



***Higher Education Monitor***

***South African Higher Education  
Responses to Students with Disabilities.***

***Equity of Access and Opportunity?***

*Monitoring and Evaluation Directorate (CHE)*

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### ***South African Higher Education Responses to Students with Disabilities.***

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## CONTENTS

<b>FOREWORD</b>	v
<b>ACRONYMS</b>	vi
<b>CHAPTER 1</b> Framing the investigation	1
<b>CHAPTER 2</b> Supporting the participation of students with disabilities	15
<b>CHAPTER 3</b> Challenges and emerging issues	35
<b>CHAPTER 4</b> Conclusion	59
<b>BIBLIOGRAPHY</b>	62

## FOREWORD

The discussion document *Towards a Framework for the Monitoring and Evaluation of Higher Education*, published by the Council on Higher Education (CHE) in 2004, explained the relationships between *monitoring*, *evaluation* and *research* as different methodologies used to understand higher education at the systemic and institutional levels. *Monitoring*, the document argued, depends on the data it gathers from management information systems that operate at various levels of the higher education system, which it uses to help to identify trends. *Evaluation* in turn depends to a large extent on the data provided by monitoring systems, which it uses to assess the achievements of policies and interventions against set goals or benchmarks. *Research* is independent of both monitoring and evaluation: it does not depend on the existence of management information systems and it does not have to assess what an intervention has achieved. Neither does it depend on the existence of evaluative studies, although these studies can provide useful and interesting insights into a problem. Research as a specific type of intellectual enquiry can construct its own data sources according to its purposes, and does not have to come to a formative or summative judgment. Nevertheless, social science research can analyse and interpret different types of data in order to highlight problem areas, establish explanatory links, identify information gaps, suggest possible conclusions and make recommendations in order to solve a particular problem.

The CHE suggested in 2004 that the Monitoring and Evaluation Directorate was going to use all three methodologies – monitoring, evaluation and research – to deal with different aspects of the higher education system depending on the nature of the issue it was trying to address. This third issue of the *Higher Education Monitor* is a good example of the differing relations between monitoring, evaluation and research at different junctures of policy implementation. It also shows how, in a context of weak monitoring systems and unfinished policy implementation, monitoring and evaluation give way to research as a more suitable tool to understand institutional and individual responses to a policy issue.

In 1997 the White Paper on an Integrated National Disability Strategy remarked on the dire lack of data on disability in South Africa, data which would allow government and relevant organisations to design, plan and implement strategies for disabled persons as well as to measure their impact. To a large extent, the lack of data on disability reflects the ineffective role that management information systems have had up to now, both at different levels of the state agencies and departments and at the level of the institutions and organisations that deal with disability. This situation can be explained through the absence of management information systems altogether or, more often, by the fact that these systems do not collect data on disability, or by the fact that confusions in the definition of disability undermine accurate data collection. In the case of the Higher Education Management System (HEMIS) of the Department of Education (DoE), although the system includes disability as a field of collectable data, it has not yet been implemented. Higher education institutions (HEIs) are not yet obliged to provide data on disabled students as part of their submissions to the DoE. Yet, as will be seen in the report, this is not solely a HEMIS problem. HEIs have very uneven capacity to systematically collect reliable data on disability in their own campuses.

As a consequence of this, no systematic central monitoring of disability in higher education has been put in place. This, in turn, undermines most attempts at evaluating policy implementation in relation to disabled students. Thus, rather than proceeding from the analysis of monitoring data to the evaluation of policy implementation to the setting up of research projects to look into specific issues suggested by monitoring and evaluation, it has been necessary to take a different route. Qualitative and quantitative research, done with different social sciences methodologies, became the point of departure to stress the need to monitor and to evaluate social and political interventions in the terrain of disability among students enrolled at HEIs.

In this regard, this study constitutes, as far as we are aware, the first systematic attempt at obtaining baseline data on disability among higher education students directly from HEIs. The study was undertaken as a collaborative project between the CHE, the Centre for the Study of Higher Education (CSHE) at the University of the Western Cape, the Inclusive Education Directorate of the Department of Education, and the South African Federal Council on Disability (SAFCD).<sup>1</sup>

Despite its attempt to collect baseline data through questionnaires, this study is not focused on the quantification of the prevalence of disability among higher education students enrolled at public HEIs. On the contrary, the study is very aware of the limitations of the quantitative information yielded. The research project was designed to generate knowledge about the different ways in which public HEIs work to broaden access for disabled students. The investigation probed institutions' familiarity with policies, and it examined instances of the creation and resourcing of specific structures to deal with the special needs of disabled students.

The lines of enquiry pursued in this research stem from a conceptual engagement with different local and international understandings of disability and their implications for policy making and the modification of social practices as well as the manner in which these debates have influenced South African policies on disability. The South African disability movement and the South African government approach disability from a social model. This model sees the circumstances of people with disabilities and the discrimination they face as a socially created phenomenon which is not related to the impairments of disabled people. Consistent with this, the response to disability in the social model is the restructuring of society for it to be able to deal appropriately with people with impairments. Unsurprisingly then, this research focused on the ways in which HEIs respond to the special needs of disabled students.

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<sup>1</sup> The project was initiated in May 2003 with the setting up of a project management and research team within the CSHE. The final draft report was submitted to the CHE in March 2005. The following people made up the research team and contributed in different ways to the success of the project: Ms Colleen Howell, project coordinator and primary researcher (CSHE, UWC); Mr Raji Matshedisho, primary researcher (UCT); Prof Sandy Lazarus, research advisor (Education Faculty, UWC); Prof David Cooper, research advisor (Department of Sociology, UCT & Education Faculty, UWC); and Ms Petronella Linders (SAFCD).

The methodology used in the study, a combination of surveys and interviews, allowed the researchers to identify a range of practices in relation to disabilities and to analyse how these relate to the enabling or constraining circumstances found at institutions. The work highlights the roles of structures and individuals in both overcoming and stressing institutional constraints and shows that while adequate financial resources are a key element in creating an enabling teaching and learning environment for disabled students, personal attitudes play an even greater part in facilitating access and asserting equity.

In undertaking this project the CHE acknowledged that disability constitutes an important, and often overlooked, aspect of the definition of equity of access to higher education. Bringing disability to a more prominent place in our analysis of policy implementation and policy impact has a number of important implications for the CHE as well as for other higher education stakeholders. The findings of this study suggest areas for medium- and long-term interventions for different bodies and organisations.

For the CHE Monitoring and Evaluation Directorate the results of the study highlight the need to start a process of development of indicators to monitor access and equity in relation to disability. An important part of this process would be to approach the DoE to officially request HEIs to provide information on disabled students in their submissions to HEMIS. The development of indicators on disability will also require further research on international practices in monitoring disability in higher education.

From the point of view of the HEQC the research highlights that the assessment of the quality of students' teaching and learning experiences needs to include a specific focus on both the concrete experience of students with disabilities at HEIs and the training of academic staff to deal with disabled students in a supportive manner.

From the point of view of HEIs themselves the research findings suggest a number of areas for reflection and intervention. First, and foremost, is the need to develop internal systems to identify disabled students and their profiles, to understand their needs and to monitor the extent to which these needs are met at individual institutions. The development of support mechanisms for disabled students and academic staff in order to facilitate teaching and learning processes seems to be the second area for institutional intervention.

From the perspective of the DoE's Inclusive Education Directorate, the research points out that there is often weak and incomplete awareness at HEIs' dedicated disability offices or equivalent of government policies directly or indirectly related to disability. Which strategies can and should be used to achieve a clearer understanding of the ways in which White Paper 3, the Higher Education Act, White Paper 6 on disability and the National Plan on Higher Education relate to each other in the specific area of equity and disability?



From the point of view of the Higher Education Branch of the DoE, the study suggests that mergers are impacting differently on the ways in which disabled students are dealt with at each newly-merged institution. This seems to depend on the levels of awareness, resourcing and the kind of historical practices vis-à-vis disability predominant at each merging institution. This suggests the need to, on the one hand, find mechanisms to monitor the implementation of equity goals at newly-merged institutions, and on the other, suggests the difficulties in funding equivalent provision of services and education for disabled students at all the campuses of merged and incorporated institutions.

None of these issues can be tackled and solved immediately. On the contrary, time, resources and careful reflection are required for the analysis of the specific policies and the establishment of adequate monitoring systems with a view to evaluate impact and to better understand existing practices, including in this process the voices of disabled students themselves.

As these elements take shape and different stakeholders find their pace and space in this process, the CHE will use this issue of the *Higher Education Monitor* to generate opportunities for public discussion and engagement with this research report.

*Dr Lis Lange*  
*Director: Monitoring and Evaluation*  
*September 2005*

## ACRONYMS

CASE	Community Agency for Social Enquiry
CHE	Council on Higher Education
CSHE	Centre for the Study of Higher Education
DEAFSA	Deaf Federation of South Africa
DoE	Department of Education
DPI	Disabled Peoples International
DPSA	Disabled People South Africa
GLADNET	Global Applied Disability Research and Information Network
GUNI	Global University Network for Innovation
HAI	Historically Advantaged Institution
HDI	Historically Disadvantaged Institution
HEI	Higher Education Institution
HEMIS	Higher Education Management Information System
ILO	International Labour Organisation
INDS	Integrated National Disability Strategy
NCSNET/NCESS	National Commission on Special Needs in Education and Training and National Committee on Education Support Services
ODP	Office of the Deputy President
OSDP	Office on the Status of Disabled Persons
QAA	Quality Assurance Agency for Higher Education (UK)
SAFCD	South African Federal Council on Disability
SAHRC	South African Human Rights Commission
SRC	Student Representative Council
UCT	University of Cape Town
UPIAS	Union of the Physically Impaired Against Segregation (UK)
UWC	University of the Western Cape
WHO	World Health Organisation



## **FRAMING THE INVESTIGATION**

This chapter presents the conceptual context of the research. It is organised in two sections. The first focuses on the international and local literature on disability and explores the consequences of the medical and the social models of disability for the definition of disability, the quantification of disabled people and the design of social interventions. The second section then moves the focus to South Africa to explore changing definitions of and approaches to disability, the difficulty of ascertaining the size of the existing and potential pool of higher education students with disabilities, and the host of policies which frame disabled students' access to higher education.

### **UNDERSTANDING, DEFINING AND TALKING ABOUT DISABILITY**

As with any research that grapples in some way with the issue of disability, this study has been framed by a number of assumptions about what disability is and therefore who, in the higher education context, may be regarded as disabled students. Central to the assumptions made in this study is the recognition that the concept of disability is highly contested. While such debate may initially seem unimportant to considerations of policy implementation and monitoring, it is in fact central to the way in which the issues addressed in this study are interpreted, understood and evaluated. In particular, the way in which we understand and interpret disability determines who we define as being disabled or having a disability, the prevalence of disability in our society and thus the size of the existing and potential pool of students with disabilities, and, most importantly, what is needed at both system and institution level to ensure equity for disabled students and prevent any form of unfair discrimination against them.

Over the last 20 years there have been substantial challenges to dominant perceptions of and attitudes to disabled people. Such challenges, mainly articulated by disabled people themselves and the organisations which they have formed, have focused primarily on questioning the notion of disability as an individual, tragic occurrence that classes a person as sick or incapacitated in some way and thus dependent on the good will and care of others. In this view, a person who has some kind of physical or sensory impairment is seen as being incapable of undertaking various activities in ways which are regarded as normal. Such notions of disability imply that people who have impairments will 'always be seen as inferior, or second rate, or inherently flawed' (DPSA, 2001:10). They are seen as disabled because of the existence of an impairment rather than because of the way society responds to the

impairment and whether it provides the accommodation or support they may need to participate equally. Thus a person who uses a wheelchair is regarded as disabled because he or she cannot walk up a flight of stairs rather than because society has failed to provide ramps to enable him or her to enter a building.

This dominant way of understanding disability and the associated attitudes and responses to disabled people is most often referred to as the medical discourse on disability (Fulcher, 1989:26), or in more popular language *the medical model of disability*. It has tended to focus attention on the nature of the person's impairment and the degree to which this impairment may or may not prevent the person from carrying out various tasks or participating in activities in ways regarded as normal. Such definitions focus on the physiology of the impairment and the perceived deficits of the individual person rather than on the barriers in society that prevent him or her from doing these things. They focus, for example, on the nature of a person's spinal injury rather than on the physical barriers that limit his or her mobility as a wheelchair user, or on the degree of a person's deafness rather than on accommodating the use of sign language as the language of communication and instruction for that person. Further, such understandings of disability are premised on value judgements about what is normal and what is not. People who carry out various activities in a different way from others or with some form of assistive device, including students in higher education, are seen as abnormal and inferior and thus dependent on goodwill initiatives and interventions to compensate for their perceived deficits.

Opponents of the medical model argue that this way of looking at disability has contributed to the ongoing discrimination against and marginalisation of disabled people in a number of important but often unrecognised ways. By focusing on the impairment and the 'objective' degree to which a person cannot undertake various activities in the 'normal' way, attention is distracted from issues of discrimination and the rights of people who have impairments. In this way disability becomes something that is 'imposed by society when a person with an impairment is denied access to full economic and social participation' (SAHRC – South African Human Rights Commission, 2002:10). If disability is looked at in this way then a definition of disability must describe the relationship between a person with an impairment and the society or environment of which he or she is part. This alternative way of looking at and defining disability is most often referred to as *the social model of disability* (Oliver, 1990). Such an approach to disability derives from social and political understandings of disability, where the focus is on the nature and organisation of society and its response to people with impairments rather than on the nature and extent of the individual's impairment. The following is a definition of disability according to the social model:

Disability refers to the disadvantage or restriction of activity caused by the way society is organised which takes little or no account of people who have physical, sensory or mental impairments. As a result such people are excluded and prevented from participating fully on equal terms in mainstream society. Disability is thus imposed on people with impairments who, as a result, become disabled not by their impairments, but by society. (UPIAS, 1976 in Philpott & McLaren, 1997:181).<sup>2</sup>

From the perspective of the social model, disability can therefore be understood only by focusing on the relationship between persons with impairments (or perceived impairments) and the society or environment of which they are part. In the higher education context this refers primarily to the relationship between a student with an impairment and the process of teaching and learning and research. Are there conditions in higher education which allow disabled students to participate fully in this process, even if their participation entails using different forms of engagement with the curriculum such as Braille or sign language? To answer this question it is necessary to examine whether there are any barriers in higher education institutions or in society at large that prevent or limit the emergence of conditions that would enable disabled people to participate fully in higher education.<sup>3</sup> This implies considering the mechanisms that need to be put in place to create an environment where all students, including those with disabilities, can participate equally in the process of teaching and learning. Although the particular experience of disability in South Africa is discussed in more detail in the next section of this chapter, it is important to note here that a social model of disability has underscored the government's approach to addressing disability issues during the ten years of democracy since 1994. This understanding and its importance for government policy and programmes are best captured in the White Paper on an Integrated National Disability Strategy (INDS), published by the government, Office of the Deputy President, in 1997 (ODP, 1997).

The policy outlined in this paper is based on the idea that in the South African context a social model perspective involves recognising, understanding and addressing disability as a human rights and development issue, where key principles such as the non-discrimination and equity entrenched in our Constitution are appropriately applied to the experiences of disabled people in this country. The INDS explains the social model approach in the following way:

The social model of disability suggests that the collective disadvantage of disabled people is due to a complex form of institutional discrimination. This discrimination is

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2 The notion of a social model of disability has its origins in the disability rights movement of the United Kingdom. In 1976 disability activists in the UK, who had come together in an organisation called the Union of the Physically Impaired Against Segregation (UPIAS), challenged dominant understandings of disability in a ground-breaking document called *Fundamental Principles of Disability* (1976). The ideas that were put forward in this document were then taken forward by Michael Oliver, a disabled activist and sociologist in the UK, who captured them in the notion of a 'social model' of disability (1981;1990). Although this term has now come to represent the critique by disabled people of dominant discourses around disability, it is important to note that both Oliver (1996) and his colleague Vic Finkelstein (2002) emphasise that the 'social model' of disability was not so much a theory of disability as a tool for understanding and taking forward the struggle by disabled people to challenge their oppression and discrimination and put forward an alternative framework for understanding their experiences (Barnes & Mercer, 2004). The social model of disability has informed the South African government's strategy for addressing the needs of disabled people since 1994.

3 There are a number of people who would argue that if one is true to a 'social model' approach to disability then the correct term should be 'disabled person' or 'disabled people' – where the adjective 'disabled' describes the person's experience or the oppression a person with an impairment is subjected to by society. In other words, the person is disabled by society, as has been discussed above. However, a number of people within the disability movement in South Africa argue that the terms 'persons with disabilities' or 'people with disabilities' are also acceptable within a social model approach. Their argument is that emphasising the person first is important, and their disability denotes the existence of an impairment which society uses as a basis for discrimination and the denial of fundamental rights (see especially SAHRC, 2002; DPSA, 2001 for discussions about the appropriate use of terminology). For these reasons this report has chosen to make use of both the terms that are regarded as most appropriate.

fundamental to the way society thinks and operates... [it] is based on the belief that the circumstances of people with disabilities and the discrimination they face are socially created phenomena and have little to do with the impairments of disabled people. The disability rights movement believes, therefore, that the 'cure' to the 'problem' of disability lies in restructuring society. The social model of disability implies a paradigm shift in how we construct disability. Thus:

- It is the stairs leading into a building that disable the wheelchair user rather than the wheelchair.
- It is defects in the design of everyday equipment that cause difficulties, not the abilities of people using it.
- It is society's lack of skill in using and accepting alternative ways to communicate that excludes people with communication disabilities.
- It is the inability of the ordinary schools to deal with diversity in the classroom that forces children with disabilities into special schools.

The social model therefore emphasises two things: the shortcomings of society in respect of disability, and the abilities and capabilities of people with disabilities themselves... it [therefore] implies that the reconstruction and development of our society involves a recognition of and intention to address the developmental needs of disabled people within a framework of inclusive development. (ODP, 1997)

The document argues further that if disability is understood and responded to in this way, then ensuring equity for disabled people in all aspects of society

implies that the needs of every individual are of equal importance, and that needs must be made the basis for planning. It further implies that resources must be employed in such a way as to ensure that every individual has equal opportunities for participation in society... [such an] approach to disability focuses on the removal of barriers to equal participation and the elimination of discrimination based on disability. (ODP, 1997)

It is not possible within the scope of this report to go into the details of the academic debates around the social model perspective which now characterise the field of social enquiry most often referred to as 'disability studies'. It is important to note, however, that although there has been substantial rejection of the medical model, some writers, including disabled people, have raised concerns with aspects of a social model approach. In the context of this study two of the concerns raised are important to mention. Firstly they object to the emphasis on the socially constructed nature of disability. They argue that this pays insufficient attention to the personal experience of impairment and the limitations it imposes, and that even if all the barriers that a disabled person experiences in society were removed the existence of an impairment would still create barriers for him or her that 'are more difficult to regard as entirely socially produced or amenable

to social action' (French, 1993:17). Secondly they object to the implications of the socially constructed nature of disability for actual social interventions. They argue that regarding the creation of equal opportunities as purely about changing our way of seeing disabled people and our attitude to them fails to take into account the material basis of disability, which they argue must be central to a social model perspective (Oliver, 1990). If it is not recognised then, allocating resources to addressing the social, economic and political barriers experienced by disabled people and providing the facilities which will enable them to participate equally, such as a ramp into a building, are not of primary importance.

To overcome inequalities which have socio-economic roots requires more than changing attitudes: it requires addressing the structural conditions that lead to such inequalities. Thus in the case of the institutional environment in higher education we need to consider both the attitudinal and the structural barriers (and their interconnectedness) that create the conditions in which disabled students are hindered from participating equally in the process of teaching and learning. To do this, as the study shows, requires a range of strategies which must include the provision of sufficient resources to break down existing barriers and set up the necessary support systems.

One fundamental consequence of applying the social model of understanding disability is that shifting attention from the individual and the nature of his or her impairment to the relationship that exists between that person and the society in which he or she lives makes it more difficult to categorise people as disabled or non-disabled. The nature of that relationship and the experience of disability are always dependent on how that society is structured and functions. A social model perspective forces us to turn our attention away from defining who is or is not disabled to identifying and addressing the barriers which in a given society restrict disabled people's participation in 'normal' life. Thus in the higher education environment the focus shifts from trying to work out who is disabled to identifying and removing the barriers that restrict their access and prevent them from participating equally.

However, consensus about the validity of a social model of understanding disability is hard to achieve when, in the context of social interventions, it becomes necessary to define disability in order to implement redress policies. As Aldred Neufeldt, chair of the Global Applied Disability Research and Information Network (GLADNET) at the International Labour Organisation (ILO) argues, people have both a positive and a negative stake in determining who is disabled:

Some are interested so that environments can be made accessible and charges of discrimination avoided. Others want to know because of the tax or income support benefits that can follow. On the other side of the coin, insurance firms, tax departments and others want to know because of the implications for revenue or expense involved. Leaders of advocacy organizations and governments want to know for policy, planning and advocacy purposes. (Neufeldt, 2002)



From the perspective of disabled people, these concerns are perhaps best expressed by Disabled People South Africa (DPSA)<sup>4</sup> who question the very need to define them:

People with disabilities have for some time now struggled with the issue of defining disability. Policy-makers and service providers are usually quick to point out not only the advantages, but in fact the necessity, of categorising disabled people into clearly defined groups for the purposes of service delivery, education, social security, employment equity et cetera. Experience over the years, however, taught people with disabilities that definitions tend to become mechanisms that are used to exclude and marginalize disabled people, rather than as enabling tools for positive action, development and social integration. (DPSA, 2001:1)

These concerns are particularly apparent in debates about the validity and reliability of studies of and postulations about the prevalence of disability in any society.<sup>5</sup> While figures on disability can inform effective and appropriate planning for equalising opportunities for disabled people, they can also be used to justify restricting access to necessary benefits or support systems or failing to provide essential services. Such debate directly affects processes designed to establish appropriate and equitable participation rates of disabled students in the higher education system. However, the fact that definitions of disability and definitions of higher education vary from country to country makes it difficult to use international norms to define norms for these rates (GUNI, 2004).

Despite the difficulties and, as we have seen, the resistance to defining students with disabilities, the Quality Assurance Agency of the United Kingdom has developed a code of practice to help higher education institutions achieve equitable and appropriate provision for these students. In answer to the question ‘Who is disabled?’ this code suggests:

There are many different ways of defining who is disabled. This code follows no particular model. Institutions should be aware that disability covers a wide range of impairments including physical and mobility difficulties, hearing impairments, visual impairments, specific learning difficulties including dyslexia, medical conditions and mental health problems. Some of these impairments may have few, if any, implications for a student’s life or study. Others may have little impact on day to day life but may have a major impact on a student’s study, or vice versa. Some students may already be disabled when they apply to an institution, others may become disabled or become aware of an existing disability only after their programme has started. Others may have fluctuating conditions. Some students may be disabled temporarily by accident or

<sup>4</sup> DPSA was formed in 1984 by disabled people in South Africa who saw the need for a representative body, controlled and run by disabled people, to plan and implement programmes of benefit to disabled people. At present it is made up of 150 self-help groups and member organisations throughout the country. DPSA is the democratic cross-disability umbrella body of organisations of people with disabilities in South Africa, recognised as the National Assembly of Disabled People by Disabled Peoples International (DPI), which has observer status in the United Nations (see [www.dpsa.org.za](http://www.dpsa.org.za)).

<sup>5</sup> This issue is especially important in the context of so-called developed and developing countries. It remains a highly contested issue in South Africa and is discussed in more depth in the next section of this chapter.

illness. Institutions will want to ensure that their provision and structures take into account, so far as possible, the full range of needs which disabled students may have, and that their provision is sufficiently flexible to cater to individuals' changing needs throughout their periods of study. (QAA, 1999)

The following section discusses these issues and their relevance for understanding the experiences of disabled people in accessing higher education in South Africa.

## **DISABILITY AND PUBLIC HIGHER EDUCATION IN SOUTH AFRICA**

There are two important considerations to take into account when researching what disabled people experience when they try to access the higher education system in South Africa. The first is the lack of accurate, reliable and useful information about disability in South Africa. This problem, which is inherent to addressing disability issues and not restricted to developing countries, affects the way we measure the prevalence of disability in our society and the extent to which disabled people have been discriminated against and prevented from accessing essential services such as education. The second is the difficulty experienced by disabled people in South Africa, especially disabled black people, who have been historically disadvantaged in a number of ways under the apartheid system, including substantial exclusion from all levels of education. The marginalisation that people experienced was caused not only by the race, gender and class inequalities of the apartheid system but also by the way the apartheid government understood and responded to disability. The complex interaction between the various forms of discrimination under apartheid was nowhere more evident than in the lived experiences of disabled people. While the majority of disabled white people were disempowered by a system which saw them as a health and welfare problem (a medical model approach), disabled black people's disempowerment was exacerbated by the poverty and violence resulting from the apartheid system. It is against this background that disabled people's experiences in accessing higher education must be considered.

### **The prevalence of disability in South Africa and the lack of reliable information**

In 1997 the INDS stated that

There is a serious lack of reliable information on the nature and prevalence of disability in South Africa. This is because, in the past, disability issues were viewed chiefly within a health and welfare framework. This led naturally to a failure to integrate disability into mainstream government statistical processes. (ODP, 1997:1)

This failure was exacerbated by differing definitions of disability, the use of differing methodologies in the collection of survey data, negative attitudes towards disabled people which undermine the conduct of research, a poor infrastructure for disabled people in

underdeveloped areas, and levels of violence in society which have impeded data collection (ODP, 1997:1)

Despite the important advances since 1994 towards integrating disability into mainstream statistical processes and improving data collection, sources continue to differ on the prevalence of disability in South Africa and there is still debate about definitions, methodologies and the ongoing impact of poor infrastructural conditions on data collection. According to the South African Human Rights Commission (2002), estimates of disability prevalence 'from a range of sources suggest that more than seven percent of the total population, or over three million people, have a moderate or severe disability' (SAHRC, 2002:16). However, according to data collected in the 2001 Census there are 2 255 982 people with disabilities among a total population of 44 819 778 (StatsSA, 2003).<sup>6</sup> This constitutes a prevalence rate of five percent, which falls between international estimates of four percent in developing countries and seven percent in developed countries (Health Systems Trust, 1999).<sup>7</sup> From these figures we can only estimate a disability prevalence in South Africa of somewhere between four and seven percent.<sup>8</sup> Moreover, these estimates themselves remain contested, especially by disabled people's organisations who suggest that this is an underestimation of the number of disabled people in the country. (DPSA, 2003)

While prevalence figures remain disputed, what is generally not questioned is the disproportionately high incidence of disability amongst poor people (SAHRC, 2002). According to the World Health Organisation (WHO), 80 percent of disabled people in the world live in low-income countries, with the majority being poor and having no access to basic services, including rehabilitation facilities (WHO, 2003). On the African continent it is estimated that only between one and two percent of the disabled people have access to care, rehabilitation and education services, which makes disability a life-and-death issue. These inequalities are perpetuated by most African governments' failure to provide essential services for disabled people (Secretariat of the African Decade of Disabled Persons, 2001). Although it is difficult from the available data to estimate the extent to which these figures can be applied to the South Africa context, there is no doubt that poverty and unemployment remain major obstacles to disabled people's participation in our society.

Two of the issues raised in this discussion need to be considered in relation to disabled people's access to higher education. Firstly, ongoing debate about the prevalence of disability

<sup>6</sup> In the Census, disability is defined as a physical or mental handicap which has lasted for six months or more, or is expected to last at least six months, and which prevents the person from carrying out daily activities independently, or from participating fully in educational, economic or social activities (StatsSA, 2003).

<sup>7</sup> In the light of the discussions which follow on the important impact of poverty on disability prevalence it may seem surprising that the prevalence rate is noted as higher in developed countries. Most analysts attribute this anomaly to the inadequate data collection and information on disability prevalence (under-reporting) available in developing countries and to a range of socio-economic factors which influence disability prevalence. For example, high infant mortality rates in many developing countries mean that many disabled children die soon after birth and therefore do not survive to adulthood as they are more likely to do in better resourced countries.

<sup>8</sup> See also the Summary Report of the National Disability Survey prepared by CASE (Community Agency for Social Enquiry) for the Department of Health (1999), where the average prevalence rate in South Africa was estimated to be 5.9 percent, with differences apparent across provinces, by race, age and type of disability.

in our society makes it difficult to find reliable baseline information to help estimate the extent to which disabled students have been denied access to higher education in the past and what a more equitable profile in the future might look like. Secondly, the link between poverty and disability makes it doubly difficult for poor disabled students to access higher education.

### Access to higher education

For disabled people, to a large extent the first barrier to higher education is the schooling system. This was particularly true during the apartheid era. Education was provided separately not only on the basis of race but also on the identification and categorisation of learners into those who were considered ‘normal’ and those who were considered to have ‘special needs’. The latter category included a wide range: those with a variety of disabilities, those who were perceived to have learning difficulties or behavioural problems, and those who were in trouble with the law (DoE, 1998). The result was a dominant mainstream system for ‘normal’ learners and a secondary system of specialised education for those with ‘special needs’. This secondary system consisted mainly of a limited number of special schools or special classes in the mainstream schools. Because both systems of education were further divided along racial lines, there was very limited provision for black learners with ‘special needs’ (DoE, 1998).

High levels of exclusion of disabled children, especially disabled black children, from the education system mean that it is difficult to quantify the extent of their exclusion. In 1997 the INDS estimated that, at the time of writing the document, approximately 70 percent of disabled learners of school-going age were outside the general education and training (schooling) system (ODP, 1997). For the few, more privileged, disabled learners who were able to attend special schools, other problems inherent in a separate, peripheral system were evident. In some schools the curriculum was inappropriate for preparing them for the world of work, with only some special schools offering tuition up to matriculation level (DoE, 1998) and thus equipping them with the minimum academic requirements for entry into higher education. These inequalities in schooling have had a profound effect on the number of disabled people who have been able to access higher education. The INDS argued that although no reliable statistics existed, higher education remained largely out of reach for the majority of disabled people.

Since 1994 there have been changes in the school system which have helped break down many of the barriers faced by disabled children and created greater opportunities for their participation. While there is evidence to suggest that many barriers are still in place, the 2001 Census indicated that the number of disabled children entering the school system has increased (StatsSA, 2003).<sup>9</sup> Lack of reliable data makes it impossible, however, to confirm

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<sup>9</sup> Information obtained from StatsSA which brings together the figures from Census 2001 for the number of disabled people in South Africa and for school enrolment.

the belief that an increase in the number of disabled children entering schools might mean an increase in the number of disabled students entering higher education.

While the need for such data remains a priority, as the CHE argued in their 2000–2002 annual report, equally important to consider is the existing capacity of the higher education system to respond to the needs of students with disabilities who have gained entry to institutions. The report stated that if even ten percent of those learners with disabilities who are currently in the schooling system ‘were to enrol in HE, this would represent a significant challenge for institutions at the levels of infrastructure, support services and learning and teaching’ (CHE, 2001:27). Although providing access to the system for students with disabilities is extremely important, the creation of equity for these students requires that we also focus attention on their participation *within* the system. Consideration needs to be given to the extent to which they are able to participate equally in the process of teaching and learning and thus have a fair chance of success.

The challenge this poses for the higher education system is perhaps best captured in the joint report of the National Committee on Special Needs in Education and Training and the National Committee on Education Support Services. These ministerial commissions, set up in 1996, led to the publication of White Paper 6, which is discussed in more detail in the next section. The report states that

The primary challenge to higher education institutions at present is to actively seek to admit learners with disabilities who have historically been marginalized at this level, providing them with opportunities to receive the education and training required to enter a variety of job markets. Alongside this is the challenge to develop the institution’s capacity to address diverse needs and address barriers to learning and development. This includes not only learners with disabilities, but all learners. This requires that adequate enabling mechanisms be put in place to ensure that appropriate curriculum and institutional transformation occurs, and that additional support is provided where needed. (DoE, 1998:126)

However, as with any policy process, the equity goals of the higher education policy framework are implemented within a socio-political and economic context characterised by massive inequity inherited from the apartheid system. The higher education system is simultaneously affected by this context and expected to contribute to the government’s transformation agenda. Any investigation that seeks to explore the responsiveness of the higher education system to particular policy goals needs to acknowledge and understand context and history and integrate them into the analysis.

## A new policy framework

The overall policy framework that informs equity of access and participation for students with disabilities in South African public higher education draws on two central principles outlined in our Constitution: non-discrimination and equity. Chapter 2 of the Constitution (RSA, 1996) guarantees fundamental rights to all citizens, and Section 9 of Chapter 2 specifically recognises that a person's ability to exercise these rights can be prevented through direct and indirect discrimination on the basis of a range of social criteria, included in which is disability. The Constitution therefore outlaws discrimination on the basis of disability.

While this non-discrimination provision in the Constitution is extremely important for disabled people in South Africa, equally important is the recognition that is given in the Constitution to the fact that in the past people were 'disadvantaged by unfair discrimination' (RSA, 1996, 9(2)). Given this scenario, the Constitution makes provision for measures aimed at redressing this disadvantage so that all people are able to experience equally the full enjoyment of these rights. It recognises that disabled people have been discriminated against on the basis of their disability and that the creation of equity for them therefore of necessity entails redressing past inequity. The commitment to non-discrimination and to the creation of equity have been extremely important in shaping a number of important policies and pieces of legislation since the new democracy came into being in 1994. The policies dealing with disability are no exception.

The INDS is a fundamental policy document that provides a framework to ensure that disability issues are integrated into the overall political, economic and social functioning of the country, including essential areas of service delivery. While it is not possible within the scope of this report to discuss the provisions of the INDS in more detail, two principles in the document are particularly important for understanding the essential elements of any equity agenda that targets disabled people.

Firstly, the document accepts and explains the principle of self-representation. This principle has been central to the disability rights movement in South Africa and to similar movements throughout the world and is included in the United Nations Standard Rules on the Equalisation of Opportunities for Disabled Persons (UN, 1993) and explained in the following way in the INDS:

A fundamental principle which informs the outlook of the disability rights movement in South Africa and internationally is the right to self-representation. This means that the collective determination of disabled people must be used to inform the strategies of the government. In recognising this principle, the government acknowledges the advisory role of organisations of persons with disabilities and their representatives in the decision-making processes... People with disabilities are best equipped to change perceptions and attitudes towards disability, and should therefore play a central role in the development of strategies and projects through their legitimate organisations. (ODP, 1997)

Secondly, as already discussed, the INDS argues strongly for the adoption of a social model approach to disability and for disability to be addressed as a human rights and development issue.

Both the Constitution (RSA, 1996) and the INDS (ODP, 1997) provide the basis for the way disability issues and the rights of disabled people are understood and addressed in the legislative and policy framework in South Africa. The policy guiding the public higher education system addresses broad issues of equity and redress within this system. In White Paper 3 on the transformation of the higher education system (DoE, 1997) it is stated that one of the goals of the transformation process is to build a higher education system that

promote[s] equity of access and fair chances of success to all who are seeking to realise their potential through higher education, while eradicating all forms of unfair discrimination and advancing redress for past inequalities. (DoE, 1997:14)

The changes for higher education outlined in White Paper 3 are therefore located within an equity paradigm where recognition is given to the need for redressing previous inequity, overcoming unfair discrimination and creating a fair and just higher education system. A number of other principles and strategies outlined in White Paper 3 are also important for disabled students' participation in higher education, especially those that suggest the equity agenda involves, among other things, changes to the way in which institutions are organised and structured.

More direct attention is given to the issue of disabled students in the National Plan for Higher Education (2001). The Plan recognises disabled students as those who have been historically disadvantaged by the apartheid higher education system, and commits the government to increasing their access to higher education. Specific mention is made of the use of earmarked funds to 'realise particular policy objectives', such as increased access for poor and disabled students (DoE, 2001b:12). The Plan also argues that while increasing access for disabled students is an important step towards the goal of redressing the inequity of the past, it should also form part of strategies aimed at broadening the social base of students in South African higher education through the inclusion of non-traditional students, i.e. mature students, workers, women and disabled people. (DoE, 2001b:28). In emphasising the importance of realising this objective, the Plan states that

The Ministry therefore expects institutions to indicate in their institutional plans the strategies and steps they intend taking to increase the enrolment of these categories of learners, including clear targets and time-frames. (DoE, 2001b:28)

As discussed previously, and as this report stresses, while increasing enrolments is extremely important for creating equity, equal attention has to be given to issues of participation within institutions and thus to the creation of opportunities for a fair chance of success. The National Plan gives attention to the important connection between equity of access and

equity of outcomes, and it discusses at some length the importance of mechanisms such as academic development for ensuring that all students are able to participate equally in the process of teaching and learning and thus have a fair chance of success. It asserts that

higher education institutions have a moral and educational responsibility to ensure that they have effective programmes in place to meet the teaching and learning needs of the students they admit. This requires that institutions should integrate academic development programmes into their overall academic and financial planning. (DoE, 2001b:25)

This emphasis on the institutions' responsibility for ensuring equitable participation and a fair chance of success is, however, not related directly to students with disabilities.

The basis for the creation of equity for students with disabilities in higher education is further developed through the provisions of White Paper 6, which was published by the Ministry in July 2001. Its primary purpose is to create educational opportunities for students who have not been able to access existing educational provision or have experienced learning difficulties, largely because the education system has failed to 'accommodate their learning needs' (DoE, 2001a:6). Students with disabilities are regarded as having been most vulnerable to these inequalities in the system.

The document argues that particular learning needs may arise from external or internal factors such as socio-economic deprivation or physical impairments such as blindness. The education system should therefore have the capacity to provide for the 'broad range of learning needs among the learner population at any point in time' (DoE, 2001a:17). White Paper 6, like the INDS, argues for the creation of equal opportunities by removing the barriers that restrict or limit equitable participation and by ensuring that the education system is fully inclusive.

In all sectors of the education system, to do this involves two main interventions:

- Removing the barriers that limit access to educational provision and prevent particular learners from being able to participate equally in the process of teaching and learning.
- Putting in place strategies aimed at building the capacity of the sector to meet the full range of learning needs. Although there are a number of important things that have to happen for such capacity to be built, throughout White Paper 6 emphasis is placed on changing attitudes and overcoming prejudice, developing flexible teaching and learning programmes that respond to the diversity of learning needs (responsive curriculum), and putting in place mechanisms that can provide additional support to those learners who may require it.

While White Paper 6 focuses mainly on outlining the strategies and guidelines that will be used to bring about these changes in the schooling sector, some attention is also given to the higher education band. It makes reference to the National Plan's reporting requirement



explained above, where institutions are expected to report in their institutional plans how they intend increasing the enrolment of non-traditional students, which include students with disabilities. White Paper 6 also states that the Ministry will make recommendations to higher education institutions ‘regarding minimum levels of provision for learners with special needs’ (DoE, 2001a:31). In White Paper 6 it is also stated that, while all higher education institutions will be expected to ensure that ‘there is appropriate physical access for disabled learners’, the provision of more specialised, cost-intensive support that may be needed by some disabled students will be organised on a regional basis (DoE, 2001a:31).

This assertion sets an important precedent for regional collaboration between institutions and is explained further in this document:

In higher education institutions access for disabled learners and other learners who experience barriers to learning and development can be achieved through properly coordinated learner support services, and the cost-effective provision of such support services can be made possible through regional collaboration. Institutional planning is now a critical part of national planning for higher education, and higher education institutions will be required to plan the provision of programmes for learners with disabilities and impairments through regional collaboration. This is now a requirement of the National Plan for Higher Education. (DoE, 2001a:28)

To date no further policy proposals have been developed which address in more detail how the imperative for regional collaboration can be put into operation. With this in mind, the people interviewed in this study were asked to comment on how they saw the possibilities or limitations of regional collaboration as pointed to in White Paper 6. These comments are captured in Chapter 3.

## **SUPPORTING THE PARTICIPATION OF STUDENTS WITH DISABILITIES**

This chapter presents an analytical description of the structures, policies and human and financial resources available at higher education institutions for dealing with the needs of disabled students. It is based on an analysis of 24 public higher education institutions' responses to a comprehensive questionnaire sent to them during 2003. It takes into account the institutional type and history, so as to identify trends in the provision of support to disabled students. Levels of provision range from well-resourced units or programmes with a relatively large staff to one-person offices that struggle against enormous odds to provide what support they can to disabled students. In a sense the location of the support for disabled students in the administrative structure of an institution suggests its relative importance in that student body and, more significantly, the institution's awareness about disability and ability and willingness to commit resources to its support. As this chapter shows, the institutions surveyed offered a variety of understandings and practices in the provision of higher education for disabled students.

As already mentioned, this research is based on 24 public higher education institutions that returned completed questionnaires out of 35 to which they were sent, a return rate of 69 percent or slightly more than two-thirds of these institutions in the country at the commencement of the study. The difference between the response rate from the university and technikon sectors was not substantial: 9 out of 14 technikons responded (64 percent) and 15 out of 21 universities (71 percent). A more marked difference in the rate of response was found between historically advantaged and historically disadvantaged institutions, with 79 percent (15 out of 19) and 56 percent (9 out of 16) responding respectively. Table 1 presents a breakdown of the institutions' responses.

**Table 1:** Overview of returned questionnaires by institutional type and history

	<b>Technikons</b>	<b>%</b>	<b>Universities</b>	<b>%</b>	<b>TOTAL</b>	<b>%</b>
<b>HAI</b>	6 (8)	75%	9 (11)	82%	15 (19)	79%
<b>HDI</b>	3 (6)	50%	6 (10)	60%	9 (16)	56%
<b>TOTAL</b>	9 (14)	64%	15 (21)	71%	24 (35)	69%

While a sufficiently high percentage of questionnaires was returned to provide a fairly comprehensive picture of what is happening in the sector as a whole, it is also important to acknowledge any biases that the differing response rates may bring to the picture. It is difficult in a study of this nature to accurately identify the reasons why there are slight

differences in the response rates between the universities and technikons and between the historically advantaged and disadvantaged institutions, and it is especially important that the differences noted do not become the basis for simplistic arguments that cannot be properly substantiated. However, the findings presented in this chapter and Chapter 3 do point to specific factors which collectively interpreted are useful in providing greater insight into the possible reasons for the differences in the response rates across the sector.

Of particular importance are the recognised resource disparities across the sector, especially in relation to the historically disadvantaged institutions, and how these disparities affect their capacity to respond to the teaching and learning needs of disabled students. Such capacity issues may have influenced if and in what way institutions responded to the investigation. However, it is important to emphasise at the outset that the study also demonstrates that when it comes to resources ‘more’ does not always mean ‘best’. The study shows that some of the most innovative practices are those that arise from the most adverse of circumstances. So although slightly fewer historically disadvantaged institutions responded to the questionnaire it is clear from those that did respond that a number of these institutions are responding in innovative, informed and exciting ways to this aspect of the transformation agenda. The study also shows that across the board the post-2001 period has seen an increase in the number of institutional initiatives aimed at improving access and participation for students with disabilities in higher education. This may account to some extent for the positive response across the sector as a whole.

Some of the issues that emerged from the analysis of institutions’ responses to the questionnaire resurfaced in the in-depth interviews, discussed in Chapter 3, and provided a different point of entry for some tentative hypotheses that explain the institutions’ different approaches to educational provision for disabled students.

This chapter is organised into three sections. The first focuses on the institutions’ internal policy frameworks for dealing with disabled students and their awareness of national policy on the matter, the second examines the nature and structure of the support available to disabled students, and the third deals with the relationship between disabled students’ support structures and other forms of teaching and learning support available in the various institutions.

## **POLICY FRAMEWORK**

The questions in section B of the questionnaire focused on institutional policy and had two objectives: to find out about current or planned institutional policies specifically aimed at supporting disabled students’ participation, and to probe the respondent’s familiarity with relevant government policies in the area of disability.

## Institutional policy

Question B1 asked the institution whether they had a policy or guidelines for supporting disabled students. If the answer was ‘Yes’, in B2 they were asked to specify the kind of policy and its status in the institution. The options provided for describing the policies were intended to elicit information that would enable the researchers to classify the policies according to three criteria. The first criterion was the origin of the policy, i.e. whether the policy used was the institutions’ own or one developed by an outside organisation, the second was the formal or informal character of the policy, and the third was whether the policy was specific, i.e. exclusively for students with disabilities, or generic, i.e. for the general support of all students, including disabled students. Institutions were also given the option of describing any other kind of policy or guidelines which they might make use of.

From the responses to this question it became apparent that ‘formal’ or ‘informal’ policy meant different things in different institutional contexts. In addition, while as Table 3 shows most institutions indicated that they make use of ‘institutional guidelines around general student support’, the questionnaire did not provide space for institutions to give the details of these guidelines, and only those institutions that had a formal policy or guidelines were asked to attach a copy to their questionnaire. Despite these limitations, the information gathered from the questionnaires, together with the insights gained from individual interviews, provided a fairly complete picture of the ways in which public higher education institutions manage the access of disabled students to their programmes. The interview process was especially important in providing greater insights into the issue of policy, particularly in relation to the role of institutional policy in guiding the provision of support and leveraging necessary change within the institution.

From the responses to the questionnaire it is clear that most institutions make use of some kind of policy or guidelines. Overall, as Table 2 below shows, 18 of the 24 institutions (75 percent) indicated that they do make use of a policy or set of guidelines to help them provide support to students with disabilities, and 6 institutions (25 percent) indicated that they do not. As can be seen in Table 2, policies or guidelines are more common among universities and at historically advantaged institutions.

**Table 2:** Existence of policy/guidelines within the institution to assist in providing support to students with disabilities, by institutional type and history

	Technikon		University		TOTAL			
	Policy	No policy	Policy	No policy	Policy	%	No policy	%
HAI	5	1	9	0	14(15)	93%	1(15)	7%
HDI	0	3	4	2	4(9)	44%	5(9)	56%
<b>TOTAL</b>	5	4	13	2	18(24)	75%	6(24)	25%

The responses to the questionnaire further indicated that, while some institutions have a

formal policy that specifically refers to the provision of support to students with disabilities, the majority of them are guided by general institutional guidelines that focus on providing support to all students on campus. Since some institutions chose more than one option from those listed in the table, it can be assumed that the options given are not mutually exclusive and existing policies can be classified in more than one of the ways described in the questionnaire. Table 3 captures the institutions' responses to this section of the questionnaire.

**Table 3: Types of policies/guidelines used by institutions**

Type of policy/guidelines	No.	%
Formal policy on providing support to students with disabilities	5	21%
Informal policy on providing support to students with disabilities	2	8%
Institutional guidelines around general student support	19	79%
Guidelines from organisations off campus around support for students with disabilities	1	4%
Other guidelines <sup>10</sup>	2	8%

Although the type and status of policy used differs from institution to institution, it would appear that there is general consensus on the importance of having policies and/or guidelines in place. More specifically, all the respondents who indicated that their institution had no policy on this issue emphasised that they were either in the process of developing such a policy or regarded it as a priority for the future.

This sentiment was strongly supported by the interviewees, the majority of whom were of the opinion that a policy within the institution that addresses on some level the provision of teaching and learning support to disabled students was important as an enforcement mechanism. Although the notion of enforcement might suggest punitive connotations, it was argued that the existence of a policy gave the responsible person in the institution the 'political clout' to ensure, particularly at a teaching and learning level, that the needs of students with disabilities were being met (Interview with responsible person, HAI). Some of the respondents explained this imperative more fully. They argued that, despite the growing awareness of the need for ongoing professional development aimed at improving the quality of teaching and learning in institutions, what actually happens in the classroom on a day-to-day basis is difficult to monitor. Teaching at the higher education level remains a fairly individualistic process, with academic staff often set on using teaching and assessment methods which they have used previously and which they feel comfortable with, even if such methods may limit some students' participation. Thus, ensuring that lecturers are aware of and responsive to the learning needs of disabled students in their class is often dependent on the good will and individual disposition of each lecturer (Interview with responsible person, HAI). A policy that sets out the institution's commitments to disabled students serves to emphasise and explain

<sup>10</sup> One of the institutions said that they also refer to technical policies or guidelines dealing with issues such as minimum requirements for physical accessibility of the built environment. Another institution specifically made mention here of the government policies which they use as a guide, such as the INDS (ODP, 1997).

what the institution expects from staff and it ensures consistency across the various academic programmes and activities taking place within the institution at any particular time. The following responses from interviewees emphasise these important points:

It's key in that it has a place in what we are able to say. As far as I see, the policy is the university's written commitment to accepting and providing a service to students. It's an official document like any other policy and if it's contravened there would be consequences as well. (Interview with responsible person, HAI)

I think that in our particular context it is important to have a policy because it gives one a base from which to work. (Interview with responsible person, HAI)

In terms of consistency, you can't have one faculty doing this and another one doing that and different academics making different kinds of decisions around the levels of provision. It has to be consistent. There has to be some kind of reasonable (in the legal sense) policy behind the provisions of all accommodations and a proper rationale and logic where those accommodations are refused or where we refuse people. (Interview with responsible person, HAI)

This last quotation introduces a further theme that emerged from the responses: the importance of policy as a basis for determining what institutions can reasonably do to support students with disabilities. A policy can provide a framework both for guiding the institution and for protecting it from unreasonable expectations. As one respondent pointed out, the effect of this can be both positive, as it puts in place the equity considerations discussed above, and negative, as it also puts in place 'what is not possible', which may justify a lack of support for some students. As will be discussed later, the issue of what institutions can reasonably be expected to provide is one which is often linked to current concerns about providing sign language in higher education institutions.

The concept of 'reasonableness' is not new in the area of disability rights throughout the world or in South Africa's legislative and policy framework.<sup>11</sup> However, as a number of respondents emphasised, 'reasonableness' in the academic environment is influenced not only by cost considerations but also by perceptions of what is needed to produce 'quality graduates'. One respondent explained this as follows:

You need to decide what sort of responsibility does the university have. Let's take someone who has serious learning disabilities. To what extent should the university be compensating for those disabilities, and to what extent should they require that person to perform in certain requirements? Those kinds of judgements are very difficult to make unless you have a firm policy that you can go back to and you can say that in this

<sup>11</sup> In much of the international legislation on disability and within our own legislative and policy framework, the determination of 'reasonableness' or what is referred to in some legislation as the notion of 'unjustifiable hardship' is generally informed by economic or cost considerations.

situation the university will provide this and won't provide that. The university cannot include people who don't meet the basic requirements of performance; for example, we cannot be graduating people who are not graduate material. At the same time, we can't be prejudiced against people who have disabilities and can't perform in certain ways, but could perform should we change the teaching method. Those issues are the kind of hard issues that we have to decide upon. (Interview with responsible person, HAI)

While this response emphasises the role of policy as a mechanism for providing guidance to the institution, it also points to another recurrent issue: how much flexibility the academic environment has for responding to and accommodating a broader range of learning needs. As this response suggests, students' performance may be jeopardised by inappropriate teaching or assessment methods in relation to a particular type of disability. So if a blind student is unable to read an overhead projector slide and he or she is assessed on information communicated via this method, it would be difficult for him or her to pass that course. The issue of flexibility in the academic environment, the conditions for flexibility to exist and the extent to which teaching and learning practices might constitute barriers or enablers for disabled students are discussed further in Chapter 3.

#### **Familiarity with government policy**

Question B5 asked respondents to evaluate their familiarity with the three pieces of legislation that define national policy on disabled students' access to higher education: the INDS, the Education White Paper 6 and the National Plan for Higher Education (ODP, 1997; DoE, 2001a,b). In analysing the responses to this question it was recognised that there was space for personal interpretations of the scale of familiarity provided in the questionnaire. The findings reflect a process of self-evaluation by the respondents rather than an objective assessment of their knowledge of these policies and their specific content. (One respondent, a historically advantaged university, did not answer this question, so the findings are based on 23, not 24, responses.)

**Table 4:** Familiarity with the Integrated National Disability Strategy (1997)

<b>Response</b>	<b>No.</b>	<b>%</b>
Read policy and familiar with content	13	57%
Seen policy but not familiar with content	1	4%
Have heard about policy but not seen or read it	3	13%
Have never heard of the policy	6	26%

**Table 5: Familiarity with Education White Paper 6: Special Needs Education: Building an Inclusive Education and Training System (2001)**

Response	No.	%
Read policy and familiar with content	12	52%
Seen policy but not familiar with content	4	17%
Have heard about policy but not seen or read it	5	22%
Have never heard of the policy	2	9%

**Table 6: Familiarity with the National Plan for Higher Education (2001)**

Response	No.	%
Read policy and familiar with content	19	83%
Seen policy but not really familiar with content	1	4%
Have heard about policy but not seen or read it	1	4%
Have never heard of the policy	2	9%

**Table 7: Read and familiar with content of all three policy documents, by institutional type and history**

	Technikons	Universities	TOTAL	%
HAI	2	6	8(14)	57%
HDI	0	2	2(9)	22%
<b>TOTAL</b>	2	8	10(23)	44%

More than 50 percent of the respondents indicated that they had read one of the three policies and were familiar with its content. The highest level of awareness seemed to be of the National Plan for Higher Education (2001). A disaggregated analysis of the responses and a cross tabulation of these with the replies to other sections of the questionnaire produced a less optimistic picture of policy awareness.

The responses also showed that some personnel were totally unfamiliar with one or more of the key policy documents relevant to their area of work. In each of the three cases some of the respondents indicated that they had, in fact, never heard of these policy documents. Six respondents indicated that they had never heard of the INDS (ODP, 1997), two had never heard of White Paper 6 (DoE, 2001a) and two had never heard of the National Plan (DoE 2001b). In fact two respondents indicated that they had not heard of any of the three documents.

Although it is worrying that people working in this area had never heard of the INDS and White Paper 6, it is especially troubling that two respondents working in a higher education institution had never heard of the National Plan. It is only possible to speculate as to the reasons why two staff members directly involved in student support were not aware of its



existence. Most of this speculation points to a number of hypothetical problems. It may be that the majority of the problems lie with the institutions' management. Perhaps middle management and staff at the implementation end do not participate in policy discussions because the policy itself is not considered relevant to their particular area of work. Or middle management may not see its area of work as part of the broader issues discussed in national policies. While these hypothetical reasons for lack of knowledge of policy must be read with caution, the lack of integration between the needs of disabled students and other areas of concern within the institutions is evident from other findings of this research.

Moreover, although the data shows that in each of the three cases more than 50 percent of the respondents were familiar with the content of the policy (57 percent for the INDS, 52 percent for White Paper 6, and 60 percent for the National Plan), when such familiarity is considered in relation to all three documents the number of institutions drops below 50 percent. Table 7 shows that of the 23 responding institutions only 10 of them (44 percent) had read and were familiar with the content of all three policies. This suggests that the holistic policy approach discussed in Chapter 1, which draws on and combines the imperatives of all three policies, is still relatively undeveloped in the majority of institutions. Or, put another way, the level of awareness of the overall policy majority framework that is in place to support increased access and improved participation for disabled students in higher education may be regarded as weak and an obstacle to progress in this area.

## **THE SUPPORT OFFERED AT INSTITUTIONS**

In section D of the questionnaire institutions were asked about the support they currently offered. The questions in this section were aimed at eliciting information about the kinds of services offered and how these services were structured and functioned within the overall institutional framework. This data has been synthesised here to provide a picture of current support across the system, how it is generally organised within institutions and what institutional mechanisms, including staffing, are in place to ensure its effective delivery.

### **Existence and type of support provided**

According to the returned questionnaires, 18 institutions do provide teaching and learning support for students with disabilities, 4 institutions do not provide support and 2 did not answer the question. Table 8 shows these responses by institutional type and history.

**Table 8: Provision of teaching and learning support for students with disabilities, by institutional type and history\***

	Technikons		Universities		TOTAL			
	Yes	No	Yes	No	Yes	%	No	%
HAI	5	1	8	1	13 (15)	87%	2(15)	13%
HDI	0	3	5	1	5(9)	56%	4(9)	44%
<b>TOTAL</b>	5	4	13	2	18(24)	75%	6(24)	25%

*\*In this table those institutions which did not answer the question have been included in the 'No' response (n=24).*

It appears from Table 8 that the majority of institutions which returned their questionnaires feel they are providing some degree of teaching and learning support to disabled students in their institutions (75 percent). From the information given in both the questionnaires and the interviews it is clear that levels of provision, including the services provided and the staff available to deliver them, differ significantly across the system. These levels of provision are influenced by the historical trajectory of the institution. In general, the historically advantaged institutions have more services and staff for supporting students with disabilities than the historically disadvantaged institutions.

While responses to the questionnaire paint a picture of historically advantaged institutions displaying high levels of commitment to disabled students and engagement with the problem of providing for them, it is important to recognise that in a number of these institutions provision is very limited or services are fairly new. Similarly, while provision is limited in many of the historically disadvantaged institutions, a few of these stand out for having services or strategies in place which go beyond what would be expected from their overall resource levels. The critical factors that may be contributing to this scenario are discussed in Chapter 3.

The interviews suggest that the setting up of the current services for disabled students has its own history at each institution. Responses to the questionnaire point to two issues. Firstly, a number of the institutions refer to some kind of 'historical fluke' and 'not some grand plan' as the deciding factor in the development of services for disabled students (Interview with responsible person, HAI). More often than not it seems that the status quo was changed by an individual or simply by the presence of disabled students on the campus. But however different the individual circumstances, all accounts point to the presence of some kind of champion at the institution who was interested in and committed to developing these services and supporting disabled students on campus. Secondly, most accounts relate the development of these services to an institutional leadership that was supportive of the initiative.

Although some initiatives can be traced back to the 1980s, many have developed during the post-1994 period, and in particular since 2001. Although it is difficult to say what has

influenced this trend, comments made in the interviews suggest possible explanations. Some respondents pointed to a possible link to the launch of the National Plan for Higher Education (2001) with its associated equity goals. Others mentioned more generally the increased focus since 1994 on redressing the inequities of the past and raising consciousness about these issues, including the rights of disabled people. While the evidence is still relatively anecdotal and difficult to substantiate (as discussed in Chapter 3), most of the respondents suggested that there had been an increase in the number of disabled students on their campus during this period. This, they argued, had influenced the institution's response, for the reasons noted above and because the institution recognised its responsibility to the students it enrolled.

From the information collected through the questionnaires and the interviews it seems that the personnel currently responsible for providing teaching and learning support and disability units or programmes, where these exist, are playing four main roles in the institution: *technical support, mediation, advocacy* and *life orientation*.

The *technical* role involves the direct provision of various teaching and learning support services to the disabled students on campus. Table 9 presents a classification of the technical services currently offered at the 24 institutions surveyed. This list should not be regarded as an overview of the full degree of provision across all the institutions or, in fact, at any one of the individual institutions. None of the participating institutions listed all the activities described in the table or in the manner in which they are captured in the table.

The *mediating* role is exercised not so much in relation to the students as to the academic staff. A number of the respondents said they try to encourage students to develop a good relationship with their lecturers so that they can explain their needs. However, when students experience problems with lecturers, support staff may have to intervene to mediate a solution.

In addition to these more traditional roles, personnel and units or programmes also tend to play what may be loosely termed an *advocacy* role. This role appears to have arisen from what a number of respondents identified as the marginalised nature of disability within the institution, involving a lack of awareness and a failure to take up disability issues or integrate them into the institution's policies. It involves both formal and informal activities aimed at strategic engagement with the institution so as to put disability on its agenda, including raising awareness among important role players, such as academic staff and institutional planners, about disabled students' need to participate in a formal capacity in key decision-making forums on campus. Although this role takes different forms in each institution, and activities recorded range from organising disability awareness activities on campus to sitting on the interview panel for the appointment of the vice-chancellor, the majority of respondents regard this role as extremely important, especially in the current environment.

Despite the importance attached to the advocacy role by most respondents, they also cautioned about the unwanted consequences of having too high a profile or too conspicuous

a presence on campus as individuals dealing with disability or as a disability unit or programme. Prominent among these was the tendency for anything related to disability to be assumed to be solely the responsibility of that individual or unit or programme and not the responsibility of other appropriate individuals, units or programmes in the institution. This seems to be a consequence of disability issues not being sufficiently ‘mainstreamed’ or integrated into key processes in the institution such as academic planning, residential accommodation, security requirements on campus, the physical planning and development of campuses and, importantly, the design, layout and delivery of library services, to mention some of the issues raised by participants in this study.

Concern about disability units or programmes being isolated or disability issues not being integrated into core areas of the institution’s functioning emerges in a number of ways in this study’s findings. Besides concern about the issues mentioned above, there was also concern about the lack of collaboration between the institutions’ various support programmes and, in less obvious ways, about the ways that funding is allocated for support programmes for disabled students. However, where there are institutional practices which reflect a desire and commitment to address disability in a more integrated way in the institution there appear to be extremely valuable interventions. Hence ensuring that disability issues are effectively integrated into all aspects of the institution’s functioning is recognised as one of the institutional leadership’s key responsibilities.

The fourth role for the staff of disability support units that emerges from the study is a *life orientation* one, or what some participants called ‘social development’. This role has become necessary because of what a number of respondents consider to be a key challenge for students with disabilities in higher education and therefore for the respondents as support providers: the perceived failure of the schooling system, in particular the existing special schools, to prepare learners to participate in higher education, both academically and, equally importantly, as adults in possession of life skills. The concerns that have given rise to this role are perhaps best captured in the following response:

It is not only academic development, it is social development, it’s the soft skills. If you look again at the whole history of the country, the students have been institutionalised, they have been kept away, believing that they were different and because they were different they could not fit in. Let’s look at a typical blind student going to a little school for blind people only, a simple thing as a student that goes to this institution had all the support in place, was not even taught how to use the white stick and now comes to university. (Interview with responsible person, HAI)

The identification of the existing schooling system as a major challenge to the equitable participation of students with disabilities in higher education is discussed in Chapter 3. Here it is important to emphasise that specific activities for teaching disabled students skills that are regarded as essential for independent living and further study in higher education, such as mobility training and career guidance, are included in the list of services currently being

offered at some of the institutions participating in this study. However, it was emphasised by a number of them that much more should be done at the schooling level to equip the students with the skills they need to participate as confident, independent members of the student body.

Before moving on to look more closely at how existing services are organised within institutions, it is necessary to mention briefly that at most institutions the provision of certain kinds of support service seems to be particularly weak. The one that institutions most significantly seem to lack is a sign language interpreter service. As one respondent said:

It's actually a huge nightmare and we don't have any formal structures in place.  
(Interview with responsible person, HAI)

Only five institutions were able to mention any form of provision for deaf students and of these only two have interpreter services available, with one institution indicating that these services would be provided for in 2004. A number of the responding institutions indicated that such provision was not available because there were no deaf students on their campuses at this time.

Most institutions said that the constraints relate primarily to the cost of employing sign language interpreters, either for salaries for full-time interpreters or ongoing payments for skilled personnel contracted in to provide this service. It was also pointed out that if this is to be an effective service each deaf student will need an interpreter to translate for them throughout their lectures, tutorials etc. It was argued that, unlike other support services described in Table 9, this was not one that could be shared in the same way. It was also emphasised that the pool of available and suitably qualified interpreters in South Africa is small, which further exacerbates the problem. One respondent who had sought funding for the provision of sign language interpreters reported that external funding sources such as the private sector do not want to donate money that will be used for salaries but were mainly interested in donating specific kinds of equipment or physical resources and saw personnel costs as the institution's responsibility. All these factors collectively present institutions with a huge challenge. Nevertheless, it was emphasised that the provision of sign language support remains central to ensuring equity for deaf students.

**Table 9:** Overview of the kinds of technical teaching and learning services offered to disabled students across the responding institutions

Type of service	Details of specific services offered or activities undertaken
<b>Provision of learning materials in alternative formats</b>	<p>Learning materials used by students are converted through facilities on the campus or through the use of external services into formats other than the printed material normally used in classrooms.</p> <p>Alternative formats offered include Brailled material, audio cassette tapes, printed material in larger fonts, video footage, and various electronic formats that can be assessed through existing ICT (information communication technology) facilities on campus.</p> <p>Learning materials include course outlines, lecture notes, study guides, course readers and various forms of library material that students may require for assignment purposes.</p>
<b>Alternative or supported assessment measures</b>	<p>Assessment materials such as examination papers and assignment outlines are converted into the alternative formats listed above.</p> <p>Administration (organisation and invigilation) of additional time allocation for tests and examinations</p> <p>Administration (organisation and invigilation) of alternative venues for tests and examinations</p> <p>Evaluation, advice, negotiation and follow-up regarding alternative assessment methods where necessary, such as oral examinations</p> <p>Designated personnel such as scribes or additional invigilators to help students in examinations</p>
<b>Personal assistance</b>	<p>Various mentoring programmes (orientation and ongoing support)</p> <p>Note taker/scribe/amanuensis and other providers of personal assistance in the classroom situation (e.g. assistance with laboratory work, and for examination purposes)</p> <p>Additional tutoring where required in specific subjects and general academic skills such as study methods, essay writing etc.</p> <p>Advice forums and various counselling and support services</p> <p>Information material (e.g. information booklets about available services) and appropriate signage on campus</p>
<b>Information communication technology</b>	<p>Adaptive ICT facilities (hardware and software) to enable students to access information (e.g. Internet access, Braille conversion and printing), communicate electronically (e.g. e-mail and information sharing via campus network) and undertake assessment tasks (e.g. essay preparation)</p> <p>Computer literacy training</p> <p>Adaptive ICT facilities on campus and in residences</p>
<b>Sign language provision</b>	<p>Sign language interpreters for classroom situation and during examinations where necessary</p> <p>Training of staff in South African Sign Language (SASL) to help students where necessary</p>

<b>Other<sup>12</sup></b>	<p>Extended curriculum options</p> <p>Advice and negotiation with student and academic staff on adaptations to structure of academic programme where necessary</p> <p>Assistance with obtaining bursaries</p> <p>Assisting students with arrangement of residential accommodation</p> <p>Support in sports activities</p> <p>Skills for independent living, e.g. mobility training and orientation</p> <p>Resource centre</p>
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### Structure and organisation of support

Accounting for each institution's organisational arrangements for the location of the unit that supports disabled students is beyond the scope of this research. However, analysing the institutions' responses shows that direct support for disabled students is generally carried out as part of the student affairs or the student development division's responsibilities, with the relevant personnel reporting directly or indirectly to the dean of students or the registrar.<sup>13</sup>

Based on the information gathered from the questionnaire the respondents were categorised into senior management (including deputy vice-chancellors, registrars and deans), student services personnel (responsible personnel located in student services, student development, student counselling or student affairs, but not in a separate disability unit or programme) and disability unit personnel (either the director or coordinator of a disability unit or programme). Table 10 shows the number of respondents who fell into each of the three categories.

**Table 10: Position and institutional location of respondents<sup>14</sup>**

Respondent	Total	%
Senior managers	3	13%
Student services personnel	15	65%
Disability unit personnel	5	22%

The table shows that most of the people who filled in the questionnaire work in student services, the majority of them in senior positions in the various divisions that fall broadly within student services or student development. Five of the respondents were directly responsible for managing or coordinating a disability unit or programme. Where such structures do exist, the heads of these units or programmes in most cases report to the senior

<sup>12</sup> Some of the activities that were listed in the category of 'other' are captured in the roles discussed above.

<sup>13</sup> As indicated in Chapter 1, the covering letter to the vice-chancellors and principals requested that the questionnaire be completed by the person 'presently responsible for the provision of teaching and learning support to students with disabilities' in their institution. These individuals, now referred to as the respondents, were then asked to indicate their job title and institutional location in the questionnaire. This picture is supported by the job titles and institutional location of the persons who completed the questionnaires.

<sup>14</sup> One out of the 24 respondents did not supply this information.

management person in the institution directly responsible for student services or student development, such as the registrar or dean of students. From the data gathered through the questionnaire it is clear that in the majority of cases the responsibility for providing teaching and learning services for disabled students falls within the ambit of student services and student development divisions.

Further information supplied by the respondents shows that within student affairs or student development various departments emerge as the location of the unit or programme or person. In some cases the unit or programme is not located in a specific department within student affairs or student development but works more autonomously and reports more directly to a senior manager responsible for student affairs.

When asked in question D3 to describe how the support services they offer were organised at their institution, nine respondents said they had a specific disability programme or unit on their campus, twelve said support services were offered from a department within student affairs such as student counselling, student health etc., and two said that although they had no specific programmes or designated staff for this purpose, students with disabilities had thus far been assisted individually through the dean of students' or the registrar's office, with the help of various other relevant departments. Twenty-three institutions therefore responded to this question in a way that suggests some form of provision. However, it should be noted here that although only five of the respondents to the questionnaire were people from disability units or programmes (job title), as indicated above, nine institutions, in fact, when asked about how their services were organised, indicated that they have a separate disability unit or programme. It is difficult therefore to get a clear sense from the questionnaire how many institutions offer services to disabled students through a designated disability unit or programme.

Furthermore, since six institutions (see Table 8) had previously indicated that they did not provide any support to disabled students (or did not answer this question), we can assume that some institutions may have been meaning that no specific unit or programme or designated staff member is in place at present. This interpretation was reinforced during the interviews when the very tentative report about their activities made it clear that in some institutions the units have not been formally constituted but do enjoy institutional support. In these instances, the activities of the would-be units seems to involve responding to requests from individual disabled students who have approached student affairs or student development personnel with a specific problem.

These anomalies in the data further suggest, as already emphasised, that the nature, extent and organisational form of the support varies considerably across the responding institutions.<sup>15</sup>

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<sup>15</sup> In Chapter 1 it was noted that a limitation of this study was the absence of input from disabled students themselves. In this instance they would be in a position to comment on whether they feel that such support does in fact exist, if they are aware of how to access this support and how effective it is in supporting them in their studies. Similarly, we have no clear idea about what is or is not happening in the 11 institutions that did not respond to the questionnaire. A lack of awareness in this area and/or the lack of any form of provision may in fact be among the reasons for their failure to respond.



## Staffing

Within the broad framework of provision described above, staff who are responsible for the direct provision of teaching and learning support for students with disabilities are employed in two different kinds of capacity. In some institutions, especially those that have individual disability units or programmes, staff are employed to manage or deliver a specific service to the disabled students. In institutions where the provision is integrated into broader student services, staff support for disabled students may be part of a broader set of responsibilities related to general student support.

It is not possible to provide a model which captures all the different kinds of staff currently involved in one way or another in providing teaching and learning support to disabled students or their different responsibilities in each institution. However, a synthesis of the questionnaire data gives some sense of the kinds of staff and the general categories of responsibility that they assume.<sup>16</sup>

*Management and coordination* is undertaken by a manager or coordinator of a unit or programme who is usually directly responsible to a senior management person in the institution, or by the senior management person himself or herself.

The *technical staff* includes those staff, usually professionals or technically skilled, who are employed to undertake particular functions in a unit or programme or provide a specific kind of service. Examples would include people in traditional academic roles, such as tutors, people who are responsible for maintaining computer laboratories and helping with specialised ICT functions, sign language interpreters, Braille readers and translators, and librarians.

The *administrative staff* includes those employed to provide administrative support to management and technical staff. There are also some instances where some administrative staff apparently assist disabled students directly.

Finally, all the institutions where a disability unit or programme exists make use of student *volunteers*. In a few cases respondents also indicated that some lecturers undertake various tasks on a voluntary basis for the unit or programme or voluntarily assist a responsible person with various tasks related to academic matters. There is no doubt that using volunteers is a central principle in the provision of teaching and learning support for disabled students across the system. In fact, it may be argued that many institutions are substantially dependent on them for coping with disabled students. However, although most of the interviewees emphasised the importance of volunteers, some also voiced misgivings about the extent to which they depended on them. They pointed out that there is only limited use of volunteers for essential activities in other student support services and raised the question of why services for students with

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<sup>16</sup> It is important to note that this overview is a synthesis of the data and can only be used to gain a general sense of the kinds of staff. In some institutions no such staff exist; in others, the designated person also has other responsibilities within the institution.

disabilities should be any different. Other respondents, while acknowledging these concerns, felt that in a context where funding was extremely limited, using volunteers was in fact an innovative way of making use of existing resources in the institution.

### Funding of support services

In section F of the questionnaire institutions were asked to provide an overview of how existing support provision was funded. In particular, they were asked to evaluate whether most of their funding (defined as more than 50 percent) came from internal sources or external sources, such as the private sector or other donors. Table 11 provides an overview of the responses of the 23 institutions that answered this question.

**Table 11:** Overview of the primary source of funding for the provision of teaching and learning support services for disabled students

Source of funding	No	%
Internal sources	16	70%
External sources	2	9%
Approximately half from internal and half from external	3	13%
Other source <sup>17</sup>	1	4%
Unsure	1	4%

The majority of institutions indicated that the bulk of their funding was drawn from internal sources (70 percent). These sources varied considerably and there appear to be no clear patterns. They ranged from discretionary funding from sources such as grants from the institution's council to allocations from budgets for student services or student development.

While the responses in the questionnaires indicate a clear trend towards the use of internal funding sources to support this area of service provision, a more nuanced picture emerged from the interviews, raising the question of the sustainability of some of these units. Most institutions said in the interviews that their physical assets such as equipment, resources and/or buildings had been provided through donations, especially from the private sector. However, their daily running costs were generally borne by the institution and covered by the sources noted above. This included costs such as staff salaries and other operating expenses. Some institutions emphasised that when new equipment needed to be purchased or a new service introduced it was generally expected that such funding should be raised from outside sources to cover these costs. Although staff salaries are generally drawn from the institution's own budget, the one exception that stands out is the payment of sign language interpreters for deaf students. Among the sample of institutions interviewed, only two make such provision.<sup>18</sup> The payment for the interpreters is drawn from money specially raised for this purpose.

<sup>17</sup> The responding institution stated that they also received funding through various grants, but it is unclear whether this refers to grants from internal or external sources.

<sup>18</sup> Earlier in this chapter it was stated that the questionnaire data showed that only two institutions provided sign language interpreter services, with one institution having budgeted for this in 2004.

No institution indicated that disabled students were expected to incur additional financial costs for a specific, more specialised service. Costs incurred were generally the same as for other students, such as photostating, printing etc. However, it is interesting to note that one institution indicated that students with disabilities receive a small reduction in their fees. This has been introduced as an incentive to attract disabled students to the institution and in this way address an important equity goal identified and prioritised by the institution.

A fundamental issue in the funding of support programmes for disabled students is whether it is centralised and distributed among faculties. If it is, this indicates an attempt at an integrated approach to the support of disability in the institution. Institutional responses show that funding for supporting students with disabilities is generally allocated directly to the disability unit or programme or within a specific budget line in student services or student development designated for that purpose. Only one institution indicated that each faculty has allocated a portion of their budget to ensuring that their teaching and learning materials are made accessible to students with disabilities.

## **COLLABORATION WITHIN THE INSTITUTION**

In question D7 of the questionnaire institutions that had a separate disability unit or programme were asked to indicate whether they had contact or collaborated with other teaching and learning structures on campus. Examples given were academic development programmes, writing centres etc. Fifteen institutions indicated that they did collaborate in this way. However, since the number of institutions who said they have a disability unit or programme in place was only nine, it would seem that other institutions also chose to answer this question.

From this data, therefore, it is difficult to get a clear sense of the degree to which collaboration is taking place between disability units or programmes or designated staff and other structures on the campus. However, both the interviews and the data obtained from the questionnaire suggest that, although there are some significant exceptions, this collaboration is limited. Where it does appear to exist it is often in the form of referrals of disabled students to other services or, as already mentioned, participation by staff in particular institutional structures. The study provided little evidence of joint programmes or initiatives with other structures focused on teaching and learning issues in the institution.

Respondents spoke of their experience of the disability units or programmes on campus becoming a 'dumping ground' for anything to do with disability. In this way disability issues are not sufficiently 'mainstreamed' on campus and other programmes do not see the importance of integrating disability-related issues or the particular learning needs of disabled students into their activities. The following quotation illustrates this concern:

We find that in some areas [name of academic development unit] is prepared to take on students with disabilities, and in some areas they don't. For example, issues around computer literacy, our disabled students tend to rely heavily on us for computer literacy skills, research skills and so on, because [name of academic development unit] has not developed their courses in an inclusive way for disability. Particularly around multimedia, we picked up a lot of difficulties there. This is obviously something we bring to the attention of [name of academic development unit], but there is not sufficient political clout around disability to change that. They don't feel that they are responsible and that is a line that they are going to stick to... They would see that for instance computer literacy, research skills or writing skills for people with disabilities are different to those skills for people who don't have disabilities and therefore they will shift responsibility for that. It is very difficult to change that mindset, but it is one that should be changed, in my view. It certainly is something that I continually press for. (Interview with responsible person, HAI)

Despite some valuable exceptions, the general trend found in this study is that academic development programmes are not designed to integrate the learning needs of disabled students. Only on a few campuses is there a two-way collaboration between the disabled students' programmes and academic development or an actual integration of the disabled support into the academic development programme.

Moving on from the analysis of current practices and structures for the support of students with disabilities, the next chapter deals with the actual participation of disabled students in higher education and the challenges that institutions face in broadening access.



### **CHALLENGES AND EMERGING ISSUES**

*When you do nothing about something when there is an opportunity to do something, I class it as actually a refusal to grant access.* (Interview with member of senior management of HDI)

In Section H of the questionnaire institutions were asked to consider which factors most significantly constrained their ability to provide effective teaching and learning support to students with disabilities. Respondents were asked to indicate in order of priority the three most significant constraints from the following five options:

- Insufficient funding.
- Lack of support from senior management.
- Resistance from academics.
- Reluctance of disabled students to ask for assistance.
- Insufficient staff to provide an effective service.

The majority of institutions put ‘insufficient funding’ and ‘insufficient staff to provide an effective service’ at the top of their list. Less significant, but identified by the most institutions as their third choice, were ‘reluctance by students to ask for assistance’ and ‘resistance from academics’.

The constraints listed in the questionnaire were thought to be the ones most common across the system and therefore the greatest challenges faced by individual institutions. While the responses show some commonality in these constraints, the interviews also revealed other areas of concern and provided insights into the specific ways in which institutions are constrained in providing for disabled students.

This chapter explores the challenges that institutions are facing in responding to policy imperatives and the actual needs of disabled students. The analysis of the questionnaires and the interviews revealed five main areas of concern, each of which can be unpacked into a number of topics. The first section of this chapter focuses on external constraints determined by history and the legacy of apartheid and by current policy developments, the second on the difficulties faced by institutions in collecting and analysing data about disability, the third on the constraints that result from deep-seated attitudes and long-standing teaching and learning practices, the fourth on the way higher institution management facilitates or hinders

progress in implementing disability policies, and the fifth on the possibilities and problems of regional collaboration among higher education institutions.

## **THE HISTORICAL LEGACY AND THE PRESENT CONTEXT**

### **The legacy of the past**

The INDS (ODP, 1997) indicated that higher education remains largely out of reach for the majority of disabled learners. Six years later, and although it is still very difficult to acquire accurate statistical data to rely on, it seems that, according to the insights of personnel interviewed for this study and the responses to the questionnaires, there are more disabled students entering the higher education system than there were before 1994.

The alleged increase may be related to the opening up of opportunities in the schooling system and the recognition in the higher education policy framework of disabled people as having been historically disadvantaged. However, information gathered through this study still points to the fact that many students with disabilities continue to be excluded from the higher education system and that their exclusion can be linked directly or indirectly to their disability. There is enough anecdotal evidence to suggest that more often than not they face a battle against all odds in order to succeed in higher education (Interview with responsible person, HAI).

There are still three fundamental constraints to equity of access to higher education for disabled people:

- The link between poverty and disability, which places disabled students at greater risk of exclusion due to socio-economic factors.
- The effects of a schooling system, mainly the special school system, which limits disabled learners' access to higher education in a number of ways.
- The continued assertion by some institutions that they cannot accommodate disabled students and are therefore justified in refusing them admission.

To understand the impact of these constraints it is important to recognise their interconnectedness. The link between poverty and disability is one of the most pervasive barriers to higher education for potential students in South Africa and, as the following quotation confirms, the combined effects of poverty and disability are exacerbated by the exclusionary mechanisms of the schooling system:

Most of the students that I am working with depend on their social grants. Their parents are unemployed or they don't have parents, so they struggle to come to [name of institution]. It is a sacrifice for them to learn and when they reach here they are not included in any way... They need to be fully accommodated because even in the schools

out there they push their way to get into special schools and they work very hard to get their Matric certificates and even there, justice is not done for them because they end up doing courses that they are not willing to do. So why can't we acknowledge that they can make it and best support them so that they can prove themselves that they are like us and even better than we are? If a student does not have material and can try with the little that he has been given to make it and yet was given his material some time in May, while some students got their material early in February, and still got the best results, I think we need to put them on pedestals. Why can't we just work hard and try to let them get the best? (Interview with responsible person, HDI)

The respondents pointed to three ways in which the special school system disadvantaged disabled learners:

- Learners are not being given the option to choose subjects for their matric that could facilitate their access to higher education – even if they do complete their matric, their choice of subjects does not qualify them for exemption.
- Learners are not receiving effective career guidance at schools.
- Disabled learners are not being equipped with the life skills necessary for independent living in the adult world.

Several interviewees blamed these problems on the belief, which they argue is prevalent in the special schools, that disabled students do not really have a future in higher education and thus it would not be appropriate for them to take higher education entrance subjects in their matric year. Some of the respondents emphasised that this attitude extends into higher education institutions, where the perception is still that disabled students cannot 'make it' in higher education. One respondent put it like this:

There are lots of barriers that are still there – that people don't accept that people with disabilities can make it in institutions of higher learning. They still want them to be left out there to just do other short courses where they could be placed. (Interview with responsible person, HDI)

The unevenness of the school system pointed out in the NCSNET/NCESS Report (DoE, 1998) means that these problems cannot be generalised. Since 1994 considerable effort has been made to bring the majority of special schools, and in particular their curriculum, into line with other mainstream schools, but because the development of a more inclusive schooling system, aimed at supporting the participation of disabled learners in mainstream schools, is still in its infancy it is difficult to know whether similar support exists for disabled students who are already attending mainstream schools. Most of the respondents at institutions where there are functioning disability units or programmes indicated that the majority of the disabled students they deal with come from special schools. The general lack of reliable data about special schooling and transition to higher education makes it particularly difficult to follow up these issues.



Despite this cautionary note about generalisations, the inadequacies of the schooling system in preparing disabled students for participation in higher education were mentioned by all the respondents at institutions which have strong, well-resourced and effective functioning disability units or programmes. It may be argued that these people are the most exposed to the needs and experiences of students with disabilities in the higher education environment and are therefore most in touch with the problems resulting from poor schooling. Higher education needs to take note of the concerns raised about the schooling system as a major barrier to disabled students and, if they are to take seriously the challenge of increasing these students' access to higher education, institutions must recognise their responsibility for addressing some of the systems' inadequacies.

The seriousness of this issue can be seen from the fact that at least two of the 24 institutions which responded to the questionnaire regard various outreach activities with special schools in their regions as an important part of their work. Some of the programmes in place include networking with special schools in the area and setting up meetings with the principals and teachers to discuss with them what is needed to prepare students for entry into higher education. These efforts also include considering some special schools as part of the pool of feeder schools for the institution. Through this initiative these schools become part of the programmes and activities run with the feeder schools and disability is put on the agenda of the general outreach programme run by the higher education institution. One institution also explained that they were involved in research activities with schools to investigate various issues that were likely to impact on the participation of disabled students in higher education.

As mentioned above, it appears that students with disabilities are still being refused entrance on the basis that the institution cannot accommodate them. The reasons given relate directly or indirectly to a perceived inability to accommodate the disabled student's learning needs. These reasons are inevitably related to the nature of their impairment. One respondent from a historically disadvantaged institution said that the disabled students who were now at her institution told her they had come there because other institutions they had applied to had refused them entry, saying they could not accommodate their disability (Interview with responsible person, HDI). Another respondent was 'sure it was happening' (Interview with responsible person, HAD). One respondent recounted a specific example where the institution, after considering a student's needs, rejected her application because they felt that they could not accommodate her individual needs. While, as already mentioned, issues of reasonableness must be considered, the fact is that disability is still used as the basis for exclusion. As one interviewee said:

An interesting issue for me is the refusal of academically sound students for courses that they qualify for, on the basis of disability. Disability is the only category of people who get refused entrance to courses who would academically qualify, which to me makes them an interesting category of people. (Interview with responsible person, HAD)

## The present context

During the interviews respondents were asked to comment on the impact of the present higher education context on addressing equity for disabled students. Generally they agreed that institutions were under enormous pressure to implement the transformation agenda in higher education, and this created a number of specific challenges in regard to disabled students. While they noted these, they also stressed the new opportunities created by the reform of higher education, including the mergers process, for disability issues to be addressed in new ways. Most of them, unsurprisingly, indicated that there was ‘too much happening’, with the result that, as one respondent put it, ‘you’ve got to pick your problems’. The respondent added, ‘To be quite frank, the students with disabilities issue is not a problem that we picked’ (Interview with responsible person, HAI). Linked to the feeling of ‘policy overload’ was the sense that in many respects the expectations placed by government on institutions are not sufficiently backed up by adequate funding and resources (Interview with responsible person, HDI).

It was also stressed that higher education remains a highly competitive environment and competition between institutions has a negative effect on disabled students’ participation in the system. The respondents’ concerns ranged from competition to recruit ‘good’ students and disabled students not being regarded as such, to problems arising because institutions were concerned about institutional copyright. With regard to the latter, one of the interviewees described how her institution (Institution A) had refused permission to another institution (Institution B), which had Braille facilities, to Braille institution A’s materials for their students because they were concerned about Institution B infringing the copyright on their materials (Interview with responsible person, HDI).

Institutions undergoing mergers have specific problems with disability support. One institution explained that through the merger process they had ‘inherited’ disabled students who required support that they were not equipped to provide. She describes the scenario that she faced:

So when they were talking about the merger, they started accepting students with disabilities and suddenly it became our responsibility. So we have two deaf students there who we inherited and when I request funding from the university and am told sorry, but I cannot give you money for interpreters, I cannot go back to the students and say sorry, you have to leave now. So for me it became an ethical issue, so I tried to raise funds to provide the funding for those students. (Interview with responsible person, HAI)

However, a respondent from another institution described how its merging partners had some valuable policies and mechanisms in place to support disabled students. Although her institution currently had very little in place, the merger had provided the impetus for her to raise the issue at her institution. In fact the development of effective teaching and learning support for disabled students was now an issue for discussion on the agenda of the merger process (Interview with responsible person, HDI).

## THE INFORMATION CHALLENGE

In Chapter 1 it was explained that one of the main purposes of the questionnaire was to gather information from institutions that could provide some sense of the existing levels of participation of disabled students on their campus. The information that institutions were able to provide, and the gaps in their responses to the questionnaire, combined with the input from the interviews, all showed that getting information was a fundamental challenge in developing and managing support for disabled students.

The ‘information challenge’, however, goes deeper than the unavailability of quantitative information about enrolments of disabled students. Other issues are the kind of information sought, the purpose and value of this information, and the tensions that are inherent to this area of concern. The issues that constitute the ‘information challenge’ arise from a range of factors. The discussion which follows brings these issues together in a way which reflects the nature and complexity of the problem for institutions and the implications for the creation of equity for disabled students.

### Monitoring participation

In Section C of the questionnaire institutions were asked to provide a profile of the students with disabilities currently on their campus. They were asked to record the number of students with disabilities and categorise them by race, gender, and programme of study, i.e. whether enrolled for undergraduate or postgraduate degrees, and whether enrolled in contact or distance education programmes. They were also asked to indicate the source they used to gather this information.

Most institutions had difficulty in providing the data requested. While the majority (22 out of 24, or 92 percent) gave the total number of disabled students in their institution, only 13 institutions were able to disaggregate their numbers by race and gender.

The data shows there are 1141 disabled students currently enrolled in these 22 institutions, and 15 institutions were able to indicate which course of study they were enrolled in. According to this data, most students are undergraduates. Across these 15 institutions there are only 10 reported postgraduate students with disabilities.

In reflecting on the accuracy and importance of these figures, institutions indicated that gathering reliable information about students with disabilities on their campus is extremely difficult. Very few felt that their data was completely reliable and provided an accurate picture of the disabled student population, especially according to categories that are generally regarded as important in examining the equity profile of the student population, such as race and gender and the programmes of study for which they are enrolled. The findings of this study show clearly that the issue of effective, appropriate and accurate data collection about

disabled students in institutions is a key challenge on most campuses. A number of factors appear to be contributing to the difficulties they experience. These are discussed in more depth later in this section.

While recognising that the information gathered through this section of the questionnaire must be read with caution, and interpreted in the context of the insights gained from the interviews, it is possible to make some tentative points about the existing levels of participation by students with disabilities in the public higher education system.

As already stated, a total count of 1141 students with disabilities was recorded at the 22 institutions that supplied this information. The numbers recorded by any one institution ranged from 1 to 210 disabled students and can be regarded as the information available to the respondents when the questionnaire was completed, that is, between June and September 2003. To determine the number of disabled students as a percentage of the overall headcount enrolment of the responding institutions, the researchers compared the figures supplied for each institution with their total headcount enrolments for 2002 (the latest available data).<sup>19</sup> Using these figures, the number of disabled students as a percentage of the total number of students enrolled at the institution ranged from 0.01 percent to 0.9 percent among the responding institutions. Overall, 1141 disabled students constitute 0.27 percent of the 2002 total headcount enrolments for the 22 responding institutions.

These figures do very little to address the problem of determining the rate of participation of disabled people in higher education – an issue that was raised in Chapter 1. Despite this, we can say with some certainty that 0.27 percent of the responding institutions' total enrolment figures is an extremely small percentage of their student body. Even if a minimum participation rate of one percent for disabled students is considered as an initial target to broaden disabled people's access to higher education, it would take a fourfold increase in current participation rates to meet it.

### Sources of information

The institutions that were able to provide the most comprehensive profile of their enrolments used a number of sources, including specific information requested in their admissions form, tracking the number of students who asked a disability unit or programme for help, other student services, and a once-off initiative to collect the relevant data. In the interviews it became clear that some institutions had also used less formal but innovative ways of collecting enrolment data. Two interviewees said that after they had filled in the questionnaires meetings had been held on their campuses for students with disabilities and that a much larger number of students with disabilities had attended these meetings than the number recorded in their data base or gauged from the more official information that was available

<sup>19</sup> Total headcounts taken from HEMIS, 2002 data.

to them. Two institutions also asked for help from the SRC (Student Representative Council), which had been involved in reaching disabled students through various activities on campus. These strategies show that some institutions did attempt to provide accurate statistics about their disabled student population, and they also show that to do so they had to go beyond using the data to be found in their formal information systems.

Table 12 shows the institutions' responses to question C2, about the source of their information, and shows that a number of them used more than one source. Most institutions acquired the information by asking in their admissions form whether the student had a disability and by tracking the number of students who had asked existing support services on campus for help.

**Table 12:** Source of information about the number of students with disabilities in the institution

Source of information	No.	%
Admissions form asks students whether they have a disability	14	58%
Admissions form asks students whether they will require any support from the institution associated with a disability	5	21%
Information collected from tracking number of students who have sought assistance from support systems on campus	13	54%
Other	5	21%

### Rethinking effective information gathering

The profiles of the disabled students enrolled at the 22 institutions that responded to this section of the questionnaire were incomplete: some of the information required could not be provided, and some that was provided was unreliable and possibly not accurate. This points to a very serious problem with data gathering in higher education. Although the problem is not limited to disability, it is particularly visible in this field. Most institutions collect data about disability through their admission and registration forms, and those with functioning support programmes for students with disabilities can also gather data from the students these cater for. Through the interviews it was possible to identify three problems with the gathering of data on disability.

First, it was pointed out that although admission forms may request information about disability from applicants the responses given are not necessarily included in the overall data management system of the institution, so it cannot be easily retrieved and used. One senior manager explained the problems he experienced when he attempted to obtain this data from his institution:

I asked two very simple questions: I just wanted, by programme and by campus, the stats on students with disabilities... I must be upfront, that has caused quite a storm of protest. (Interview with responsible person, HDI)

Another respondent said:

When I had to fill in that questionnaire of yours I had a major problem just getting statistics from our [department]. They could not tell me how many students we had on campus. Apparently it is somewhere on our application form on the registration form but they did not feed it onto the computer, so they could not tell me. (Interview with responsible person, HDI)

Respondents emphasised that some of the problems of collecting and managing this kind of data are not peculiar to information about students with disabilities but rather reflective of institutions' more general lack of capacity to develop and maintain accurate and reliable information systems.

Second, students are reluctant to declare their disability on the registration form for fear of being discriminated against, victimised and stigmatised. The following responses from interviewees highlight this problem:

We realised that there must be more students, there could not only be 17. Out of the students who came forward with their disability, we asked perhaps one or two of them if they knew of other students with disabilities and they said that there were many students but students don't want to be labelled. (Interview with responsible person, HAI)

Students value places at institutions like ours. They do not want to indicate their disabilities on any official forms, because there is a certain amount of branding that goes with it, that is my own personal point of view... From the person him or herself, they are reluctant to disclose this, because it might seem that they are looking for special treatment or pity, so there is the psychological part of it. (Interview with responsible person, HDI)

Third, there is a problem with the type of data collected and its use. A number of the respondents emphasised that requesting potential applicants to indicate on the application form only whether they have a disability or not is problematic in a number of ways. Besides the potential for raising fears about labelling, discussed above, it does not provide the necessary information about what kind of support a student may need. In institutions where there is a disability unit or programme the staff are able to follow up on applicants to determine their support needs. However, this is not the case with all institutions. One respondent explained that the emphasis should be on determining the kind of additional support that a student may require from the institution. It was argued that if the emphasis is on needs rather than on disability, then a student might feel more willing to provide

information about disability on the application form. Some institutions said they were trying to move towards this kind of approach; for example, asking an applicant to indicate whether he or she would require any form of support from the disability unit or programme on campus. Although the shift may be subtle, introducing the notion of support would imply a willingness on the part of the institution to consider the learning needs of the student and not merely a desire to know whether they are disabled or not.

Another respondent added that having reliable data on disabled students' enrolments does not provide insight into the progress an institution is making towards addressing some of the barriers to participation that have been highlighted in this study, such as how accessible the institution's buildings are for disabled students and how aware the academic staff are of the needs of disabled students in their classes. These matters constitute necessary data in any serious attempt at monitoring equity of access for disabled students.

One of the interviewees said there was a tension between the information that was collected for reporting to the Department of Education and the information that was needed for 'critical issues' (Interview with responsible person, HAI). It was suggested that, as an alternative, institutions should be involved in data collection which would inform the provision of effective support for students with disabilities and be the basis for effective monitoring of progress towards meeting the goal of equity. The concerns described above are perhaps best captured in the following quotation from one interview:

I have no problem in collecting statistics of students who need support and specific kinds of disabilities. It's an operational requirement. But the kinds of statistics that people are looking for is more about politics and are so easily manipulated that they are a joke. They say nothing, unless they are properly researched, which will give you some kind of indicator around adherence to policy. I could tell you we have 500 students with disabilities – what would you know? We could have genuine registrations, we could have someone who has a slight heart defect – if I went out and looked for them I will find them, no question... should someone see the need. I think they should put together a programme of data collection that is sound, which actually researches all these issues, and make sure that they come up with accurate data. We certainly have been asked by the DoE on many occasions now for disability statistics. I simply refuse to give them. I will give them the number of registrations, but I don't stand by that as the number for all of these reasons. (Interview with responsible person, HAI)

Despite the technical and attitudinal problems with data collection, this study has found that some institutions have initiated research projects aimed at developing a more holistic and informed perspective on these issues. Unfortunately it was not possible within the scope of this project to explore these initiatives in more depth.

## CURRICULUM RESPONSIVENESS AND THE ACADEMIC ENVIRONMENT

A fundamental point made in White Paper 6 is that equity for disabled students means full participation in the process of teaching and learning. The curriculum is thus a substantial element in their struggle for equity of access. Here ‘curriculum’ is understood to include the content of the learning programme, the language and medium of learning and teaching, the management and organisation of classrooms, the teaching style and pace, the time frames for completion of courses, the materials and equipment that are available (and used), and the assessment methods and techniques employed (DoE, 2001a:32). Thus understood, it can either act as a major barrier to effective participation or have a facilitating role if it actually responds to the diversity of students’ learning needs. Two elements are of prime importance for achieving curriculum responsiveness to learning needs: the nature and quality of the teaching, i.e. the teachers and their training, and, intimately related to this, the flexibility of the teaching environment.

### Working with academics

It has been asserted earlier in this report that despite important mechanisms for quality assurance and the monitoring of teaching and learning practices in institutions, teaching in higher education still remains a largely individualistic process. The extent to which teaching and learning programmes are accessible to all students and sufficiently responsive to their diverse learning needs depends on the individual academic in the classroom.

Recognising the critical and central role that academics play in creating equity for students with disabilities, the questionnaire attempted to explore whether and how disability programmes are working with academics, and this issue was followed up during the interviews. Institutions were asked in the questionnaire to indicate whether they undertook any work with academics that was aimed at helping them meet the learning needs of students with disabilities in their classrooms. Of the 23 institutions that responded to this question, 15 said they did work with academics.

The eight institutions that said they did not undertake any work with academics cited as the main reason for this the lack of human and financial resources. One institution said the number of students with disabilities did not warrant such work, and another said there was insufficient support from the management of the institution. Two institutions noted the resistance of academics themselves as a reason not to do work in this area, and one acknowledged that it was just not seen as a priority.

The interviews made it clear that the attitude of some academics was a more serious barrier than had been captured in the questionnaire. However, examples were also cited of some academics’ great interest in and commitment to disabled students. These examples showed that where individual academics had gone beyond the call of duty to support and



accommodate students with disabilities in their classrooms the teaching and learning experience for these students had been substantially better.

Most respondents believed academics' negative attitudes and refusal to accommodate a disabled student in their classroom often stemmed from fear and lack of awareness. However, some said that, in their opinion, some academics displayed behaviour and attitudes that could be regarded as prejudice against disabled people. The following quotations show how some of the interviewees perceived academics' attitudes:

We are having a problem with academics with this person who is just about blind and I suppose you can say it is an attitude problem, it does come down to that, but in many respects it is just that they haven't thought about what is happening... But it is this kind of mindset that you have to try and change. It is really very difficult. (Interview with responsible person, HAI)

Lecturers are a problem up to a certain point. There are those who would go all out to help me to support students, there are those that feel that I am encroaching onto their territory and they don't take instructions from me, they don't report to me so to speak... So there are lecturers that I approach, some will take it as a positive comment, but some will say that they are not prepared or they just treat the blind students like all the other students, they need to attend the class whether the style of teaching is proper or not. You know, they feel intimidated when I approach them. (Interview with responsible person, HDI)

We have academics who refuse to, for instance, read overheads if they have blind students in their class, or refuse to change venues if they have someone who is unable to access their venue, because they have always gone to the venue right next to their office and why now must they walk across campus to be accessible – that sort of thing. So you do get that, but we tend to dispense with those issues much faster than before. (Interview with responsible person, HAI)

The staff have a fairly high exposure to all forms of disability. I feel that they would be very open to ways of addressing that... Whether they are capable of adapting teaching methodologies is a different matter. (Interview with responsible person, HDI)

While the issue of the cost of training academics, mentioned in Section E of the questionnaire, cannot be dismissed, some institutions seem to be appropriately solving the problem by integrating disability issues into mainstream staff development initiatives. The most common approach to these is to introduce the topics of diversity and teaching students with disabilities into staff induction or orientation programmes. One respondent said:

With us they call it the Education Innovation Group and all the new lecturers are trained there in terms of different aspects, e.g. how to lecture, how to do test writing, all the

regulations and now we have a foot in that to say how do you deal with a disabled student in your class. That is wonderful. It is done twice a year and I think it is a very nice podium for us to make people aware of that. (Interview with responsible person, HAI)

As one respondent pointed out, raising awareness among academics in this way does not have to be a highly technical process – the important thing is to alert them to the fact that they may have disabled students in their classrooms and get them to start thinking through issues of flexibility in their teaching approaches (Interview with responsible person, HAI). This respondent went on to explain that their work with academics mainly involved introducing them to the social model of disability, its history, and the new policy framework now in place. A few institutions also run workshops with academics on supporting students with disabilities and undertake specific work with academics to develop more accessible teaching and learning materials. In all the cases where institutions were involved in some way with academics the respondents cited this work as extremely valuable. They said it provided people with information that countered their fears or potential fears and it raised awareness that had a ripple effect throughout the institution.

### **Flexibility in the teaching and learning environment**

Despite some instances of issues of diversity and disability being included in staff development for academics, there nevertheless seems to be a lack of the substantial engagement with the academic community that would bring to their attention the centrality of the teaching and learning process for disabled students' chances of success. However, working with academics is a complex issue. A range of factors, some of them an integral part of the nature and functioning of the academic environment, contribute to the complexity of the challenge experienced by most institutions.

This challenge is due largely to the constraints in the academic environment that make it difficult to apply more flexible teaching and learning strategies. Throughout this study respondents mentioned the way these constraints limit disabled students' participation in the teaching and learning process and thus their chances of success. While such constraints were repeatedly alluded to by the respondents, and discussed in various ways in relation to various topics, they are also the least obvious and thus the most difficult to address. Some of the most significant ones are practices and attitudes that tend to dominate teaching and learning in higher education and which directly or indirectly disadvantage disabled students.

As with other issues discussed in this report, where institutions are addressing these challenges there are examples of exceptional dedication and innovation, and a deepened understanding of what is needed to transform institutions so that they will be better able to meet the learning needs of disabled students.

When it came to discussing how to implement strategies for achieving flexibility in teaching and learning, most interviewees said these strategies are often perceived as likely to compromise the quality of the academic programmes. As one respondent put it, ‘flexibility is seen to be about dropping of standards’ (Interview with responsible person, HAD). It was also argued that academic staff who may be particularly inflexible and fail to make any attempt to accommodate disabled students go unchallenged because of their seniority in the institution and their perceived value to the academic environment. One of the respondents provided the following example:

It was based on issues of safety, issues of someone working in the lab etc., but the language that was used in the interviews plainly betrayed the lecturer’s true [feelings] and in fact in front of the Head of Department, I mean it was plain to everyone, including the HoD in that instance, that this person was in fact just plainly bigoted. A very uncomfortable and embarrassing situation for the department as well... The added embarrassment was I think that this person has a fairly senior position within the university structure. It wasn’t a junior person by any means. One hears excuses on the part of the university community, sort of senior staff, around how someone has academic excellence; someone has an incredible record – one has to put up with the eccentricities of some specialists, because it is in our interest to have them on our books. Those kinds of arguments are put forward, but you take them with a pinch of salt. To me it is inexcusable. (Interview with responsible person, HAD)

It was also mentioned that management and coordination issues about teaching and learning, such as when tutorials take place, where lectures are held, what are regarded as the core courses or modules in a programme and how courses are assessed, are practices that have developed historically and are now ‘set in stone’ (Interview with responsible person, HAD). One respondent explained the problems they experienced:

So where courses have to be altered or components of courses have to be changed, it is a massive challenge for the university in terms of deciding whether that is a core component of the course or whether it is marginal, whether a course is dramatically affected by the change in the curriculum and so on. Pitching that sort of flexibility is very hard for academics. They don’t exclude anything from their course, and so it is a very careful negotiation where this happens, to make sure that happens properly. (Interview with responsible person, HDI)

Many of the examples cited during the interviews showed how lack of flexibility disadvantaged disabled students, often in ways that were not obvious to the lecturer or the institution. Obviously, flexibility must be considered in relation to what is reasonably possible for the institution, and academic standards must be maintained. However, examples found during this study where disabled students were effectively accommodated despite initial concerns point to flexibility as the central factor that changed the status quo. The following examples illustrate this point:

We have a student this year who came in last year, extremely bright student, blind, came in last year and registered to do a BCom degree, he passed all his first year courses, very bright, very focused and determined student, passed and at the end of the year said I don't enjoy doing BCom, I don't want to do this, I would rather study Music. So everybody says, oh boy, music, blind, we have never done this before, we don't know if we can, because music is not about singing and clapping, it's about reading and writing and composing and playing an instrument. So anyway I said I will go ahead and make the application and see what happens. The Music department said they don't know if they could do it and we said let's try, let's give him the opportunity and we will see how we can support you with this. So he registered for the degree in music and our maths tutor fortunately has some primary school music and still remembers notes and scales and all of that and said I will try and help him so let's see what we can do. We made contact with the lady from Worcester at the School for the Blind and we said now let's try and all work together with helping the student. So you see, it's not something that you do alone – you look for support all over, very collaborative. So we all clubbed together and we helped the student, and it's a learning experience for everybody. The student excels like you cannot believe, no test or exam so far has he received less than 90 percent. He tops his class. (Interview with responsible person, HAD)

An HoD [Head of Department] approached me two weeks ago. He was asked by his Dean to speak to me. They have got a student who has only an arm up to the elbow; this is his right arm. He taught himself to write with his left hand. When it comes to the issue of placing him and the employer to do the experiential learning, the employer says we can't accept this student, because we have in the workplace safety regulations etc. I countered that by referring the HoD to the website of the Association of Foot and Mouth Painters, because the argument was that this person would not be able to do the drawings, because you would need to use both hands; not the CAD CAM, but to do a drawing on the drawing board, at the firm in which he was going to be placed. I asked him to do that and come back to see me. He saw that people painted with their mouths and feet. I told him that there could be innovative ways in which this person could actually overcome that. Thus if you give him a CAM CAD programme on the computer, he can do it, because then he uses just the one hand. It is a drafting firm and they said they needed him to use both hands. So what I am saying is that if you put it lower down on the floor, he can use his foot to hold the ruler and draw lines, or something of that nature. It sounds extreme, but he is actually taking it and running with it and he is trying to see if he can find someone who would accept this. In the meantime the student is practising. He actually said that he never actually thought of using his feet or his mouth – his mouth to hold the ruler or pencil and his good hand to use the ruler or set square and then use his mouth to draw the line. (Interview with responsible person, HDI)

We have another student that has very severe physical disabilities – artificial legs, limbs are underdeveloped – and manages to use an elbow and one finger to type and he has a wheelchair now... and he wants to do Fine Arts. He paints with his mouth. Who are we to stop him...? If he cannot cope by the end of the first year then we will tell him that it's

not working out and we can redirect. We gave him the chance, and after the June exam I sent the lecturer an e-mail asking how he was doing... the e-mail comes back glowing, he has done so well. One of the core courses there is sculpting, and they were worried about that – what happens in second and third year level. So we said let's try and work around it. What does the student want to specialise in? He does not want to specialise in sculpting, he wants to specialise in painting, so why make sculpting the issue? Why use that to deprive him of the opportunity? Okay, at first year level he had to do sculpting and he had to work with mud and that was fine, he managed to do that somehow or the other and he got a friend to help him. Can they not do the same for second and third year level, seeing that that is not an area that he is going to specialise in? The department then needs to make a compromise here. You know that is not what he is going to major in. Instead of using wood sculpture, let's restrict him to the mud, and they said that they were fine with that, because we will be evaluating him on his painting. So they managed to come up with that compromise. We kept a record of his progress so far to make sure that he is coping, because we told him that we will give him the opportunity for this year, but if by the end of the year we find that you are not coping then you will allow us to redirect you, and he said 'Fine'. (Interview with responsible person, HAI)

## **MANAGEMENT AND LEADERSHIP CHALLENGES**

The huge battle is getting senior management to realise the importance of accepting all students, for as long as senior managers are not going to believe that there is a place in their institutions for people with disabilities, nothing is going to happen. (Interview with responsible person, HAI)

Management is the one that plays an important role based on the experiences I have had at [name of institution]. (Interview with responsible person, HDI)

With our senior management it is more a lack of awareness. (Interview with responsible person, HDI)

Although in answering question H1 only three institutions chose 'lack of support from senior management in the institution' as the most significant constraint on providing disabled students with effective teaching and learning support, the interviews suggested that senior management have a fundamental role to play in supporting this work. Senior management attitudes were described on the one hand as a 'huge battle' to deal with, and on the other as a factor central to the progress that had been made.

Some of the respondents noted that support for their endeavours by the vice-chancellor or a deputy vice-chancellor had been one of the most important factors that had enabled them to bring about the necessary changes. Examples of valuable support from senior management included:

- helping the responsible person access necessary funding within and outside the institution.
- building a culture of tolerance within the institution which emphasised the importance of respecting diversity within the student body.
- recognising the teaching and learning needs of disabled students as a necessary and integral part of the institution's functioning.
- putting in place flexible management practices that allowed for disability issues to be recognised as involving a range of key stakeholders within and outside the institution;
- ensuring that the responsible person was given sufficient authority within the institution to leverage change and be taken seriously; and
- personally intervening when problems arose.

One respondent, who emphasised the central role her vice-chancellor had played in supporting her initial attempts to set up some kind of support system for students with disabilities, explained that the vice-chancellor's garage had been the first physical 'home' for the programme – perhaps a less traditional form of support, but equally valuable. It is important to note that these examples, which highlight the qualities of supportive leadership, were mentioned by both historically disadvantaged and advantaged institutions.

However, resistance or lack of support by senior management is also common in some institutions. It seems to have three manifestations. Firstly, some senior managers do not see a place in higher education for disabled students. In one case, referred to in an interview, this approach turned into anger over the admission of a disabled student:

People are not happy that I challenged the idea of them not accommodating blind students [and] all I know is that the DVC was less interested. He was fuming when he was told that we had a blind student and we needed extra materials and so on, why did we bite off more than we could chew, that was the answer that we got. So I don't know how aware management is... I don't think that they are aware, because if they were, they were supposed to jump at the idea, they were supposed to support me right through, they were supposed to actually understand. (Interview with responsible person, HDI)

Secondly, some senior managers fail, or refuse, to take responsibility for disabled students accepted into the institution. This is what happened at an institution that admitted a disabled student 'by mistake':

[The student] said he phoned [name of institution] and said that he wanted to register with them and told them that he was blind and somebody on the phone told him he could come to [name of institution]... So he went to our campus and when he was here he explained and said he phoned and was told he could come, and he filled in the form and they made the mistake of taking the R100. When he came back to register they wanted to say we cannot accommodate you, and then I jumped and said but your application form required them to explain the nature of their disability and when you took R100 up till

today, you needed to have done something because you promised the student and that is where I took the initiative of saying I would coordinate everything, but I don't think I get the support that I deserve. This should have been our first priority since basically the student is our main client and he was supposed to have been treated like all other students... but then we are not doing that, one is struggling to try and do that. (Interview with responsible person, HDI)

The experiences of some of the respondents also revealed a substantial lack of support and flexibility at other levels within the institution for any initiatives to address disabled students' learning needs – a lack of personal, practical and administrative support, coupled with inflexibility. One interviewee explained that to help a blind student he had managed to secure an old computer from the library and raise money for software that reads the text for a blind person. However, once a new librarian was employed at the institution the computer was taken back, with no alternative provision being made. He said:

They took the computer in June. Up until today they don't know what the blind student is using and they have not asked and it's very disappointing that they don't give me the support that I want. (Interview with responsible person, HDI)

Another respondent explained that on her own initiative she had contacted a non-governmental organisation (NGO) for help in putting a blind student's notes on to a cassette tape for him to listen to. The NGO offers this service at a minimal charge. In the first year of the student's registration at the institution this respondent had been forced to pay for this material out of her own pocket. However, although in the second year she was intent on ensuring that the institution took responsibility for this, she reported in the interview:

There are cassettes at the [name of NGO] which I expected the university to pay for and I made a requisition and they have not yet paid for them and we are already in the second month of the second term, which is a problem for me. (Interview with responsible person, HDI)

There is no doubt that higher education institutions, especially historically disadvantaged ones, face enormous resource constraints that create real challenges for them. However, the differing approaches of senior managers across the institutions participating in this study show that institutional leadership is a critical leverage mechanism for change in this area and that effective change can happen despite these resource constraints. And despite the historically advantaged institutions' better financial position the attitudes and commitment of their management also differ from institution to institution. The examples presented above show that at some institutions where there are valuable and visionary initiatives, showing exceptional commitment and dedication, senior management's support nevertheless remains, at best, very limited.

The study revealed one very important example of innovative leadership in addressing disabled students' needs – the introduction of what might be called the *stakeholder paradigm*. This means implementing collaborative strategies and processes for addressing the needs of disabled students, including the direct and supported involvement of key role players both within and outside the institution.

A number of the institutions that participated in the study have a forum or group which is either temporarily or permanently involved in addressing disability issues on campus. These take various forms, but the most effective appear to be those made up of individuals representing various structures on the campus which are considered important for ensuring effective teaching and learning provision for disabled students and for combating discrimination against them in the institution. In discussing these structures with the respondents it became clear that three important factors influence their effectiveness.

First, the levels of seniority and the institutional location of the people involved affects the ability of such forums to leverage necessary changes and harness institutional support. It was argued that the more senior the representatives the better, as it was more likely that these individuals would then take personal responsibility for implementing decisions. One respondent explained this as follows:

He taught me about the 'hinges of power'. One has to locate the hinges of power if one wants to get things done. And that is very much the case. (Interview with responsible person, HAI)

Some examples the respondents mentioned of suitable people were deans, who ensure decisions are applied in each of the institution's faculties, people in strategic positions such as institutional planners and registrars, and heads of those departments responsible for matters such as physical planning and security. Second, it was emphasised by one of the respondents that the presence of personnel from divisions directly responsible for academic support, such as academic development units, was essential so that the needs of disabled students would become part of broader institutional planning. And third, and perhaps most critically, it was emphasised that disabled students themselves need to be involved in a representative capacity in these structures. In three institutions the imperative for disabled student representation was linked to the broader principle of student representation and initiatives had been started with the SRC to ensure disabled student participation in student organisation more broadly. In fact, some institutions emphasised the critical role of the SRC in reaching out to disabled students on the campus.

It was emphasised in Chapter 1 that a weakness of this study has been the absence of the voices of disabled students themselves. During the research process the researchers were made aware of a number of initiatives that had attempted or were attempting in some way to facilitate greater organisation among disabled students. Without speaking to the students themselves or accessing key student structures it was difficult to get a clear picture of the



degree to which disabled students are involved in student organisation on campus, especially in the SRCs, and the extent to which present student structures are addressing disability issues. This remains a critical area for further investigation.

Disabled student representation must be considered in the context of the broader principle of ‘self-representation’ among disabled people. Some of the institutions surveyed appear to have taken this principle further by linking or working with structures in their province or local area which can broadly be described as representing the disability sector in South Africa. These include the various Offices on the Status of Disabled Persons (OSDPs), which mainly exist as ‘desks’ in each of the Premier’s offices, and organisations of disabled people such as Disabled People South Africa (DPSA), Deaf Federation of South Africa (DEAFSA) and other organisations within the South African Federal Council on Disability (SAFCD). The initiative by some institutions to link with and work in partnership with these organisations is an innovative and important development within the sector.

## **THE OPPORTUNITIES FOR AND LIMITATIONS OF REGIONAL COLLABORATION**

As pointed out in Chapter 1, White Paper 6 refers to the principle of regional collaboration to organise and provide teaching and learning support services for students with disabilities, especially the more cost-intensive services, and makes specific mention of the support needed by blind and deaf students (DoE, 2001a:42). It was also pointed out that although regional collaboration is specified as the guiding principle in this area, further clarity on how the principle can be put into practice has not yet been developed in the sector. Interviewees were asked to comment on this principle and suggest how it could best be applied in their context. In general it was acknowledged that regional collaboration is an important principle that could be valuable in meeting the needs of disabled students throughout the system, and some respondents emphasised that it would provide opportunities for achieving greater equity across the system and redressing past inequalities.

However, two broad areas of concern emerged from the discussion. The first was the notion of a ‘full-service’ higher education institution. This concept and the concerns about its application in higher education are explained below. The second was the practical challenge of regional collaboration. Some of the concerns about this arise directly from existing attempts within the sector to work with other institutions.

### **Challenging the ‘full-service’ concept in higher education**

In White Paper 6, provision has been made at the schooling level to put in place an incremental strategy aimed at converting or developing the capacity of a sample of mainstream schools into what the document calls ‘full-service’ schools. It is argued that this is essentially a piloting process aimed at developing this sample of schools into ones that are able to meet the full range of learning needs – fully inclusive and able to provide quality education for all

learners. The lessons learnt from this process will then be evaluated and used to guide the system-wide application of an inclusive education and training system (DoE, 2001a:4).

There is some concern that the same strategy will be applied to the higher education system. In other words, the principle of regional collaboration referred to above would be put into practice by developing similar 'full-service' institutions at the higher education level. It is difficult, from the wording of White Paper 6 and the specific provisions that are made for higher education, to know whether the 'full-service' notion will be applied to higher education. Only in two sections of the White Paper (the Executive Summary and Chapter 1, which outlines what an inclusive education and training system is seen to be) is reference made to the inclusion of higher education institutions as educational institutions that will be designated and established as 'full-service' ones (DoE, 2001a:8, 26).

In the interviews a number of the respondents said they would be very concerned if the principle of regional collaboration was applied to the higher education band in a way which meant that some institutions would be designated as those that would be supported by the government to become institutions able to support disabled students. The two most important concerns raised were that disabled students would be further stigmatised and marginalised through such a process and that it would effectively restrict their choice of where to study. This choice would be more restricted than that of other students, because their disability would influence where they were able to go, which, as one respondent emphasised, would contradict the principle of non-discrimination on the basis of disability. The following quotations highlight these concerns:

But just coming to regional collaboration, the collaboration is a superb idea, if it is on a collaborative partnership basis. If what they are trying to say is that they want to create like the special schools like in the schooling systems, I am totally opposed to it, because that does not solve your access problems. All that will happen is that those people from the rural areas that we serve, it will become too much of a problem for them to go to a special university or institution that has got everything. It doesn't matter how much of an infrastructure you pump into that, to serve society, and this is the sociologist in me saying this, it would be far better to build a regional support structure, so that you don't go and reinvent the wheel, you go and borrow the wheel from [name of institution]. When you finish you return it, but you still accept students based on their needs. The student made the choice to study and this is a student that is confined to a wheelchair, you mustn't tell him that there is a special school for wheelchair students, you must go to [name of institution]. I disagree with that totally, otherwise you stigmatise it and you dogmatise it as well. Like the schooling system... then you are going to start compartmentalising people and the whole sociological aspects come into it, on best fits and misfits and then I start having problems with prejudices and so on... because you get prejudice in all forms. Society should be working towards integrating these people into the broader society rather than compartmentalising them. So this is why I feel very strongly that the regional collaboration should be more of a partnership where you share

resources and expertise with one another so that there isn't duplication. (Interview with responsible person, HDI)

As a student it is my constitutional right to decide where I want to go and study. (Interview with responsible person, HAI)

What about language barriers, someone who wants to go to [name of institution] and wants to learn through the Afrikaans medium and is being forced to come to [name of institution], it's not fair. (Interview with responsible person, HAI)

### **The practical challenges of regional collaboration**

In general, most of the concerns raised by the interviewees about regional collaboration were about how it would work in practice. A number of institutions are already trying in various ways to collaborate with each other. Examples gathered from the research process range from establishing the needs of disabled students as a key focus area of an existing, formalised regional structure, to more informal information sharing, networking and, in many cases, collegial support and advice. Most of the respondents said they were in contact with colleagues working in the same area at other institutions. In some cases, especially where initiatives are fairly new, the respondents emphasised that they would not have achieved what they have without this support from other institutions. There are also some examples where one institution is sharing some of its resources or allowing them to be used by another institution. In these cases the emphasis is generally on assisting those institutions that have very few resources. Over the last few years there have also been a number of conferences and seminars organised by individual institutions or structures in the broader disability sector to address the participation of students with disabilities in higher education.

The concerns raised by the respondents were based on some of these more informal experiences and related primarily to the possible implications of formalising the collaboration as a means of facilitating more effective provision across the system. Although some of the interviewees commented specifically on the 'full-service' concept as discussed above, others commented in a more speculative way about various possibilities and what these might mean in practice. In general, respondents reflected on options that involved some form of sharing of the more cost-intensive resources across institutions.

The first and perhaps most obvious concern raised by some of the respondents was the geographical location of the institutions. It was argued that in some regions the institutions are located too far apart for it to be practical to share resources amongst them. They emphasised that this was especially important where the resources are basic support for teaching and learning and need to be available to the students on a daily basis.

Some respondents also argued that there are differences between institutions that they felt could not be ignored when considering the possibilities for regional collaboration. They raised points ranging from differences in institutional culture to academic standards. A more practical example cited was the use of support materials such as textbooks. As one respondent put it: ‘Which text books would you Braille?’ (Interview with responsible person, HAI).

Some of the respondents voiced concerns about the differences in the costs involved in supporting different disabilities. The most obvious example cited was the cost of providing sign language interpretation facilities. One respondent commented that if one institution provided a particular kind of support or service and shared it with other institutions in the region, this would place a greater cost burden on those institutions providing the more costly services. For example, the cost of Braille support material is not substantial once the necessary equipment is in place, whereas the ongoing provision of sign language interpretation facilities effectively means the full-time employment of specialised staff with sufficient capacity to operate at the regional level. The respondent pointed out that there are substantial differences in the cost of these two kinds of service:

I don't see it working at all, for very practical reasons. Firstly funding, because each disability costs differently. When it comes to deaf students, how do I lend services to other universities? I cannot. (Interview with responsible person, HAI)

All the respondents emphasised that no matter how the principle of regional collaboration is taken forward and put into practice, significant support from the Ministry would be necessary, including adequate funding to support institutions to develop the initiatives already started and create greater opportunities across the system. As one respondent emphasised, if existing provision was to be effectively regionalised, it would require support from the Ministry to make this happen (Interview with responsible person, HAI).



### **CONCLUSION**

This report has discussed the findings of a study commissioned by the CHE into equity of access and opportunities for students with disabilities in the South African public higher education system. It was intended as a first step towards gaining greater insight into an area of higher education where implementation of new policies, the legacy of apartheid and deep-seated social and intellectual attitudes create a complex set of conditions for achieving equity of access as a transformation goal.

The point of departure of this study was the belief that the conceptualisation of disability in the international and local literature and the incorporation of this into policy formulation needed to be read against the reality of higher education institutions' varied experiences of supporting disabled students.

Taking this into account, this study tried to describe the state of support for disabled students in higher education at two levels. Firstly, it set out to provide as comprehensive an overview as possible of current institutional practices and the size and profile of the disabled student population in South African public higher education institutions. Secondly, it focused on identifying the situations and practices internal and external to the higher education system that hinder the achievement of equity of access for disabled students, and examined the practices and strategies adopted by institutions that were successfully addressing the challenges posed by the admission of disabled students into higher education.

The findings of this study highlight the way these institutional practices and history, conceptions of and attitudes to disabilities, and the socio-economic context of disability combined in a particular institutional set-up to generate a number of specific challenges for those who are responsible for developing and implementing support programmes. The most important findings can be grouped into four areas: the impact of history, the role of institutional differentiation, the flexibility of teaching and learning approaches, and the challenges of mainstreaming support for disabled students.

#### **The historical legacy and its ongoing effect on access and participation**

A number of the findings point to the ongoing effect of the legacy of apartheid on disabled students' access to and participation in the public higher education system. This relates to the particular experience of disabled people in South Africa who were denied fundamental

socio-economic rights and offered an education system based on unequal provision. The study has stressed the way the schooling system restricted the life chances of disabled students, especially in accessing educational provision beyond the general education and training (schooling) phase. As has been pointed out in the previous chapters, this situation was also informed by concepts of disability that focused on physical impairments as barriers to disabled people's success in higher education.

While access to basic educational provision has improved for disabled students over the last ten years, the study has shown that attitudinal barriers continue to exist, in both the schooling system and the higher education institutions. In the case of the schooling system, the refusal to see disabled students as higher education material is at the origin of disabled students' lack of social and academic preparedness for life at higher education institutions. While addressing these issues goes beyond the responsibilities of higher education institutions, if the sector is to respond effectively to the equity imperatives for higher education, institutions will have to find strategic ways to address these ongoing inadequacies in the schooling system.

### **Resource disparities and more not always meaning best**

The evidence collected in this study shows that what is currently available to respond to the teaching and learning needs of disabled students differs across the 24 participating institutions. It has been argued that levels of provision range from well-resourced programmes or units with relatively large staffs to one-person offices that struggle to provide support to disabled students. These findings suggest that reducing the resource disparities between institutions is an important aspect of addressing these policy goals. But, having said this, the study has also argued that 'more' does not always mean 'best' and shown that some of the most innovative practices are those that arise from the most adverse circumstances. Thus while a picture has emerged of better resourced historically advantaged institutions, supported in some cases by high levels of commitment and engagement, there are also a number of these institutions where very limited provision exists or the present levels of provision have been put in place fairly recently. Similarly, while provision is also very limited in many of the historically disadvantaged institutions, there are a few where the level of services and strategies goes beyond what would be expected, given the overall resources of these institutions.

### **Attention to the academic environment and the process of teaching and learning**

Throughout this study findings have emerged which suggest that, although it is critical for creating equity for disabled students, the nature of the teaching and learning process in institutions and its associated parts are given insufficient attention, and despite some valuable interventions it remains the most difficult area to address. Some of the most obvious issues discussed in the study that support this finding include the limited work that is undertaken with academic staff, the lack of sustained and structured collaboration between disability units or programmes or personnel and other teaching and learning support systems,

especially academic development initiatives, the negative attitudes of some academics and their unwillingness to change teaching and learning practices which exclude disabled students, and ongoing assumptions about the perceived capabilities of disabled students in relation to specific courses and programme requirements. The study has shown that these barriers are reinforced where personnel responsible for facilitating teaching and learning support for disabled students lack the resources or the power within the institution to affect the kind of change that is needed. Conversely, where faculty becomes a focal point for change and disabled students' needs are integrated into the teaching and learning process, this has significant impact on students' success in the academic programmes.

### **Isolation and lack of integration of disability issues and the needs of disabled students**

The concerns noted above cannot be divorced from a more overarching issue that emerged from the study: the failure to integrate support for disabled students into core areas of the institution's functioning. Although this tendency is evident from a number of the findings that emerged from the study, it is most evident in the concerns raised about the isolation of disability units or programmes and the perception that they become 'dumping grounds' for anything to do with disability in the institution. This tendency is also evident from the issues of collaboration within institutions, as noted above, and in less obvious ways such as institutional funding and the manner and degree of support institutional leadership offers to initiatives that address the needs of disabled students.

It is important to recognise that such tendencies serve to reinforce the separation of the teaching and learning needs of disabled students from those of other students in the institution. In this way, disability issues do not become part of the processes of decision making and planning in the institution; they remain a marginalised and separate issue rather than becoming an integral part of the institution's functioning. In the long term this not only has implications for the recognition of disabled students as part of the student body but also ensures that key structures and personnel in institutions fail to take responsibility for an area of concern that should form part of their overall institutional responsibilities. It was explained to the vice-chancellors at the public higher education institutions that the exploration of what was currently taking place at institutions constituted a way of supporting the ongoing implementation of policy goals.

The findings point to critical barriers within and outside institutions that continue to restrict access to higher education for disabled students and undermine their ability to participate equally in the process of teaching and learning and thus have a fair chance of success. This suggests that despite some of the very important initiatives taking place, which as this report has shown are extremely important in addressing the needs of students with disabilities, substantial change still needs to happen if these students are to enjoy an equal place in the higher education system. Part of this change must involve the continuation of the research process begun through this study. It has been a first step in a process which, by its very nature, must be ongoing. It is hoped that it will serve as a springboard for further research into the concerns raised in this study and into those areas it was unable to address.



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