was given to the access of women who were the most disadvantaged under the colonial educational system. The intention was to bring about gender balance. In Tanzania, adult education concerns itself primarily with the provision of literacy and numeracy. The importance of adult education lies in its positive relationship to the learning process, enhanced productivity and socio-economic development. According to the Ministry of Education and Culture (1995:83), the objectives of adult education are:

- To eradicate illiteracy, sustain post-literacy and numeracy;
- To promote the acquisition and development of basic knowledge and functional skills relevant for personal development and life in the community;
- To lay foundations for life-long education;
- To ensure the realisation of the basic human right of “Education-for-All” and to complement formal education.
Although there are three adult education programmes in Tanzania - e.g. basic and post literacy, functional literacy (acquisition of life skills) and continuing education - the programme of relevancy to the study is functional literacy. Up to 1985, illiteracy decreased to 11% among women.

However, literacy classes for visually impaired people have never been established in Tanzania. The issue of combating illiteracy for adults in special needs education has never been articulated. Even the 1995 reform policy does not address it nor have there been any efforts to make adult education for visually impaired people a priority in various community based development programmes. Due to the need for specialist teachers, Braille materials and equipment, it has been impossible for visually impaired people to be enrolled in mainstream literacy classes conducted all over the country under community based education. As a result, visually impaired girls/women who have been bypassed by the formal educational system are left without any means to gain literacy and numeracy skills as adults. Thus the government has failed to fulfill its objectives in so far as adult education of visually impaired people, and particularly women, is concerned. In consequence visually impaired girls/women are continuously being denied their right to functional skills that would on the one hand combat illiteracy and on the other raise their productivity in the labour market.

Universal Primary Education (UPE) Policy of 1977

Both adult education and UPE were part of the education for self reliance policy declared in the Arusha Declaration. Such measures aimed at giving the individual learner skills that would be of relevance for meeting the goal of self-reliance. Just as in adult education, the main emphasis of the government was to ensure that girls who had been disadvantaged under the previous educational system had equitable access to basic education. Fees which were one of the major constraints were abolished. UPE meant that all children of school age had the right to be enrolled in primary schools; and standard seven was considered a terminal and not a transitional stage for a secondary school. The education provided was to be directly connected with agriculture and homecraft skills. The idea was to help those pupils who would not be selected to join secondary schools engage in productive
activities. That entailed a need for adequate schools, teachers and teaching/learning facilities, all of which required adequate resources, greater involvement of communities and political commitment. Schools were opened in almost every village in collaboration with central and local governments and communities. Teachers were trained under crash programmes with the government allocating more resources for the expansion of the primary education sector. These efforts led to the full parity of enrolment between female and male pupils in 1985.

The achievements however scarcely benefited visually impaired female pupils given the few schools that catered for their needs and the fact that the majority of such schools were, and still are, urban based. Accessibility to education remained minimal for visually impaired children in the rural areas, since most could not attend schools due to poor infrastructure and costs. There were no funds to enable service workers to travel to the countryside to identify and carry out needs assessment. For visually impaired girls, long distance from rural areas to urban schools created an additional barrier, which made their parents fear letting them go to school. Many parents could not afford to escort their daughters. Hence, UPE did not address accurately or adequately the educational needs of visually impaired people in the rural areas, particularly women. As a result, relative to their male counterparts, only a very small proportion of visually impaired women obtained an education under UPE leading to further gender disparity (see Tables 4.5 and 4.6).

The Policy of Expulsion and Exclusion of Pregnant School-Girls as implied in the 1978 Education Act

Although girls’ vulnerability may sometimes result in pregnancy, the laws are not sympathetic. Schoolgirls are penalised even in circumstances where they fall innocent victim of rape. According to Mlawi (2001: 9), there is a general clause in the Education (Expulsion and Exclusion of Pupils from Schools) Regulations of the Education Act of 1978 which states inter alia: “that expulsion of a pupil from a school may be ordered where the pupil has committed an offence against morality... or where a pupil is guilty of persistent and deliberate misbehaviour as to
endanger the discipline or good name of the school". Mlawi (2001:10) also notes that according to a ministerial circular issued to heads of secondary schools, "acts that warrant expulsion of a pupil from school among others include the act of getting pregnant, and the act of impregnating a girl". The circular overlooks, however, that pregnancy may sometimes occur in the absence of the consent of a girl. Finding both the girl and the boy at 'fault' fails to take account of circumstances where a girl has fallen victim to coercive sex.

According to Mlawi (2001), about four thousand girls at the primary level drop out of school due to pregnancy every year in Tanzania. This study encountered a number of girls who had been expelled or had dropped out of school due to pregnancy both at primary and secondary levels. The boys responsible invariably remained untouched due to lack of proof. Interviews with schoolteachers revealed many such cases of expulsion of visually impaired girls. In all of the schools visited during the study, there was only one instance where both a boy and a girl were expelled. For the rest, it had been apparently difficult to prove the identity of the boys, even when they had been named by the girls as responsible. As Box 5.6 illustrates, these girls were sometimes victimised by their teachers who should have been in the front line in teaching them good behaviour and moral standards. Sampa (1995) cites evidence of this situation in many African countries. She gives the case of one schoolgirl who got pregnant:

I was in grade 9 when I got pregnant. The man responsible was a teacher of my school and he used to tell me that he loved me so much that he could not do without me. He bought me food at school and took me to movies out of school hours. But, as soon as he learnt that I was pregnant, he started avoiding me. When I managed to talk to him once, he threatened to beat me up if I ever told anyone that he was responsible. I was so scared then, that even when I started showing and had to stop school, not even my mother knew the person responsible. Later, I told my parents, who got so mad, especially that the person responsible for the pregnancy was a teacher who should have known what the results would be. They reported this to the school authority, and the only thing that happened was that this man was transferred to another school. I thought, he too would have been fired, suspended or demoted. But 'not'.
The problem is that those with power to make decisions in most cases are men, and male teachers head most of the schools. In such situations, these men often appear more concerned to protect their fellow teachers than to ensure that justice is done. Although there has been debate in Tanzania about amending the policy so that after giving birth, girls can be readmitted and complete their studies, the proposed changes would only affect those girls proven to be victims of coercive sex. Given the difficulty of proving lack of consent however, pregnancy will continue to be a bias for gender disparity in special needs education.

Cost Sharing Policy of 1995

Cost sharing is a sub-policy of the 1995 Education and Training Policy Reform which was part of the Structural Adjustment Policies introduced in Tanzania to alleviate the socio-economic crisis that has faced the country since 1970s. Cost sharing re-introduced school fees, further exacerbating the gender gap in special needs education. Although the 1995 policy reform document pleads for the marginalised, no affirmative action has been taken to fulfil the commitment. There are dilemmas and contradictions in attempts to safeguard the educational needs of the poor. Note, for example, the following two contradictory extracts of the policy:

Certain groups of individuals and communities in society have not had equitable access to education. Some have not had access to this right on account of their physical and mental disability such as the blind, the deaf, the crippled and mentally retarded. Therefore, government shall promote and facilitate access to education to disadvantaged social and cultural groups (Ministry of Education and Culture, 1995:18).

However, it increasingly became apparent that the government did not have enough resources to continue financing free education, hence, the re-introduction of school fees and direct costs. This situation calls for a more effective financing plan in which emphasis is re-directed at cost sharing and cost recovery measures with NGOs, private organisations, individuals and communities (Ministry of Education and Culture, 1995:90).

The first excerpt suggests that the government was prepared to protect the educational rights of the most vulnerable social groups in the society, including disabled persons. But in the second the government complains of a lack of
resources to meet the educational demands of all its citizens. The means for promoting and facilitating education for those most disadvantaged are not specified anywhere in the policy. As data in Chapter 5 has shown, such a commitment is more theoretical than actual. The cases of Wendo, Manjala, Mahila and Mandeje, discussed in Chapter 5, show how difficult it is for disadvantaged people to benefit from the stated intention of government that no poor person whose inability to meet the costs should suffer deprivation of so critical a service as education. Although these visually impaired girls/women tried hard to seek assistance from village leaders, local authorities, NGOs, private organisations, individuals and the community at large, they did not succeed in getting the support required to allow them to remain in school. Hence, their experiences mirror the broader effects of structural adjustments on the poor which have tended to exacerbate gender disparities.

As part of structural adjustment, the policy also calls for government reduction of expenditure in various areas. This has direct implications for the service itself. In the four schools visited by the researcher (two in Dodoma and two in Tabora), there was an acute shortage of equipment such as Perkins Brailleers, typewriters, tape recorders/cassettes, Braille and typing papers. Basic and supplementary brailled/taped materials were also lacking. Live-reading was the only way visually impaired students could access information. This affected the students in various ways. For example, there was much dependence on the “good will” of sighted students to volunteer as readers. This limited the freedom of the students in terms of when to work on their studies, how and on what aspect. All the time, the work schedule was adjusted to the availability of the volunteer readers. Schools had no technical aids such as white-canies. Environments were not modified to suit the mobility needs of visually impaired students. Equipment and physical plants were not being repaired, although they were noticeably in bad state.

Health care has also been affected by government cutbacks of expenditure. There were neither first-aid services nor employed health-care staff in the schools. There also was a problem of food. Many times students had only one meal a day. Fruits, vegetables and meat were either removed from the menus or were rarely available.
Such circumstances eroded students’ enthusiasm to learn, resulting in poor performance. It is clear that poor performance at any level jeopardises someone’s chance for further education. As the case of Majimbi in Chapter 5 illustrates, some of the students stopped schooling on this account. There is thus evidence that government’s measures of economic recovery have been a major setback for visually impaired women as far as access to and ability to stay in education in Tanzania is concerned.

Conclusion
Societal attitudes, beliefs and misconceptions are raw materials through which gender and impairment are culturally constructed. They determine roles and responsibilities of individuals in society and influence the nature of social services accessed by each individual. Issues of neglect, overprotection and rejection of visually impaired girls begin within the family, extend to the community and can go as far as the development planners. Visually impaired women are regarded as having no productive roles in the society, and for this reason as not deserving of educational rights. Such discriminatory practices have positioned visually impaired women at the bottom of the educational ladder. That is to say, perceptions about femaleness and impairment have intensified the attitudes that operate so as to deny visually impaired girls/women’s access to education and participation in many other life activities. It has been found that, to a large extent, this has contributed to gender imbalances in schools. In such a situation, the dreams of the majority of visually impaired female children are very far from being met (Kalabula, 2000). This contravenes Article 26 Section 1 of the Universal Declaration of Human Rights and Article 25 of the Tanzania Education Act of 1978 concerning the right of all citizens to education.

As discussed above, planning, organisation and orientation of special needs education in Africa is still characterised by poor funding, lack of information, negative attitudes, selfish interest among so-called experts, cultural influences and a general lack of commitment by those who are responsible for running the educational system (Kalabula, 2000). It is largely organised and run under the influence of the medical model, whereby disabled people are excluded from the
design and implementation of education programmes. Disabled people are not considered as partners in the decision-making and development processes. Usually decision-makers are professionals and administrators. The Unit of Special Education in the Ministry of Education and Culture has, since its inception in the 1960s, remained exclusively in the domain of professionals and administrators. Policies which they design pay little attention to the actual needs of disabled people in general, and disabled women in particular. Consequently, special needs education has never been fully developed or put in place.

Education for all has remained an elusive goal as far as special needs education is concerned because it remains essentially urban based and inadequate even for the needs of those in urban areas. The notion of inclusive education is far from being applied in the majority of schools. Additionally, the reform policy in education, particularly cost sharing, has left many visually impaired girls/women from poor families in the cold. Furthermore, the policy on expulsion of pregnant schoolgirls has denied many visually impaired girls/women sustained access to educational services. Stereotyped attitudes, which are found in the society from the family/community to the planners, erode the self-esteem of visually impaired women, making them the most oppressed of all. As a result, visually impaired women remain largely dependent on the non-disabled community. Indeed, the majority of them have had to resort to begging for survival.

The way forward
In this study, self esteem of visually impaired women has been seen to be low. They are considered as objects and in need of sympathy and charity as a means for their survival. Thus, to imprint their images with correct conceptions, they need to be empowered to take an active role in transforming society's negative attitudes against them. In the context of disability “transformation is the process by which disabled people are recognised as active individuals who can initiate their own directions for the enhancement of their own lives” (Tanzania Leonard Cheshire [TLC] 2001:1). In this sense, empowerment entails
... the dis-empowered to act on their own behalf in contrast to welfare approach, whereby concerned people act for them. Empowerment is the capacity of women ... to analyse and know the world at all levels; act on their own behalf; increase their power and control over the social resource for sustainable and dignified life. The concept of empowerment connotes a process of increasing power, by challenging structures of society which disempower, and removing the barriers to transformation. (TGNP, 1993: 29-30).

For a disabled woman, empowerment means understanding and challenging what Baylies (2001) describes as society's creation, maintenance and intensification of impairments and their translation into the experience of disablement. According to her (2001:1), societies are implicated in these issues in fundamental ways. Baylies (2001:3) argues that "problems both of direct discrimination and distributive injustice are manifest in restricted access to education, health, and means of livelihood for people with impairments in developing countries. But disablement is also a consequence of lack of resources and state capacity which might otherwise be enlisted to mitigate impairments". Visually impaired women need to be aware of all these structures and how they work to disempower them in mainstream society.

A central element to the empowerment process is education: "... education empowers women. But it also changes the dynamics in households and thus changes norms" (Human Development Report, 2000: 34). In such a context, inclusive education is one way of reducing the disparities observed, which have left many out of the educational system. Inclusive education (IE) is a strategy contributing towards the ultimate goal of promoting an inclusive society, in which all children/adults, whatever their gender, age, ability, impairment or HIV status are enabled to participate in and contribute to that society. It is a form of education where difference is respected and valued. IE ensures that all children have access to appropriate, relevant, effective and affordable education within their community. This education starts in the home with the family, and includes formal, non-formal and all types of community-based educational initiatives. IE is part of development, which itself should be inclusive, i.e. responding to the needs of real people who are all different. Whatever the level of socio-economic development, the education of disabled children should be seen as integral to the development of education for all
children. IE is the responsibility of both government and community, requiring collaboration between sectors and extensive participation. Supporting and involving families is central to IE, as the family has prime responsibility for the care and education of its children (whether disabled or not) (Stubbs, 1998:1).

Thus, in order for the visually impaired women to have access to education, as a tool for fully participating in the development process, the following transformative actions are necessary.

To start with, parents/guardians ought to accept their visually impaired daughters and make efforts to expose them to the challenges that can develop their talents and potential to become active members of their communities. Parents, guardians, siblings and other close relatives are very important for the development of any child. Each of them plays an important role as a primary agent of socialisation. The future of an impaired child depends largely on the reactions of these groups from the onset of the impairment. Of all things education matters greatly because it is the source of knowledge and skills to combat illiteracy, ignorance and poverty, which restrict avenues to development. Hence, parents ought to allocate resources to the education of their visually impaired daughters even where such resources are meagre. This is important because, while other members of the family can earn their living through various means, the employability of their visually impaired daughters largely depends on education they attain. Parents ought to know that the costs of an illiterate impaired girl remaining dependant on them are much higher than giving her education. Feeding and taking care of the person for the whole of her life is not only costly, but also leads to more suffering after their deaths.

Community schools should be inclusive in order to allow all disabled children and adults to benefit from mainstream educational services and facilities. The school leadership should provide better living and learning environments. School staff who sexually abuse female students should be heavily punished, including being terminated from service. Schools need to allocate funds to assist visually impaired girls with essential needs like sanitary towels. This was found to be one of the things which made girls succumb to temptations for money from men seeking
sexual favours. Therefore, schools must accommodate varying needs of learners. As Marchesi (1994:1) contends, "...when the mainstream school attempts to integrate children with special needs it will have to contemplate a change in the way in which education is put into practice, at the same time. A change, a reform, must be based on the principles which uphold special education". But, this can only be achieved when the society has removed all physical barriers and has changed negative attitudes about the educability of visually impaired girls/women. Accordingly, this requires the community to re-allocate resources, including meeting the costs of education for those visually impaired children whose parents are unable to meet them. To realise this, local governments need to consider setting comprehensive and appropriate programmes to support the educational needs of visually impaired girls. Furthermore, the community should mobilise and sensitishe those parents who seem to have negative attitudes, about the importance and benefits of giving education to their visually impaired daughters.

In line with changes in the educational system at the local level, government ought to formulate a comprehensive policy on special needs education, based on a more sound analysis of the gender needs of different categories of disabled people, to guide the implementation and evaluation of this education. The policy should define duties and responsibilities of each stakeholder. The special needs education unit in the Ministry of Education and Culture should be made a Directorate. To have just a small unit dealing with special needs education shows a lack of commitment on the part of government and perpetuation of adherence to a charity model of service delivery. Likewise, enough funds must be allocated to special needs education to ensure the availability and adequacy of facilities and equipment, well paid staff, etc. This accords with what Kalabula (2000) says:

The theoretical interest shown in special education should be backed up by practical action to make the dreams come true. Dependency on donors or the present day co-operating partners should be minimised. The African governments must budget for special needs education. It is better to spend a lot of money now on educating special educational needs children to make them self-sufficient in their lives to avoid their perpetual dependency on the state’s handouts for the rest of their lives.
School fees, transport costs, caution money, etc. for visually impaired girls/women and must be provided by the government. Government should also introduce computer technology to schools to help pupils and students in typing their homeworks, essays, examinations, etc, as well as to reduce their dependency on live reading. Furthermore, inclusive education means that all teachers should be trained in special needs education. The government cannot successfully achieve the goals of inclusive education without introducing special needs courses in all teachers training colleges.

Vocational education to equip the leavers with appropriate knowledge and skills to compete in the labour market and to establish self-help projects must be made part of the school curriculum, particularly at primary level. This is very important because, for the moment, only a very small number are selected to continue with secondary education. Those who are not selected remain without any useful skills to apply in life. As a result this discourages many of them and their parents. They perceive education as waste of time and resources. Vocational skills, however, could be practically applied in daily living. In this way, education would be seen as a useful tool for the enhancement of independent living and for full participation in community development.

The provision of education for visually impaired people should emphasise the joint efforts of government and non-governmental organisations. Non-governmental organisations are very important for supporting and promoting inclusive education through joint endeavors with the government. It is also important to involve disabled people themselves, particularly women, as allies in the developmental process. In this regard, the Tanzania League of the Blind (TLB) has the primary responsibility to ensure that visually impaired girls from poor families are assisted in all possible ways to access and remain in education. Some of the visually impaired women who dropped out of school at various levels due to cost sharing policy believed that if their organisation had fought for them, they need not have had to stop their schooling. They believed so because the government had already stated clearly that no one would be expelled from school on grounds of inability to
pay school fees. Hence, TLB should have seen to it that visually impaired girls benefit from the exemptions of fees and other costs given by the government to the poor and disadvantaged. In practice the procedures for exemption are so difficult and complicated, they are as costly as paying the school fees. In many cases, parents/guardians give up when confronted by complications and bureaucracy.

Likewise, TLB ought to sensitisise and mobilise the public to see to it that visually impaired girls benefit from the existing educational schemes for poor families like the Mwalimu Nyerere Foundation, Equal Opportunities for All Trust Fund (EOTF), Girls Education Support Scheme, etc. The study demonstrated that these organisations were not giving support to visually impaired girls largely because few knew about them. Those operating these schemes should be sensitised to be ready to support visually impaired girls; and the procedures to get the support should not be too bureaucratic. Above all, TLB should pressure the government to ensure that there is an improvement in special needs education services in terms of access, equity and quality. More specifically TLB should make sure that gender equity and equality are taken care of in all its organisational activities.

Visually impaired women leaders in TLB should take a lead in sensitising the public to recognise that disabled women are uniquely valuable individuals and that they should have freedom to pursue various community activities and take a place in the society. More fundamentally, they should fight for representation at different decision making levels (Parliament in particular) where important decisions for civil society are discussed and made into legislation/laws/bylaws. Through this, they would be accorded their fundamental human rights. This is to say that disabled women ought to pressure the government to incorporate them in designing programmes and making decisions that affect their lives. They should not accept being represented by others in matters of their own concern. Rather they should be in the frontline in making sure their needs are taken on board in various development programmes. They should make efforts to lobby with financial bodies and development agencies, to ensure that visually impaired women have access to soft loans for the establishment of income generating activities. The study found that a large number of visually impaired women earn their living through street
begging. This way of life dehumanises them. Women leaders in TLB should double their efforts to lobby with mainstream women's organisations such as TGNP to make their voices heard and their needs known, so that they are included in the activities of such organisations.

As Asogatan (2000) comments, visually impaired women's experiences are necessary if society is to be adapted to meet everyone's needs. Visually impaired women must join forces with other women in an organised manner, so that they can fight for equal opportunities together. Women's issues break established patterns. That is why women need to be able to co-operate, whether they have a disability or not. Up until now, mainstream women's organisations in general have not been very interested in disabled women's issues. Within the disability movement in each respective country, however, disabled women can play an avant-garde role, and based on their female perspective, visually impaired women can co-operate across organisational borders. They can be pioneers in taking the initiative in female co-operation through inviting women from other disability organisations to participate in common actions. What ties them together, in the first place, is the fact that they are women, not the fact that they have impairments.

The female role is primary. In their common work they should not forget that they are women in the first place. The great challenge for them is to work with other women with and without impairments in order to change society, so that both women and men have equal access to resources and have the same rights, obligations and opportunities in all essential spheres of life.

This study of visually impaired women's access to education in Tanzania has explored the ways in which education can be an important empowering tool for the liberation of women who suffer not only from sexual discrimination, but also from discrimination due to their impairment. However, empowerment is not obtainable through education alone. Nor is education a guarantee of empowerment. Empowerment and achievement of independent living cut across and are informed by the wider spectrum of cultural, social and environmental forces. Even so, this study stands as a foundation stone in the analysis and understanding of the totality
of cultural, social and environmental obstacles which visually impaired women face in negotiating their way through life. As the visually impaired women interviewed during the course of this research repeatedly testified, access to education can often be an important first step towards personal independence. Without it they believed their chances of achieving economic security and participation in the wider society to be severely restricted.

Through dissemination of the findings of this research, a very strong message can be conveyed to all stakeholders in the disability field regarding the necessity of improving the situation of disabled women across sub-Saharan Africa. This study stands as an initial contribution towards bringing about change by focusing on the importance which disabled women themselves attach to education. However, there is need to go further in investigating how far education may serve as a liberatory tool. There is also a need to consider what other factors should be addressed in order to ensure that education once gained is used to the fullest degree to improve both the lives of individual disabled women and the welfare of their communities.

Future research on gender, disability and development needs particularly to examine how employment, health, and control and ownership of property can empower disabled women who remain among the most disadvantaged and marginalised people in society. Currently, disability issues are given little attention by mainstream research organisations. In order to transform past practice, the government in collaboration with organisations of disabled people should establish and strengthen research in disability related programmes. This in turn requires training in the methodologies appropriate for disability research and encouragement of the efforts of disabled researchers.
APPENDIX 1:
INTERVIEW STRUCTURE FOR VISUALLY IMPAIRED WOMEN

Personal Data:

1. Name of the girl/woman—
2. Location (name of the village, ward, district, township, etc.).
3. Ethnicity—
4. Age—
5. Number of brothers/sisters in the family.

<table>
<thead>
<tr>
<th>Member of family</th>
<th>Date of Birth</th>
<th>Level of Education</th>
<th>Occupation</th>
<th>Still a member of Family</th>
<th>Died</th>
<th>Married</th>
<th>Moved away</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male/ Female</td>
<td></td>
<td></td>
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<td></td>
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</table>

6. Position of birth within the family (e.g. first, second, last, etc.)
7. Occurrence of visual impairment (e.g. congenital, acquired later in life (please specify the period).
8. Causes of impairment ..............

Factors inhibiting access of visually impaired women in accessing education.
A: Cultural Factors

9. By being visually impaired, how do you feel you are thought of by your community and society at large? How do you feel about it yourself?
10. What is the perception of your parents/guardians towards your impairment?
11. Do you know how your parents/guardians and siblings reacted towards your impairment the very time they knew it was obvious?
12. To what extent do your parents/guardians, siblings and other relatives involve you in the family/kinship matters? e.g. ceremonies, decision making, ownership of property, inheritance, day to day activities, etc?
13. How do other people in your neighbourhood treat you? i.e. Are they over sympathetic to you? Do they disregard you? Do they regard you as having equal status, responsibility and opportunity like others in the community?
14. Do you know any other types of impairments? (Yes, No).
   If Yes, what are they? (Please specify).
15. In your community, is visual impairment interpreted differently from those impairments you have mentioned above? Are visually impaired people treated differently from people with those other impairments? (Yes, No).
16. If Yes, In what ways? (Give examples).
17. Are there any labels/nicknames given by other people in identifying you? e.g. Do they identify you by your impairment or by your name? If they identify you by your impairment or nickname, what is your reaction towards them?
18. At early childhood, did the people in the neighbourhood allow their children to play with you or come to your home?
19. Did your parents/guardians allow you to play with other (non-disabled) children and to go to their homes?
20. Do you still live with your parents/guardians? (Yes, No).
21. If no, are you single or married?
   (a) If married, to a disabled person or non-disabled one? (If to a disabled person, please specify the impairment).
   (b) If not married, why?
22. Do you have children? (Yes, No). If yes, how many? (Girls---boys---).
23. Among your children, is there any disabled one(s)?
24. What is the source of your income as an individual?
   (a) Are you employed? If employed, what kind of employment? Who is your employer?
   (b) If unemployed, are you self-employed? If self-employed, what kind of economic activities are you engaged in? (Please explain how you managed to start your income generating activity(s).
   (c) If you are neither employed nor self-employed, How do you earn your living?
   (d) What other activities do you do? E.g. Voluntary works etc.
25. What are the economic activities of your parents/guardians? The rest of the family e.g. husband, brothers and sisters. (Please explain). Are those different economic activities your family does generate enough income to meet the family basic needs? (Yes, No).
26. If No, how does your family manage to sustain itself?
27. Do you have friends at the place where you live? (Yes, No).
   (a) If yes, are they males, females or both?
   (b) Are your friends disabled or non-disabled, or both?
   (c) How do you interact with them? e.g. Do you visit one another? Do you go to social activities together, etc?
28. One of the strong tradition of your tribe, is induction practice to mark the transition of a girl from childhood to adulthood.
   (a) Have you gone through this induction practice? (Yes, No).
29. If No why?
30. If Yes, what were the feelings of your peer group and how did they relate to you?
31. Do you participate in different community activities taking place in your locality? E.g. festivals, voluntary works, sports, worshipping, Funerals etc. (Yes, No).
32. If no, why?
33. If Yes, what are the responses of the community to your contribution?
34. Do you know other visually impaired people in your village/community? (Yes, No).
35. If Yes, are they women, men or both?
36. How do you relate with them?
37. Do those visually impaired people whom you know participate in the village/community activities? (Yes, No).
   If No, why?
   If Yes, how?
38. For those who are men, are they treated differently from you women? (Yes, No).
   If Yes, how? Please explain.
39. Have you ever come across or experienced any specific traditional practices, taboos, norms, customs, etc. which you think undermine the personhood of a visually impaired woman? (Yes, No).
   If yes, can you explain further?

B: Other Factors

40. Do you know anything about the availability of educational services for visually impaired people? (Yes, No). If Yes, How did you know?
41. Is education important to you as a visually impaired person? (Yes, No). If Yes, why? If No, why not?
42. Have you ever been to school? (Yes, No).
   (a) If No, Why
   (b) If Yes, specify level.

43. Level of Education

<table>
<thead>
<tr>
<th>Level of Study</th>
<th>Name of the Sch</th>
<th>Locatio n</th>
<th>Special sch</th>
<th>Main stream</th>
<th>Co- ed</th>
<th>Girls</th>
<th>No. of years</th>
<th>No. of student studies</th>
<th>F</th>
<th>M</th>
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<tbody>
<tr>
<td>Never attended any sch</td>
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<td>Pri sch</td>
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<tr>
<td>Post-Sec sch</td>
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</table>

46. Did you complete the level you have specified? (Yes, No).
   If No, Why?
47. Why didn't you go on for further/higher studies?
48. Were your parents/guardians happy to see you going to school? (Yes, No).
   If No, why? Please explain.
49. Were your school fees paid by the family? (Yes, No).
   If not, by whom?
50. Apart from economic difficulties, what other specific issues affected your family with regard to financing your education?

51. How far was/were your school (s) from home? Please tell me the distance to your school (s) from home.

52. Did you need an escort to and from school (s) (Yes, No).
   (a) How easily was this available?
   (b) Did you manage to reach school on time? (Yes, No).

53. (a) If No, why?
   (b) How did this affect your education performance?

54. What was the reaction of teachers and fellow students to your impairment? Were they helpful to you?

55. Were there enough teaching/learning facilities e.g. textbooks, Perkins Braille, tape recorders and cassettes, typewriters, Manila and typing papers, etc. (Yes, No).
   (a) If Yes, were they in good condition? What was the ratio of these facilities per student?
   (b) If No, how did you manage to cope with your studies?
   (c) Please explain further the difficulties you have faced in obtaining education in the school/schools you have attended.

56. Did the school(s) you attended had enough teachers trained in special needs education? (Yes, No).
   If No, how were you helped in different subjects?

57. How much did you participate in non-academic activities e.g. Arts, Hand-crafts, Music, Gardening, etc?

58. Did you have any specific problem (s) emanating from your impairment, which non-disabled students didn't have in accessing and gaining an education? (Yes, No).
   If Yes, please explain.

Consequences of Lack of Education on Visually Impaired Women

A: At individual level

59. How is life in general?

60. What economic hardship do you face due to either poor or lack of education?

61. What other problems (e.g. health, psychological, sociological etc.) do you face as a result of poor or lack of education?

B: At Community Level

62. (a) What moral and material support does your community/village leadership give you?
   (b) Are there any specific comprehensive programmes to support disabled people living in your locality? (Yes, No). Please explain.
   (c) Do you receive any support from non governmental organisations within and outside your community? (Yes, No).
   If Yes, what are these non-governmental organisations? Please explain the kind of support you get from each of them. Is the support you get enough? Please explain.
(d) What efforts do your relatives and close friends make to support you in different life aspects?

63. Do you know other people, other than visually impaired women who get support from the village/community leadership? (Yes, No).

If Yes, are they disabled? Or non-disabled ones? Are they women, men or both?

Measures

64. How do you think the provision of education and support to visually impaired girls/women could be improved? Please explain. Or, in raising access and acquisition of education for visually impaired girls/women, what measures do you think are important and necessary to be made by:
(a) Parents/guardians,
(b) Village/Community,
(c) Government (local and central),
(d) Organisation of and for visually impaired people, and
(e) Visually impaired girls/women themselves.
APPENDIX 2

INTERVIEW STRUCTURE FOR PARENTS/GUARDIANS

Personal Data

1. Name of the parent/guardian ..............
2. Location (name of the village, ward, district, township, etc.).
3. Ethnicity ..............
4. Sex: Female ....... Male ............
5. Marital Status
   (a) single  (b) Married  (c) Widow (d) widower (e) Divorcedee
6. Number of children—
   Boys—
   Girls—
7. How many children have visual impairment—
8. How many have no impairment?—
9. Do you have a child/children who have other impairments different from visual? (Yes, No).
10. If Yes, what kind of the impairment?
11. Level of education—
12. Occupation—

Factors Inhibiting Visually Impaired Women In Accessing Education

A: Cultural Factors
13. Has your visually impaired daughter acquired visual impairment after or before birth?
14. How do you explain could have been the cause of your daughter’s visual loss?
15. What was your immediate reaction towards the impairment of your daughter?
16. How do you feel about it now?
17. How did other members of the family and neighbours react to this situation?
18. How do they perceive it now?
19. During your daughter’s childhood, did you allow her to play with her peer group in the neighbourhood? (Yes, No).
20. If no, what was your fear?
21. Similarly, did the parents in the neighbourhood allowed their children come and play with your child at home? (Yes, No).
   If No, why?
22. In raising your visually impaired daughter, how do you cooperate with your spouse? Are you sharing the same concerns? (Yes, No).
   If No, why?
23. Generally, what do people in your village/community say about the impairment of your daughter?
24. How do you feel or react to whatever they say?
25. One of the strongest tradition of your tribe is induction practice, to mark the transition of a girl from childhood to adulthood:
   (a) Has your daughter gone through induction practice? (Yes, No).
   (b) If no, why is it so?
(c) If yes, what was the feeling of her peer group and how did they relate with her?

26. Are there any traditions, taboos, norms, customs etc., which assign different roles between females and males in your community? (Yes, No).

27. If yes, what are they?

28. Are people with different impairments considered equally in those customs, norms, taboos, traditions etc? (Yes, No).

29. (a) If No, why? (Please explain). How do these traditions, taboos, norms and customs strengthen or weaken the role of visually impaired women in the community?  
(b) How do they undermine or raise their access to education?

30. Is there any impairment, which is considered to be more damaging than the other in your tribe? (Yes, No). If Yes, please explain.

31. How does your visually impaired daughter participate in the day to day activities of the family?

32. How helpful your daughter is in setting and settling various family issues?

33. According to your traditions, can a girl inherit a family's property? (Yes, No).  
(a) If Yes, is it the same for a disabled girl? (Yes, No) (Please explain).  
(b) Would they be treated differently according to the type of impairment they have? (Yes, No).  
(c) If Yes, please explain giving examples of these differences following the type of their impairment.  
(d) If No do you concur with such a practice? (Yes, No). (Please explain).

34. Is your daughter married or has ever been married? (Yes, No).  
(a) If No, do you think she can get someone to marry? (Yes, No).  
(b) If No, why?  
(c) If Yes, to a disabled or to a non-disabled husband?  
(d) If she is married, how does she raise and manage her family?

35. Do you know any other parents in your community who have visually impaired child/children? (Yes, No).  
36. If Yes, how do you cooperate with them?  
37. Do you know other people in your community who have different impairment other than visual? (Yes, No).  
If Yes, specify the kind of impairment.

B: Other Factors.

(a) Boys—

(b) Girls—

39. Do you know anything about the provision of education for visually impaired people? (Yes, No).  
40. If yes, how were you first informed about the availability of visually impaired peoples schools? Who informed you?

41. Did your visually impaired daughter attend any school? (Yes, No).  
(a) If No, why?
(b) If Yes, up to which level?

42. Did she complete the level you have specified? (Yes, No).
43. Why didn't she go for further/higher studies above the level she reached?
44. Did you believe that visually impaired people could benefit from the schooling?
45. Are there benefits (or only costs) to educating visually impaired girls? How do you think of this if compare with educating visually impaired boys?
46. Suppose you had limited resources to meet the educational needs of your all children, who would you give the first priority? boys or girls? If girls, why? If boys, why? (Please explain).
47. What costs (e.g. fees, transport charges, stationeries, meals, uniforms, accommodation etc) did you have to incur in meeting the educational needs of your visually impaired daughter?
48. Did you afford those expenses? (Yes, No).
49. If No, what efforts did you make to meet those expenses for the educational needs of your daughter?
50. What support did you get for your visually impaired daughter? For example from:
   (a) Your relatives,
   (b) Your community,
   (c) Local and Central education authorities,
   (d) Local NGOs?

Consequences of Lack of Education on Visually Impaired Women
51. Are there any problems which your visually impaired daughter face due to lack or poor education? (Yes, No).
   If Yes, what are they? (Please explain).

Measures
52. How do you think the provision of education and support to visually impaired girls/women could be improved? Or, in raising access and acquisition of education for visually impaired girls/women, what measures do you think are important and necessary to be made by:
   (a) Parents/guardians,
   (b) Village/community,
   (c) Government (local and central),
   (d) Organisation of and for visually impaired people, and
   (d) Visually impaired women themselves.
APPENDIX 3

INTERVIEW STRUCTURE FOR VILLAGE HEADS/ELDERS

Personal Data

1. Name of the head/elder—
2. Name of the village/locality—
3. Age—
4. Duration of leadership in the village/locality—
5. Level of education—
6. Number of disabled people in the village/locality—
7. Number of visually impaired people in your village/locality—
   (a) Men
   (b) Women

Cultural Factors Inhibiting Visually Impaired Women in Accessing Education

9. (a) In some traditions some impairments are associated with certain beliefs or spirits. Is this the case in your tribe? (Yes, No). (Please explain)
   (b) From what you have explained above, does it apply to all categories of impairments? (Please give details).
9. (a) Are there any traditional practices which follow after the birth of an impaired child? (Yes, No). If Yes, please explain.
   (b) Does your explanation apply to all categories of impairments? (Please give details with reference to each category of impairment).
11. Does this continue to be practised in your tribe to date? (Yes, No). If No, why?
12. Is visual impairment perceived differently from other impairments in your tradition? (Yes, No).
13. If yes, how does the perception of visual impairment differ from that of other impairments? Is the perception towards impairment related to how serious or damaging that impairment is? How the notion of damage of a particular impairment is understood?
14. How do you name different impairments? i.e. Do you use labels/nick names that help to identify different impairments? (Yes, No).
15. If yes, what are they.
16. What do such labels/nick names signify in the village/community?
17. Do the traditional customs practised in your village/community apply the same to both disabled and non-disabled people? For example initiation, marriage, inheritance and ownership of properties?
18. Do those traditional customs differ in practice between men and women?
19. In your village/community, do disabled people participate in community activities such as festivals, meetings, elections, voluntary works, leadership, decision making, etc?
20. In your tradition, is education regarded as equally important to both men and women? (Yes, No). (Please explain).
21. Is it also the same for disabled men and women? (Yes, No). (Please explain).
22. Do you know anything about the provision of education for visually impaired people? (Yes, No).
   If Yes,
   (a) How did you come to know?
   (b) Please explain what you know about this service.

23. Do you think this education is useful to visually impaired people? (a) What is its usefulness to them as individuals? (b) To the community?

24. Do you know any visually impaired girls/women who attended or are attending school in your village/community? (Yes, No).
   If Yes,
   (a) How many?
   (b) Does the village/community leadership offer any educational or any other kind of support to visually impaired girls/women if any? (Yes, No).
   (c) If Yes, what kind of support? (Please give details).

Consequences of Lack of Education on Visually Impaired Women

25. Are there any visually impaired girls/women in your village/community who have not been to school? (Yes, No).

26. If yes, how many are they?

27. How is the life situation of:
   (a) Visually impaired women who have attended school if any? and
   (b) Those who have not attended any school?

Measures

28. How do you think the provision and support of education to visually impaired girls/women could be improved? Or, in raising access and acquisition of education for visually impaired girl/women, what measures do you think are important and necessary to be made by:
   (a) Parents/Guardians,
   (b) Village/Community,
   (c) Government (local and central),
   (d) Organisations of and for visually impaired people,
   (e) Visually impaired women themselves.
APPENDIX 4

INTERVIEW STRUCTURE FOR HEADS OF SCHOOLS

Personal Data

1. Name of the Headteacher---
2. Sex
   (a) Male
   (b) Female
3. Name of the school---
4. Location of the school---
5. Level of education---
6. Professional background---
7. Teaching experience---
8. For how long you have been the head of this school?
9. Do you teach at all, or you are only involved in the administration activities? (Yes, No).
10. If yes, which class(s) do you teach?
11. What subjects do you teach?

Factors Inhibiting Visually Impaired Women in accessing Education

12. What is the total population of children in your school?
   (a) Boys---
   (b) Girls---
13. When did your school start enrolling visually impaired children?
14. How many visually impaired children are there in your school?
   (a) Boys
   (b) Girls
15. What criteria are used in enrolling those children in your school?
16. What arrangements are made in getting these children to school in class one?
17. What is the enrolment and completion records of visually impaired children in your school for the past ten years?
   (a) Boys---
   (b) Girls---
18. Do you think all visually impaired children of school going age in your area are already in schools? (Yes, No).
   If No, Why?
19. Are there any dropouts? (Yes, No).
   If yes, how many are they for the past ten years?
   (a) Boys---
   (b) Girls---
20. What do you think could be the reasons for the dropouts?
21. (a) What are your class sizes?
   (b) What is the ratio between boys and girls in the various classes you have?
   (c) Among the boys, how many visually impaired pupils/students are there?
   (d) Among the girls, how many visually impaired pupils/students are there?
22. Are there enough teaching/learning facilities in your school? (e.g. text books, teaching models, adapted equipment, stationeries, etc)? (Yes, No). 
   If Yes,  
   (a) What are they?  
   (b) What is the ratio of those facilities per student (s)?  
23. What is the condition of those teaching/learning facilities?  
24. How do you get them? Or, who is responsible to provide the school with teaching/learning materials?  
25. How many teachers are there in total (specialist and non-specialist)?  
26. What is the student/teacher ratio in general?  
27. Are there enough trained specialist teachers? (Yes, No).  
28. If yes, what is the teacher/student ratio in a class?  
29. For non-specialist teachers, which arrangements are made to equip them with teaching skills appropriate to meet the educational needs of visually impaired children?  
30. Do you or other teachers encounter any problems in teaching visually impaired students in the class? (Yes, No).  
31. If yes, what are the problems?  
32. How do you go about solving those problems?  
33. In dealing with problems you have explained above, what support/co-operation do you get from:  
   (a) School,  
   (b) Parents/guardians,  
   (c) Community,  
   (d) NGOs,  
   (e) Local authority, and  
   (f) Central government,  

Consequences of lack of education on visually impaired women  
34. What can you say about the real situation visually impaired women face by having nor or poor education in terms of:  
   (a) Knowledge and skills  
   (b) Employment  
   (c) Health  
   (d) Poverty  
   (e) Self confidence  
   (f) Discrimination  
   (g) Marital status  
   (h) Life expectation  
   (i) Security, and  
   (j) Independent living.  

Measures  
35. In order to improve access and acquisition of education for visually impaired girls, what efforts is your school making?  
36. How do you think the provision of education and support to visually impaired girls/women could be improved? Or, in raising access and acquisition of
education for visually impaired women, what measures do you think are important and necessary to be made by:
(a) Parents/guardians,
(b) Village/community,
(c) Government (local and central),
(d) Organisations of and for visually impaired people, and
(e) Visually impaired women themselves.
APPENDIX 5

INTERVIEW STRUCTURE FOR CLASSROOM TEACHERS

Personal Data

1. Name of the teacher—
2. Sex
   (a) Male
   (b) Female
3. Name of the school—
4. Location of the school—
5. Teaching Experience—
6. Professional background—
7. Which class(s) do you teach?

Factors inhibiting Access of Visually Impaired Women to Education

8. How many children are there in your class(s)?
   (a) Boys—
   (b) Girls—
   (c) Visually impaired boys—
   (d) Visually impaired girls—

9. Are there any drop outs among visually impaired students in your class?
   Boys.............................
   Girls ....................................................................................................................... 10. What are the reasons behind this dropout problem?
   10. Are there enough teaching/Learning facilities in your school? (e.g. text books, teaching models, adapted equipment, stationeries, etc)? (Yes, No).
      If Yes,
      (a) What are they?
      (b) What is the ratio of those facilities per student?

11. What is the condition of those teaching/learning facilities?
12. How do you get them? Who is responsible to provide the school with teaching/learning materials?
13. Do you encounter any problems in teaching visually impaired students in the class? (Yes, No).
14. If Yes, what these problems are?
15. How do you go about solving those problems?
16. In dealing with problems you have explained above, what support do you get from
   (a) School,
   (b) Parents/guardians
   (c) community
   (d) NGOs
   (e) Local authority, and
   (f) Central government
Consequences of Lack Of Education on Visually Impaired Women

18. What can you say about the real situation facing visually impaired women who have either no or poor education in terms of:
   (a) Knowledge and skills
   (b) Employment
   (c) Health
   (d) Poverty
   (e) Self actualisation
   (f) Discrimination
   (g) Marital status
   (h) Life expectation
   (i) Security
   (j) Independent living.

Measures
19. In order to improve access and acquisition of education for visually impaired girls, what efforts is your school making?
20. How do you think the provision of education and support to visually impaired girls/women could be improved? Or, in raising access and acquisition of education for visually impaired girls/women, what measures do you think are important and necessary to be made by:
   (a) Parents/guardians,
   (b) Village/community,
   (c) Government (local and central),
   (d) Organisations of and for visually impaired people, and
   (e) Visually impaired women themselves.
APPENDIX 6

INTERVIEW STRUCTURE FOR OFFICIALS IN THE MINISTRY OF EDUCATION AND CULTURE

Personal Data

1. Name of the official
2. Sex
   (a) Female
   (b) Male
3. Position in the Ministry
4. Level of education
5. Experience (Duration in the ministry)

Factors inhibiting access of visually impaired women in accessing education

6. What criteria is used to enrol visually impaired children beginning class one?
7. What arrangements are made to get these children to school in class one?
8. What is the distribution of enrolment by region for the past 10 years?
   (a) Primary education (Female — Males—)
   (b) Secondary education (Females— Male—)

Please specify:
   (c) The leading region
   (d) The last region.

9. What is the completion record by region for the past 10 years?
   (a) Primary education (Females— Males—)
   (b) Secondary education (Females— Males—)

Please specify:
   (c) The leading region
   (d) The last region

10. Does your office have any records of visually impaired students who have dropped out of school? (Yes, No).

11. How is the drop out situation?
   (a) For girls
   (b) For boys

12. What is found to be the major cause of such drop outs for each sex?

13. Currently your Ministry is engaged in transformative programme whereby specific funds are allocated to support girls' education particularly from poor families.
   (a) What arrangements does the government make to support the educational needs of disabled girls whose parents/guardians are proved incapable of meeting their educational costs?
   (b) To what extent have visually impaired girls benefited from those arrangements so far?


15. If Yes,
   (a) What kind of support does the fund give?
251

(b) How many visually impaired women have benefited from this fund?

16. Is there any special needs education policy? (Yes, No). If Yes,

(a) From when was it enforced?

(b) To what extent does it articulate the educational needs of disabled girls/women? (Please explain).

(c) If No, why? (Please explain)

17. Does the ministry have specific special needs programmes for visually impaired people? (Yes, No).

(a) If No, why?

(b) If Yes, to what extent do those programmes enhance equity and equality between visually impaired males and females?

18. Are there enough trained specialist teachers? (Yes, No).

(a) If Yes, what is the student/teacher ratio per class?

(b) If no, why?

19. Are there enough learning teaching materials? (Yes, No).

(a) If Yes, are they in good order?

(b) What is the ratio of e.g. Text-books, typewriters, Perkins brailers, etc. per student?

20. (a) How do you get those learning teaching materials for visually impaired students?

(b) Are they produced locally or imported?

21. What has been the annual budget for special needs education for at least in the past 10 years?

22. Has that budget been meeting the requirements of all special needs education schools and colleges? (Yes, No).

23. If No, Please explain how do you manage to run special needs education programmes with no or limited resources. (Please give details of the situation in the schools and colleges).

24. How decisions are made with limited funds as between the needs of disabled and non-disabled students?

25. What effects are caused by budget deficit on the achievement and quality education, not only for visually impaired female students but also for their male counterparts?

In 1986 structural adjustment programme phase one was introduced in Tanzania, whereby in education, government expenditure cutbacks and cost sharing were introduced.

26. What circumstances caused the government to introduce expenditure cutbacks and cost sharing in education?

27. What educational aspects do parents/guardians have to share the cost?

28. What educational aspects have remained under the government’s responsibility?

29. To what extent has structural adjustment programme in education achieved its goals so far?

30. What can you say when comparing the periods before and after structural adjustment programme in education in terms of quality education and improvement of access and acquisition of education for visually impaired girls/women?
Consequences of lack of education on visually impaired women

31. What can you say about the real situation facing visually impaired women who have either nor or poor education in terms of:
   (a) Knowledge and skills,
   (b) Employment,
   (c) Health,
   (d) Poverty,
   (e) Self-confidence,
   (f) Discrimination,
   (g) Marital status,
   (h) Life expectation,
   (i) Security,
   (j) Independent living.

32. What problems do you know visually impaired women face as a result of either lack of or poor education?

Measure

33. What strategies has the ministry planned or is planning to improve the quality, equity and access of visually impaired girls/women to education in Tanzania?

34. How do you think the provision of education and support to visually impaired girls/women could be improved? Or in raising access and acquisition of education for visually impaired girls/women, what measures do you think are important and necessary to be made by:
   (a) Parents/guardians,
   (b) Village/community,
   (c) Government (local and central),
   (d) Organisations of and for visually impaired people, and
   (e) Visually impaired women themselves.
APPENDIX 7

INTERVIEW STRUCTURE FOR LEADERS OF THE ORGANISATION OF VISUALLY IMPAIRED PEOPLE

Personal Data

1. Name of the Organisation
2. Name of the leader
3. Sex
   (a) Female
   (b) Male
4. Position in the organisation.
5. Level of education
6. Experience (Duration in the Office).
7. When was the organisation started?
8. What are the main aim and objectives of the organisation?

Factors inhibiting Visually Impaired Women in Accessing Education

From your experience as a visually impaired person and one involved in disability issues:

9. To what extent has the organisation achieved the goals and objectives you have mentioned above?
10. How many visually impaired members does your organisation have?
(a) Men
(b) Women
11. Do you have detailed records about their education, employment, their marital status, kind of spouses (disabled, non-disabled) number of children (disabled non-disabled) etc. (Yes, No).
12. If yes, how many have attended school at any level:
(a) Men
(b) Women
13. What do you think is the perception of the society towards visual impairment? Is there any overt or covert discrimination against visually impaired people? Do visually impaired people thought to have fewer rights? If so, which ones? Which rights are thought visually impaired people do not deserve?
14. Have you come across or heard any traditional practices or customs, which discriminate against disabled people or disabled women in particular? (Please explain).
15. Are people with different impairments treated differently from one another? If so, how?
16. What labels are attached to visually impaired people?
17. How such labels undermine their opportunities to education?
18. What is the society's attitude concerning visually impaired girls/women's education?
19. How is the situation of education for visually impaired women compared to men? (Please explain).
20. What specific programmes and strategies your organisation has made so far to address educational needs of visually impaired girls/women for the past ten years?
(a) What has been the response of visually impaired girls/women themselves to those programmes and strategies?
(b) What has been the response of their parents/guardians to those programmes and strategies?
(c) What has been the response of the community/society about those programmes and strategies?
(d) To what extent are those programmes and strategies successful?

21. What educational support does your organisation give to visually impaired women at present?

Disabled people in Tanzania face many socio-economic problems e.g. education, unemployment, health, poverty etc. As an organisation, what is your stand about these problems:

22. Are the problems of disabled people lie within individuals and their families of the wider society? Or

23. Are they a result of poverty, social and attitudinal barriers e.g. lack of legislation, inappropriate education system, and disabling environment? (Please explain).

24. Does your organisation use any model in addressing disability issues? (Yes, No).
If yes, what is it?

25. Is there any government disability policy? (Yes, No). If Yes, Please explain the extent to which it takes into account various needs of disabled people.

26. Do you know if there is any government special needs education policy? (Yes, No) If yes;

27. Have you ever read it? (Yes, No).
If Yes,
(a) How has it changed over time?
(b) What impact of its specific content has been to visually impaired women?

In 1986 structural adjustment programme phase one was introduced in Tanzania, whereby in education government expenditure cutbacks and cost sharing were introduced. The ultimate aim was to improve the content, quality and achievement in education.

28. What is your observation and of the organisation concerning this programme?

29. To what extent has this programme helped to improve or undermine the quality of education, especially regarding access and acquisition of education by visually impaired females and males?

30. What can you say when comparing the periods before and after structural adjustment programme in education in terms of quality and equity between visually impaired women and men?

31. It is argued that disability and poverty are interwoven:
(a) Do you agree with this argument? (Yes, No).
(b) If Yes, what forms or manifestations of economic hardships are pertinent in the families of disabled people and disabled people themselves?
(c) How do these economic hardships contribute in impeding educational opportunities for visually impaired girls/women?
Consequences of Lack of Education on Visually Impaired Women

32. What can you say about the real situation facing visually impaired women who have either nor or poor education in terms of:

(a) Knowledge and skills,
(b) Employment,
(c) Health,
(d) Poverty,
(e) Self-confidence,
(f) Discrimination,
(g) Marital status,
(h) Life expectation,
(i) Security,
(j) Independent living.

Measures

33. What are your future plans in the whole question of access and acquisition of education by visually impaired girls/women?

34. How do you think the provision and support of education to visually impaired girls/women could be improved? Or, in raising access and acquisition of education for visually impaired girl/women, what measures do you think are important and necessary to be made by:

(a) Parents/Guardians,
(b) Village/Community,
(c) Government (local and central),
(d) Organisations of and for visually impaired people,
(e) Visually impaired women themselves.
APPENDIX 8

INTERVIEW STRUCTURE FOR OFFICIALS OF THE ORGANISATION FOR VISUALLY IMPAIRED PEOPLE

Name of the Organisation

*Personal Data*

1. Name of the official—
2. Sex
   (a) Female
   (b) Male
3. Position in the organisation
4. Level of education
5. Experience (Duration in the Office).
6. When was the organisation started?
7. What are the main aim and objectives of the organisation?

*Factors inhibiting Visually Impaired Women in Accessing Education*

As a staff member of an organisation for visually impaired people whose one of its responsibility is to provide for education and rehabilitation services to visually impaired people:

8. How much has the organisation achieved the goals and objectives you have mentioned above?
9. How many visually impaired people have benefited from rehabilitation and education services provided by your organisation so far?
10. In providing educational services to visually impaired people, in which ways has your organisation been delivering these services? (Please explain).
11. What do you think is the perception of the society towards visual impairment? Is there any overt or covert discrimination? Are visually impaired people thought to have fewer rights? If so, which ones? Which rights are thought visually impaired people do not deserve?
12. Have you come across or heard any traditional practices or customs which discriminate against disabled people? (Please explain).
13. Are people with different impairments treated differently from one another? If so, how?
14. What labels are attached to visually impaired people?
15. How such labels undermine their opportunities to education?
16. Women are discriminated against in many socio-economic and development programmes. The situation is worse for disabled women because they suffer double discrimination as women and as disabled people:
   (a) Do you agree with this statement? (Yes, No).
   (b) If yes, how is the situation of education for visually impaired women compared to men? (Please explain).
   (c) How has your organisation been addressing the educational needs of visually impaired girls/women?
17. What specific programmes and strategies your organisation has made so far to address educational needs of visually impaired girls/women for the past ten years?
(a) What has been the response of visually impaired girls/women themselves to those programmes and strategies?
(b) What has been the response of their parents/guardians to those programmes and strategies?
(c) What has been the response of the community/society about those programmes and strategies?
(d) To what extent are those programmes and strategies successful
18. What educational support does your organisation give to visually impaired girls/women at present?
19. Disabled people in Tanzania face many socio-economic problems e.g. education, unemployment, health, poverty etc. As an organisation, what is your stand about these problems?
20. Are the problems of disabled people lie within individuals and their families of the wider society? Or
21. Are they a result of poverty, social and attitudinal barriers e.g. lack of legislation, inappropriate education system, and disabling environment? (Please explain).
22. Does your organisation use any model in addressing disability issues? (Yes, No).
   If yes, what is it?
23. Is there any government disability policy? (Yes, No).
   If Yes, Please explain the extent to which it takes into account various needs of disabled people.
24. Do you know if there is any government special needs education policy? (Yes, No).
   If Yes,
25. Have you ever read it? (Yes, No).
   If Yes,
   (a) How has it changed over time?
   (b) What impact of its specific content has been to visually impaired women?

In 1986 structural adjustment programme phase one was introduced in Tanzania, whereby in education government expenditure cutbacks and cost sharing were introduced. The ultimate aim was to improve the content, quality and achievement in education:

26. What is your observation and of the organisation concerning this programme?
27. To what extent has this programme helped to improve or undermine the quality of education, especially regarding access and acquisition of education by visually impaired females and males?
28. What can you say when comparing the periods before and after structural adjustment programme in education in terms of quality and equity between visually impaired women and men?
29. It is argued that disability and poverty are interwoven:
   (a) Do you agree with this argument? (Yes, No).
   (b) If Yes, What forms or manifestations of economic hardships are pertinent in the families of disabled people and disabled people themselves?
(c) How do these economic hardships contribute in impeding educational opportunities for visually impaired girls/women?

Consequences of lack of education on visually impaired women

30. What can you say about the real situation facing visually impaired women who have either nor or poor education in terms of:

(a) Knowledge and skills,
(b) Employment,
(c) Health,
(d) Poverty,
(e) Self-confidence,
(f) Discrimination,
(g) Marital status,
(h) Life expectation,
(i) Security,
(j) Independent living.

Measures

31. What are your future plans in the whole question of access and acquisition of education by visually impaired girls/women.

32. How do you think the provision and support of education to visually impaired girls/women could be improved? Or, in raising access and acquisition of education for visually impaired girl/women, what measures do you think are important and necessary to be made by:

(a) Parents/Guardians,
(b) Village/Community,
(c) Government (local and central),
(d) Organisations of and for visually impaired people,
(e) Visually impaired women themselves.
Appendix 9

Photographs

Photograph No. 1

A ten-year-old visually impaired girl on the left and the researcher on the right.

Photograph No. 2

A twenty-year visually impaired woman on the left, and the researcher on the right.

Picture 1: The father of this visually impaired girl had refused to take her to school, although the school itself was just 20 kilometres from the village. The girl said that her parents regarded her as a 'video' (spectacle) and said that they could not take a video to school. As can be seen in photograph 1, her living environment, including the hut (made of clay/mud walls), is in a poor state. The girl herself is covered by dust and has no shoes.

Picture 2: This woman has never attended school. She is a single parent of two children, a boy and a girl. On the photograph, the girl child is carried by this researcher while the boy is carried by his mother. The boy is half-naked and the mother is barefoot.
3. Employed visually impaired woman on the left, the researcher on the middle and unemployed visually impaired woman on the right. The two children on the middle and unemployed visually impaired woman on the right. The two children on the photograph belong to the unemployed woman.

**Picture 3:** From this photograph, one can see the difference between the two visually impaired women. The employed one looks smart, wears shoes and a pretty dress. The unemployed woman is barefoot. Her children are also barefoot and their clothes look dirty.

4. A fifteen-year old visually impaired girl on the left, and the researcher on the right.

**Picture 4:** As can be seen from this photo, this girl is pregnant. She stopped going to school in standard 4 due to her inability to pay for school costs. Due to various factors, she engaged in some love affairs although her partner deserted her after realising that she was pregnant.
5. A fifteen year boy child on the left the mother of the boy child on the middle and the researcher on the right.

6. A visually impaired woman with her baby on the left and the researcher on the right.

Picture 5: The room in which the photo was taken is empty. It is the place where this visually impaired woman and her son live. Both mother and son earn their living through begging. Owing to poverty, the mother has failed to send her son to school and the same poverty forces her to depend on her son's begging. Both, as can be seen, walk barefoot.

Picture 6: The photo shows a visually impaired woman with only one piece of cloth to wrap up. It covers just half of her body. She is a single parent.
Photograph No. 7

Photograph No. 8

Picture 7: The photo shows one of the most serious incidents of abject poverty facing disabled women. The single-room hut is too low for an average adult to stand upright. Inside there is some millet in one of the corners. The room is used as a store, bedroom, a living room and as a kitchen. In some cases, goats, calves, sheep and chicken are kept here too. As usual, the woman is barefoot.

Picture 8: Just like in picture 7, this photograph also shows the same type of environment whereby everything is kept under one roof. There are baskets and clothes hanging on the wall. The walls of the room show some cracks big enough to see through. In almost all the photos taken inside the rooms, there are no beds and mattresses. Visually impaired women normally sleep on animal hides or traditional reed/straw mats on the floor. Like the other women in the other photos, this woman is also barefoot.
Photographs number 9 and 10 showing poor infrastructure of some of the areas where this research was conducted. For example, photograph Number 10 shows a road passing through a seasonal river which during rainy seasons cuts off road communication between one area and another.
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Interviews with Key Informants


