FACTORS INFLUENCING THE LACK OF DYSLEXIA AWARENESS AND ITS IMPACT ON INCLUSIVE LEARNING IN SELECTED PRIMARY SCHOOLS IN OWERRI WEST LOCAL GOVERNMENT AREA, IMO STATE, NIGERIA

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DOCTORATE IN EDUCATION

2012
University of Greenwich
School of Education

Factors Influencing the Lack of Dyslexia Awareness and Its Impact on Inclusive Learning in Selected Primary Schools in Owerri West Local Government Area, Imo State, Nigeria

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Doctorate in Education

A thesis submitted in partial fulfilment of the requirements of the Doctorate Degree in Education of the University of Greenwich

2012
DECLARATION

I certify that this work has not been accepted in substance for any degree, and is not concurrently submitted for any degree other than that of Doctorate in Education (EdD) being studied at the University of Greenwich. I also declare that this work is the result of my own investigations except where otherwise identified by references and that I have not plagiarised another’s work.

Student: Onyenachi Ada Ajoku-Christopher

Signature:

Supervisor: Bill Goddard

Supervisor: Gordon Ade-Ojo

Signature:

Signature:
ACKNOWLEDGEMENTS

My special thanks goes to my parents Nze and Lolo Rowland Ajoku for believing in me and for making me believe I could accomplish all this. I thank them for their invaluable guidance throughout my years of education.

I would like to thank my husband and my entire family for being so supportive of me throughout my studies. They have truly been a blessing to me. They helped me focus on the light at the end of the tunnel when all I sometimes saw was the dimness of what seemed on many occasions a never ending journey and a fruitless struggle.

I wish to thank my supervisors Bill Goddard and Dr Gordon Ade-Ojo for their advice, guidance, support and constructive feedback of which without, this work would not have been a success.

I would also like to thank the following people who helped make what started off as a dream become reality.

- My brothers Anaeleuwa, Chijioke and Ejike Ajoku, and my brothers-in-law Emeka, Samson and Chinedu Christopher, for their moral support
- Ejike Nlumanze and Akudo Chinemerem for their immense help during the distribution of questionnaires
- Donatus Okere for his support throughout the data gathering process
- Shirley Leathers of the University of Greenwich, for her support throughout my studies
- My colleagues Phillip Manya and Uche Nwaora for keeping me focused
- The State Universal Basic Education Board (SUBEB) for giving consent to carry out the research in primary schools in Owerri
- All Headmasters, Headmistresses and primary school staff who participated in this study
- All the respondents that participated in interviews that helped make this research a success
DEDICATION

This thesis is dedicated to my loving husband Gabriel, our children Jason, Shaun and Gabriella and my parents Nze and Lolo Rowland Ajoku.
ABSTRACT

This regional research was carried out in Owerri the capital of Imo State, one of the 36 states in Nigeria with the aim of investigating and identifying factors that are responsible for the lack of dyslexia awareness in the area. The study focused particularly on selected primary schools in Owerri West Local Government Area. The study is located in the context of contemporary discourse on dyslexia awareness in Owerri West. Primary source evidence and first hand information which were gathered through discussions and interviews with respondents confirms the status of originality on the findings of the research. Research carried out on database where nothing was found on dyslexia awareness in Owerri West is also evidence of originality of this study. The research sheds light on the effects the lack of dyslexia awareness has on teaching and learning in primary schools in Owerri West and in doing so draws attention to issues raised around the marginalisation of individuals with unidentified specific learning difficulties.

A triangulation of qualitative data collection methods was employed to explore and understand disability beliefs, experiences, attitudes, behaviour and interactions with regards to the impact these have on inclusive practices. The findings from these studies were then analysed drawing on a range of disability models including the social model of dyslexia, the social, medical and moral models of disability, as well as social construction theory. This enabled the creation of a more explicit understanding of disability issues as it concerns the society investigated.

The overall research findings, especially those derived from the interviews, highlight that factors affecting the lack of dyslexia awareness are located in the society’s predominant understanding of disability, the cultural perceptions of disability based on historical
practices, incomprehensive disability definition featuring in policy and the lack of awareness of the nature and dimensions of invisible/hidden disabilities like dyslexia in national disability policy.

Based on these findings the study concludes that ideologies around disability and inclusion are more geared towards the medical and moral models of disability. Furthermore, it concludes that the lack of an extensive understanding of disability and disability rights, which are very much features of a social model construct of disability, has impacted negatively on inclusive practices and perceived understanding of who is deemed educable. Following this, a number of recommendations were made including the need for robust teacher training programmes which will raise the awareness and understanding of dyslexia and in so doing improve the learning experiences of children with dyslexia.
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<td>Attention deficit disorder</td>
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<td>ADHD</td>
<td>Attention deficit hyperactivity disorder</td>
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<td>FEM</td>
<td>Federal Ministry of Education</td>
</tr>
<tr>
<td>FRN</td>
<td>Federal Republic of Nigeria</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>Acquired immune deficiency syndrome/human immunodeficiency virus</td>
</tr>
<tr>
<td>ICT</td>
<td>Information and communication technology</td>
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<tr>
<td>LD</td>
<td>Learning difficulties/disabilities</td>
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<td>NAPTAN</td>
<td>National Parent-Teacher Association Nigeria</td>
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<td>NCE</td>
<td>Nigerian Certificate in Education</td>
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<td>NGO</td>
<td>Non-governmental organisation</td>
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<td>NTI</td>
<td>National Teachers Institute</td>
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<td>NPE</td>
<td>National Policy on Education (Nigeria)</td>
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<td>OHCHR</td>
<td>Office of the High Commissioner for Human Rights</td>
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<td>SEN</td>
<td>Special educational needs</td>
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<td>SENDA</td>
<td>Special Educational Needs and Disability Act</td>
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<td>SpLD</td>
<td>Specific learning difficulties</td>
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<td>State Universal Basic Education Board</td>
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<tr>
<td>UBE</td>
<td>Universal Basic Education</td>
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<tr>
<td>UBEC</td>
<td>Universal Basic Education Commission</td>
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<tr>
<td>UNESCO</td>
<td>United Nations Educational, Scientific and cultural Organisation</td>
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<td>UPAIS</td>
<td>Union of the Physically Impaired Against Segregation</td>
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UPE  Universal Primary Education
WHO  World Health Organisation
“I’m not someone with dyslexia, I am dyslexic and were I not dyslexic I would not be me. And I wouldn’t choose to be someone else, so I wouldn’t choose not to be dyslexic.”

(Cooper, 2010)
1. Introduction

1.1 Overview of dyslexia and its effects on learning

Dyslexia is a form of specific learning difficulty that manifests as a problem with particular aspects of learning despite adequate intelligence and general learning skills. The term specific learning difficulties (SpLD), incorporates the following syndromes: dyslexia, dyspraxia (also known as developmental coordination disorder), Attention Deficit (Hyperactivity) Disorder (ADD, ADHD) and high-functioning autistic spectrum disorders (the most common of which is Aspergers syndrome) (Amesbury 2006). In addition to presenting difficulty in reading, writing and spelling in one’s native language dyslexia may sometimes also pose problems in learning Mathematics. This SpLD is also characterised by poor short term memory, poor visual sequencing, clumsiness and difficulties with spatial awareness.

The British Psychology Society (1999) proposes that dyslexia is evident when accurate and fluent word reading and/or spelling develops very incompetently or with great difficulty despite appropriate learning opportunities - that is, learning opportunities which are effective for the great majority of children. The syndrome of dyslexia is now widely recognised as being a specific learning disability of neurological origin that does not imply low intelligence or poor educational potential, and which is independent of race and social background (National Working Party on Dyslexia in HE, 1999). Many definitions of dyslexia are approached mainly from the medical model of disability with emphasis on the
problem with the individual. Scientists generally agree that genetics play a role in
dyslexia as it is an inherited condition (Nelson 2005). Scientists are also of the
view that dyslexia is caused by a neurological difference in the brain and results
from a neurological problem in the left region of the brain where several regions
located in the brain's left side are responsible for controlling the complicated task
of reading and writing (Hudson et al 2007; Habib 2000). A definition of dyslexia
taken from a social model of disability perspective however lays emphasis on
difference and not dysfunction. Cooper (2006) argues that

…dyslexia is an experience that arises out of natural human diversity on
the one hand and a world on the other where the early learning of literacy
and good personal organisation and working memory is mistakenly used
as a marker of ‘intelligence’. The problem here is seeing difference
incorrectly as ‘deficit’.

Difficulties experienced by dyslexic learners can lead to underachievement in
school and low self-esteem not only in early childhood but also in adulthood. The
availability of learning support when it is most required is therefore crucial (Reid
and Kirk 2001); early identification, diagnosis, recognition and learning support
are vital to the educational achievement of dyslexic individuals. In addition to
boosting an individual’s sense of educational achievement, self perception and
self conception, dyslexia support offers opportunities to explore learning through
different avenues using different coping strategies for learning.

The identification of reading and writing disabilities has come a long way over the
years. Developmental reading disability began to receive clinical attention about
one hundred years ago when two British physicians, Hinshelwood and Morgan,
independently reported case histories of children who could not read and spell despite adequate intelligence and normal schooling (Joshi, 2003). A lot has advanced since and through on-going research educators, parents and learners alike not only understand the intricate nature of dyslexia and its barriers to learning but are also aware of how useful coping strategies can be applied to enhance learning. Research input has invariably led to increased awareness at societal and educational levels. However, in as much as dyslexia is gradually gaining recognition there still remains a widespread ignorance about it (Hoyles and Hoyles, 2007).

This study intends to add to disability research by exploring the lack dyslexia awareness in Owerri West, Imo State, Nigeria and in doing so investigate how the social construct of disability in the society has influenced the lack of dyslexia awareness. Oliver (1992) proposes, disability is socially constructed therefore it cannot be abstracted from the social world which produces it; it does not exist outside the social structures in which it is located and it is not independent of the meanings given to it. Understanding the social construction of disability is crucial to comprehending how policy is created to address the ‘disability problem’. This is an area this study lays great emphasis on. The findings of this study suggest that disability legislation in Nigeria is rooted in what is socially constructed as disability. This study lays great emphasis on the social construction theory in discussions on cultural and societal perceptions of disability.

This study also delves into different models of disability with the attempt to provide a framework for understanding the way in which people experience
disability (Low 2006; Mitra 2006). The use of models as forms of representation can be said to be particularly useful when working with children (Llewellyn and Hogan, 2000). The social model of dyslexia as well as, the social, medical, moral and inclusive models of disability serve to inform this study. These models are discussed in greater detail in chapter two. Although the main approach to understanding disability arises from the medical model (Johnson, 1994), as does the first models or conceptualisations of dyslexia (Riddick, 2001), I am of the view that debates on dyslexia as a disability and arguments around effective inclusive practice or the lack of it are intertwined in various models of disability. These various models have in many ways contributed to existing knowledge of the way disability is experienced and addressed in the school system. These various models of disability have served to create a platform for engaging in disability debates. Such debates have helped refine inclusive practices in education.

Literature explored relating to this study and data gathered for the purpose of this study suggest that the moral and medical approach to understanding and addressing disability is predominant in the society investigated. However, the arguments put forward in this study tend to take on a more social model approach to viewing disability in general and dyslexia in particular. This is because the social model of disability is closely linked with the underlying tenet of inclusion that is, that the school adapts its practice to accommodate the child (Clark et al, 1995, Jenkinson 1997). This suggests that the examination of the social model of disability may have a role to play in school policy and practice (Riddick 2001). In this regard I argue that the primary schools investigated stand to gain if the
approach to viewing inclusion and disability issues in schools is taken from a social model stand point especially as the medical and moral approach to addressing disability has fallen short in terms of creating a platform for propagating disability rights. The social model re-defines disability as a social construct because it is the social, economic, attitudinal and political barriers that disable people and impede inclusion in society. School policies that adopt the social model of disability tend to focus on rights of pupils because it is recognised that disability results from the social, environmental and attitudinal barriers within society.

1.2 Statement of the problem

1.2.1 Lack of dyslexia awareness in Nigeria

Nigeria currently lacks available statistical evidence as proof of the percentage of people affected by dyslexia in the country. Although there are no existing figures to support the claim of the existence of dyslexia in Nigeria, it can still be argued that there is yet no justifiable reason to suggest that dyslexia does not exist in Nigeria as extensive research in relation to the percentage of people affected by dyslexia and its effects on learning is yet to be carried out. Hoyles and Hoyles (2007) argue that dyslexia is no respecter of race; it has a genetic base and it occurs in all countries and cultures. I argue that dyslexia clearly exists and is believed in by many great researchers, educators and students (Pollak 2005). However, it appears it has not been thoroughly investigated among many black communities where there is a need to raise awareness (Hoyles and Hoyles 2007),
Owerri West being one of them. Lack of dyslexia awareness is not specific to Nigeria alone. In many West African countries, dyslexia is yet to be acknowledged as a specific learning difficulty/disability. This is quite contrary to many western countries where there is growing interest by special needs educators in interventions which focus on presumed underlying processing difficulties (Norwich and Lewis, 2001). In many western parts of the world dyslexia awareness is widespread and the percentage of people with dyslexia is known. For instance in the UK, according to the British Dyslexia Association, statistics show that 10% of the population has dyslexia. In America 5% to 17% of school children are estimated to be dyslexic (Facker and Golonka, 2006). The issue of general lack of awareness of dyslexia in Nigeria, and its impact on current inclusive learning practices in primary schools in Nigeria is one that is in desperate need of address.

Unfortunately, where there is no concrete evidence of the existence of a need, a problem, or a learning difficulty, as in this particular case, there tends to be a general lack of justification to address the issue. Evidence is one factor that contributes to policy making, implementation and delivery. A lack of evidence to demonstrate specific areas found wanting or the lack of evidence to demonstrate the need to improve practices is detrimental to aspired change and improvement of already existing practices.

The impact perceptions of disability have on funding issues extend to broader areas such as policy, research and practice in special needs education where ideologies for acceptance, policy making and funding for instance, are inevitably
determined by our conceptions and understanding of special needs. Wilson (2002) proposes that there is a distinction between (1) the meaning of the phrase ‘special needs’ (the linguistic equivalent of ‘special’ and ‘needs’) and (2) the criteria of application - what is to be counted as a special need. Perhaps there is a possibility that this notion has contributed towards the irrational perception of disabilities in the policy arena especially where it concerns the more subtle disabilities like dyslexia, which though it has no evident physical signs that depict the disability and may therefore be difficult to identify, is none the less worthy of attention. Although the existence of policy does not ensure or guarantee implementation as intended, it is a good starting point in identifying needs and addressing them. Generally speaking, some needs receive more attention than others in the policy arena; variation often depends on the ability of constituencies to mobilise and exert pressure on politicians (Levin and Riffel, 1994). Therefore, a lack of interest and recognition of dyslexia by stake-holders who drive the educational system will inevitably impact negatively on policy making, funding allocation and the way specialist teacher training, curriculum planning, teaching and learning, and ultimately inclusion is addressed.

Until dyslexia is given status in Nigeria as a learning difficulty/disability and until extended research on dyslexia awareness and its impact on learning and educational achievement are thoroughly investigated in Nigeria, there may not be a justifiable reason for dyslexia to be considered a learning difficulty/disability worthy of attention at government policy level. As a result, those affected by it may continue to be disadvantaged by an educational system that does not fully
include them or take into account their learning needs. Until this happens inclusion in this respect may not hold great prospects.

1.2.2 Literacy related challenges in Nigeria

Nigeria is the most populous country in Africa and boasts over half of West Africa’s population. The country is divided into 36 states with Abuja being the country’s capital. Presently, with a population of about 120 million, Nigeria currently has a literacy rate of about 50%, one of the highest in Africa (Reading Across Continents: Basic Facts about Nigeria, 2009). In 1950, the United Educational, Scientific and Cultural Organisation (UNESCO), estimated that the illiteracy rate in Nigeria was about 84%, and in 1994, 68%. One of the persisting challenges facing Nigeria today is how to reform its education sector and train enough high quality manpower to develop the nation (Dike, 2009). The attempt to improve literacy skills in Nigeria has come a long way over the years. Adepoju and Fabiyi (2007) propose that although many attempts have been made to revamp the education sector in the past four decades, there have been little appreciable results. As with many third world nations, the prevalence of illiteracy in Nigeria is the effect of several isolated and interlinked factors such as the geographical distribution, government involvement, the economy, funding and the value placed on education (Wang, 1995). Although there has been a gradual growth in literacy rates in Nigeria over the years, increasing literacy rates still remains an area in need of address.
There are many disadvantages associated with poor literacy skills especially in early childhood. Fasokun and Pwol (2009) are of the view that one of the major causes of adult illiteracy in Nigeria, are the problems experienced in primary education. Primary education is the bedrock of future educational achievement. A lack of it could lead to poor literacy skills in adulthood and in effect impede further educational progress, cause unemployment and social exclusion. Fasokun and Pwol (2009) outline problems experienced in primary schools as; low enrolment rates, high dropout rates, inadequate facilities, poor teaching/learning materials and irrelevant curriculum. In addition to the factors listed above as causes of poor literacy rates in Nigeria it can be argued that the lack of early identification and provision of learning support needs of individuals with invisible/hidden learning difficulties/disabilities such as dyslexia could impact negatively on literacy rates in Nigeria. There are therefore strong grounds to suggest that Nigerian primary school children who have difficulties coping with traditional methods of teaching and learning due to the existence of a learning difficulty/disability may either drop out of school at the onset or fail to progress onto secondary education due to difficulties experienced in coping with classroom learning.

1.2.3 Disability awareness and the inclusion dilemma in Nigeria

Disabilities 1994, The Salamanca Statement and Framework for Action 1994) equal educational opportunities are not available for all and the development of special education has lagged behind in many countries.

As a matter of right, the African child needs to be guided correctly and adequately educated in order to meet the demand of the changing world, (Kolawole et al, 2004). However, in Nigeria today many individuals with disabilities are not being educated in schools partly due to the very low level of importance attached to educating the less able and the lack of understanding and awareness of differences in the human potential and learning. Unfortunately, in many cases, the Nigerian situation is such that traditionally, children with disabilities have been kept at home and many have been denied access to formal education on the misconceptions that they are not educable (Ahmed, 2002).

Disability and impairment is a human characteristic that knows no bounds in terms of time-space, geographical location, social or economic status and age band (Kisanji 1998). The term disability is very broad and although it may have similar definitions, different interpretations are given to it. The currently available statistics on the prevalence of impairments and disabilities in different parts of the world is a product of guesswork because perceptions of impairments and disability are culture-bound, and culture-sensitive assessment instruments are yet to be developed (Kisanji 1998). Interpreting what is considered a disability may depend on different societies, cultures and the value being placed on the disability. The problem however, it appears, lies in determining what is socially accepted in a society as a learning difficulty/disability. If determining what is considered a
disability or learning difficulty is dependent on the cultural values of the society involved, a problem is bound to emerge if no value at all is placed on a particular learning difficulty/disability or if it is not recognised by the society as a disability. A society’s understanding of the term learning difficulties/disabilities reflects the status assigned to it. In other words, if status is not assigned to a learning difficulty/disability in a particular context it ultimately lacks credence in that context. Wilson (2002), proposes that the value we give to X or Y or Z determines what we shall count as a ‘learning difficulty’ or a ‘disability’ or a ‘talent’ or a ‘gift’, in which case whether someone has a special need is not a matter of empirical fact: it calls for a judgement of value. Until a learning difficulty/disability is defined and given status at national policy level there may not exist any justification to make inclusive provisions as it begs the questions; how do we include what we do not know? How do we include what has not been identified?

In any dynamic society, all areas of human activity seem to undergo some form of change (Obiakor, 1998). Nigeria, a country of extreme cultural, social, economic and political diversity (Abang, 1992; Cobern and Junaid, 1986; Obiakor and Maltby, 1989; Ogunlade, 1989; Okafor, 1993; Urwick, 1983), is no exception to this rule. There is a dire need for change in the way inclusion is addressed in primary schools especially where it concerns the identification and support of primary school pupils with dyslexia in Nigeria with emphasis on including them effectively in the educational system. Inclusion is one of the most talked about practices in education in many parts of the world. Inclusion can be regarded as a set of never ending processes which involves the specification and the direction of
change; it is relevant to any school however inclusive or exclusive its current cultures, policies and practices and therefore requires schools to engage in critical examination of what can be done to increase the learning and participation of the diversity of students within the school and its locality (Booth et al 2000). Structured reflection can provide a framework within which professionals can examine their strengths and weaknesses and identify strategies for improvement (Huddleston and Unwin 2002) which is necessary for the ever changing drift of inclusion.

Inclusive schooling requires new knowledge and analytical tools to consider the articulation of identity and the difference in new forms of schooling (ISEC 2000). Traditionally, if children have particular difficulties in school they are put together with other children whose needs are similar (Frederickson and Cline 2002). This allows special facilities and specially trained staff to be made available to children who need them. However, Buell et al (1999) are of the view that successful inclusion requires that personnel from general and special education collaborate as team members. This is currently the practice in many western parts of the world where children with developmental disabilities are being educated in inclusive classrooms at increasing rates (Kassari et al 1999).

Special needs education and access to education for students with learning disabilities/difficulties appears to have many similarities as well as differences in different parts of the world in terms of implementation and bureaucracy. The difference in the way special needs education and inclusion is addressed is sometimes embedded in the views and categorisation of needs by society. Jaeger
and Smith (2002), are of the view that the underlining assumptions, educational strategies and authorisation of legislation governing special education differ across nations and are inextricably linked to local context, societal values and beliefs about pedagogy and disability. The readiness for acceptance of inclusion varies across countries and continents of the world. While countries within the advanced economies have gone beyond categorical provisions to full inclusion, Nigeria and most countries in Africa, are still grappling with the problem of making provision for children with special needs especially those with physical disabilities, even on a mainstream basis (Garuba 2003). The combination of inadequate plans for the identification of disabled children, a lack of guidance services for parents and the lack of special education facilities available for their children in Nigeria decreases the chance of children with special needs being able to attain even the most basic level of primary education. (A Wa Po 2008).

Despite the Nigerian government intervention in educating disabled children in mainstream schools which came into effect in 1974 when the Nigerian government fully took on the responsibility of educating children with disabilities in public schools; Nigeria, like many other West African countries, is yet to fully initiate inclusion in theory and in practice (Ajoku, 2006). Prior to this intervention, educating the disabled was not considered an important investment and children with disabilities were educated in special schools (Nigerian Embassy-Education 2000). This intervention of the government appeared to be the beginning of inclusive education in Nigeria. However, despite the Nigerian government having early visions of inclusion, inclusion in Nigerian schools has had a very slow start and is presently not widely practised. This is partly due to
the lack of attention by the government in recognising the importance of special needs education and also due to the lack of collaboration between qualified special needs teachers and mainstream teachers.

1.3 Rationale for study

Research has an important contribution to make towards achieving full human rights and social justice for people with disabilities (CSPD, 1996; UN, 1993). There is no documented research in the area of inclusion of children with dyslexia in primary schools in Owerri West. Therefore there is a need to identify the problems associated with the lack of dyslexia awareness in primary schools in Owerri West. This study highlights the negative impact the lack of dyslexia awareness has on the education of primary school children with unidentified dyslexia. This investigation also creates opportunities to carry out extensive research in this area and also make relevant contributions to already existing practices. This research is intended to act as a foundation on which other researchers interested in the area of dyslexia awareness can build on. The findings of this study provide a pivotal point for further research in this area. Expanding on the ideas generated from this research could bring about further contributions to special needs education practices in Nigeria.

1.4 Contribution to new knowledge

Pupils with various specific learning difficulties enrol in primary schools on a yearly basis. One of the foremost provisions that should be accounted for is equal
access and equal opportunities to education for these pupils and how well they are included in the system. This study is important because it addresses shortfalls of inclusive learning provision for dyslexic learners in primary schools in Owerri West, Imo State, Nigeria and in doing so it highlights reasons for these shortfalls as well as suggests strategies to propagate dyslexia awareness and improve inclusive learning. More so, this study is important because it addresses dyslexia awareness in a region in Nigeria that has never been investigated before.

Implementation of equal opportunities and equal access needs to be a continuous practice. Due to the limited awareness of SpLD there is very little evidence that inclusion is addressed effectively in the primary schools investigated, especially where it concerns unidentified dyslexic pupils in particular. It is therefore hoped that original primary source data derived from the study will help inform ways of raising awareness which will ultimately lead on to effectively catering for learners with SpLD/dyslexia not only in Owerri West, Imo State but also in other states in Nigeria. In addition to highlighting the responsibilities of educational providers in matters concerning specific learning difficulties, as a way forward, this research intends to suggest various practices as a means of involving stakeholders, policy makers and educators in creating dyslexia friendly primary schools and in so doing create a framework for engagement.

The outcome of the research is also intended to suggest strategies for the implementation and development of specialist dyslexia teacher training programmes for primary school teachers. In addition to this, it is hoped that the outcome of this research will help inform learners, parents and the community as
a whole of ways they can get involved in creating a more inclusive and dyslexia friendly society.

1.5 Scope and limitations of research

This regional research was carried out in Owerri the capital of Imo state, one of the 36 states in Nigeria. Imo State is located in the southeast region of Nigeria and has a population of 4.8 million (About Imo State, 2009). Imo State is divided into 27 local government areas (LGA) otherwise known as constituencies.

Table 1

<table>
<thead>
<tr>
<th>Local Government Areas in Imo State</th>
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<tbody>
<tr>
<td>Aboh Mbaise</td>
</tr>
<tr>
<td>Isiala Mbano</td>
</tr>
<tr>
<td>Ohaji Egbema</td>
</tr>
<tr>
<td>Ahiazu Mbaise</td>
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<tr>
<td>Mbaityoli</td>
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<tr>
<td>Orlu</td>
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<tr>
<td>Ehime Mbano</td>
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<tr>
<td>Ngor Okpala</td>
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<tr>
<td>Orsu</td>
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<tr>
<td>Ezi na Ihite</td>
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<tr>
<td>Njaba</td>
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<tr>
<td>Oru East</td>
</tr>
<tr>
<td>Ideato North</td>
</tr>
<tr>
<td>Nkwerre</td>
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<tr>
<td>Oru West</td>
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<tr>
<td>Ideato South</td>
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<tr>
<td>Nwangele</td>
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<tr>
<td>Owerri Municipal</td>
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<tr>
<td>Ihite Uboma</td>
</tr>
<tr>
<td>Obowo</td>
</tr>
<tr>
<td>Owerri North</td>
</tr>
<tr>
<td>Ikeduru</td>
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<tr>
<td>Oguta</td>
</tr>
<tr>
<td>Owerri West</td>
</tr>
<tr>
<td>Isu</td>
</tr>
<tr>
<td>Okigwe</td>
</tr>
<tr>
<td>Onuimo</td>
</tr>
</tbody>
</table>
Imo State has 3 senatorial zones namely: Owerri (the state capital), Okigwe and Orlu. Owerri Zone where this research was based is divided into 9 constituencies.

Table 2

<table>
<thead>
<tr>
<th>Constituencies in Owerri Zone</th>
<th>Ezinihatte Mbaise</th>
<th>Mbaitolu</th>
</tr>
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<tbody>
<tr>
<td>Owerri West</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owerri North</td>
<td>Ikeduru</td>
<td>Aboh Mbaise</td>
</tr>
<tr>
<td>Owerri Municipal</td>
<td>Ahiazu Mbaise</td>
<td>Ngor-Okpala</td>
</tr>
</tbody>
</table>

Each of these constituencies is further divided into wards. Owerri West, the particular area of interest of this study is divided into 3 wards: Avu, Umuwaoha and Ochie ward.

As Imo State was too large a sample size to carry out this particular investigation, this research limited itself to Owerri. The investigation however focused on Owerri West which has 66 primary schools in general. As all 66 schools could not be investigated given the time constraints, a proportionate figure of government owned and private primary schools were investigated. The research limited itself to, 7 out of 20 private/missionary primary schools and 15 out of 46 government owned schools, making a total of 22 primary schools investigated which represented 33% of the total number of primary schools in Owerri West. The selected schools are representative of the all the schools in Owerri West. There are
no disparities in terms of wealth distribution, geographic location or gender of pupils.

Table 3

<table>
<thead>
<tr>
<th>Government/ Private/Missionary Schools</th>
<th>No. of Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government owned primary schools in Imo State</td>
<td>1,243</td>
</tr>
<tr>
<td>Private primary schools in Imo State</td>
<td>310</td>
</tr>
<tr>
<td>Government primary schools in Owerri</td>
<td>95</td>
</tr>
<tr>
<td>This figure is made up the government owned primary schools found in the constituencies listed below:</td>
<td></td>
</tr>
<tr>
<td>Owerri Municipal</td>
<td>25</td>
</tr>
<tr>
<td>Owerri North</td>
<td>24</td>
</tr>
<tr>
<td>Owerri West</td>
<td>46</td>
</tr>
<tr>
<td>Private and missionary schools in Owerri West</td>
<td>20</td>
</tr>
</tbody>
</table>

Source: Ministry of Education Owerri, Official Records, 2010

1.6 Research hypotheses

This research makes the following assumptions:

1. It is debatable whether investigative research has been carried out in the area of SpLD in Nigeria. There is no evidence of this on research databases. If such investigations have been conducted there is no substantial evidence to suggest so neither is there evidence that such investigations have attracted government attention and recognition. The assumption therefore is that SpLD is a grey area in Nigeria hence a
possible reason for the lack of government involvement featuring in policy. This could also be a reason for the lack of awareness of dyslexia as a learning difficulty in Owerri West.

2. Dyslexia awareness is a grey area in Nigeria and as such policy relating to dyslexia support in school does not exist. Also ideologies for acceptance, policy making and funding in the realm of special needs education are inevitably determined by general conceptions and understanding of special needs in Nigeria as a whole.

3. Government departments dealing with disability in Imo State Nigeria seem to lack dedication in terms of exploring new avenues to include children with specific learning difficulties.

4. There is a lack of adequately equipped manpower to support children with dyslexia in primary schools in Owerri West due to non-existent specialist dyslexia training.

1.7 Research questions

The research questions that led the investigation are:

1. What are the forces that drive inclusion in the educational system and how has this impacted on dyslexia awareness and curriculum planning in primary schools in Owerri West, Imo State, Nigeria?
2. To what extent are the conceptions and perceptions of learning
difficulties/disabilities as a whole responsible for the lack of dyslexia
awareness in Nigeria and how has this impacted on dyslexia awareness in
primary schools in Owerri West Imo State Nigeria?

1.8 Research aims

The aims of the research were to:

1. explore possible reasons why very little research has been carried out in
   the area of dyslexia in Owerri West
2. examine reasons for lack of government attention and recognition of
   hidden disabilities and explore how this has impacted on policy making in
   the area of specific learning difficulties
3. investigate how ideologies for acceptance, policy making and funding in
   the realm of special needs education are inevitably determined by general
   conceptions and the understanding of special needs in Owerri West, Imo
   State and Nigeria in general
4. scrutinise reasons why government departments dealing with disability in
   Imo State Nigeria seem to lack dedication in terms of exploring new
   avenues to include children with specific learning difficulties
5. investigate how the lack of specialist training in the area of dyslexia
   awareness impacts on classroom teaching in primary schools in Owerri
   West, Imo State
1.9 Conclusion

The issues highlighted in this chapter will be explored in detail in subsequent chapters. Each chapter plays a role in unravelling and demystifying the reasons for the lack of dyslexia awareness in selected primary schools in Owerri West. Chapter two sets the scene in more detail with the review of literature and creates a broader understanding of concepts of disability in the Nigerian culture. The chapter also discusses the theoretical framework and ideologies of the research. Chapter three discusses in detail the research methodology. Chapter four, five and six address the data collection process and discuss the findings of the research. Finally, chapter seven is a summary of the study with suggested recommendations based on the findings of the research.
CHAPTER 2

The past cannot always be discarded as its shadow is often cast on the present. A critical review of past practices helps inform the present and shape the future.
2. Review of Literature

2.1 Introduction

It appears many educational systems in West Africa in general and Nigeria in particular are found wanting in the advocacy of learning difficulty (LD) support provision in schools. This is quite contrary to what is practiced in many parts of the western world today where dyslexia is one of the most talked about specific learning difficulties. Obiozor et al (2010) are of the view that African societies have much to learn from the exemplary programs and projects on disabilities, adult literacy and special education provisions in developed societies and they give the United States as an exemplary country where effective legislation, curriculum and support services are provided at all levels for individuals with disabilities.

The phenomenon of learning disabilities, which in the past was called the invisible handicap, was first noted by Dr. Kurt Goldstein in the late 1920s. Today in many western societies, research on learning disabilities such as dyslexia has contributed immensely towards change and innovation in the school curriculum with regards to inclusive practices and learning support provision. It is interesting to note however that several years ago many western countries did not acknowledge dyslexia as a learning difficulty. The view the western society has on dyslexia, the way it is understood and addressed today is quite different from the way it was addressed many years ago. Miles and Miles (1999) note that the reaction to dyslexia in the 1970s in Britain was largely hostile. Educationalists in
this era were reluctant to accept the construct of dyslexia and applied instead a deficit model, relating dyslexia to poor intellectual capacity, low levels of motivation or a poor home environment (Riddick 2002). Today however, it is understood that difficulties in learning caused by dyslexia occur despite normal school experience, socio-economic opportunity, emotional stability and adequate intelligence.

It will almost be impossible to address reasons for the lack of dyslexia status in Nigeria in general, Owerri West in particular without first addressing disability status in Nigeria. This is because presently the perceptions of dyslexia in Nigeria, or the lack of it, are representations of attitudes towards disability as a whole. This chapter delves into perceptions of disability and practices that have defined disability status in Nigeria over the years. It also attempts to draw on how these perceptions and conceptions of society have influenced policy making and implementation and the effects this has on approaches to inclusive education in primary schools in Owerri West.

In many parts of the world, Nigeria no exception, there are various legislative provisions and policies governing disability rights which have come into force with the intent of presenting more favourable rights for the disabled in society. This chapter sheds light on various Acts, frameworks, movements and international conventions that have in some way influenced Nigeria’s disability policy and the way special needs education is addressed in Nigeria. Discussions on this issue begin with a critical examination of the history of special needs
education in Nigeria with the intent of creating a clearer understanding of the possible reasons for the lack of dyslexia awareness in Nigeria.

2.2 The history of education in Nigeria

Three main educational traditions, the indigenous, Islamic and the western education, are known to have flourished at various times in Nigeria with each type of education serving its purpose for the indigenes (Mkpa 2009). Historically the educational system in Nigeria has been influenced by the colonial rule (Obiakor 1998), the impact of independence, the military rule in Nigeria and the present civilian rule. Prior to the introduction of western education and the coming of the colonial ‘masters’ in Nigeria, traditional education prevailed (Castle, 1975; Damachi, 1972; Fafunwa, 1975, 1976). Before western education came into being, Esogbue (2008) identifies two distinct educational systems in Nigeria: the indigenous system (traditional education) which entailed becoming apprenticed in craft and services in leather works, painting, medicine etc which passed down in families, and the Quranic system of education.

According to Fafunwa (1975), the cardinal goals of traditional education were to: develop the latent physical skills; inculcate respect for elders and those in a position of authority; develop intellectual skills; develop character; acquire specific vocational training and develop a healthy attitude towards honest labour; and understand, appreciate and promote the cultural heritage of the community at large. The Quranic system, on the other hand, entailed a child learning chapters of the Quran usually by rote and saying regular prayers as required.
The western form of education began in Nigeria with the arrival of the Wesleyan Christian Missionaries at Badagry in 1842 and has obviously been the most successful in meeting the overall formal educational needs of the consumers for the present and the future (Mkpa 2009). Education at this time was regarded as of fundamental importance to the spread of Christianity. Education was considered an important aspect with the aim of civilising the indigenes. It was also a way of winning converts, training Nigerian workers and catechists. It is believed that the aim of the system of education was to produce Nigerians who could read and write (Esogbue 2008). Western education at the time impacted on the culture of the society by eliminating prevailing ignorance that persisted at the time as a result of superstitious beliefs among the people. Ideas, beliefs and customs shared by people were demystified, shaken and faulted by the missionaries reasoning and scientific facts.

2.3 The history of special needs education in Nigeria

The advent of western education brought with it special needs education. The history of special needs education and formal education in Nigeria is traceable to the efforts of European Missionaries around 1842. It is however recorded that the first school for handicapped children (excluding the gifted) was established by the missionaries in Nigeria as early as 1932 (NigerianEmbassy-Chile.org 2000). The history of special needs education reflects the chronological development of caregiving activities of philanthropic institutions and individuals to slowly involve more organised governmental effort with increasing legal mandates (Poon-McBrayer and Lian 2002). Kisanji (1995) proposes that the history of special
education is in fact a story of changing attitudes towards people with disabilities; from private tuition, institutions and special schools to integration and now gradually to inclusive education. Two eras have been identified in the development of provision for persons with special needs in Nigeria (Garuba 2001). Garuba (2003) proposes that the first was the humanitarian/missionary era (1945-1970) during which the provision of services was dominated by private voluntary organisations and private individuals. During this era, religious bodies (mostly Christian) were the driving force behind the establishing and maintenance of services and programmes for children and adults with disabilities. During this era the attitude of the government was lackadaisical, in matters concerning disability issues.

Garuba (2003) identifies the second era as the social service era which saw the development of service. Nigeria at this time witnessed a significant contribution from the government, in terms of commitment as well as input. In 1974 the Nigerian government became actively involved in special needs education. Before then the education of children with disabilities was not considered an important investment (NigerianEmbassy-Chile.org 2000). Before government intervention in the education of children with special needs in Nigeria, religious charities and charitable individuals in society took on the responsibility of providing for the disabled in society. As a way forward, in Nigeria today, each state of the Federation is now responsible for providing integration facilities for people with disabilities in compliance with the Federal Government Policy (NigerianEmbassy-Chile.org 2000). However, Mkpa (2009) is of the opinion that even in these days of western-type education, and at this dawn of the new millennium, our
educational system is still beset with numerous problems in spite of the progress made so far. Although the coming of the missionaries to Nigeria helped minimise negative cultural beliefs and stereotypical stigmas attached to disability and educating the disabled in society, many of such stereotypes have persisted and are presently still transparent in the educational opportunities given to disabled children in Nigeria. As an issue arising from the stigmatisation of people with disabilities SENCO (2007) states that:

...the social and emotional environment that surrounds the disability issue is complex and many disabled pupils, their parents and sometimes their teachers either refuse to recognise that particular pupils are disabled or perhaps, more likely, fear the consequences of accepting membership of a group which is almost universally discriminated against on a daily basis.

A person with disability is still presented as a tragedy or an impaired body (Zammit 2009). Negative public attitudes towards disability are identified as the biggest obstacle to disabled people’s meaningful inclusion into mainstream community life (Barnes 1997). The findings of this study suggest that stereotypical perceptions of the disabled in the society investigated are still prevalent. The findings further suggest that the lack of disability awareness has in a sense brought about such stereotypical beliefs which are deeply seated in the socially constructed notions of disability which in effect stimulate such beliefs.

Rights and recognition go hand in hand. The lack of recognition of dyslexia as a disability means that in the inclusion arena there is no platform to address the rights of pupils who have dyslexia. In the same vein, recognition, awareness and provision go hand in hand. This study identifies that there is limited awareness of
disabilities where the focus is mainly on physical disabilities and not the more subtle specific learning difficulties. SENCO (2007) stresses that:

...disability awareness does exist but it is distorted and based on a view of disability that focuses primarily on vision, hearing or mobility. If this continues schools will find themselves consulting with just a small number of pupils with very visible impairments which would confirm the very narrow view of disability that the new legislation is designed to challenge.

Limited awareness of invisible disabilities like dyslexia coupled with what appears to be limited recognition of disability as a human rights issue has impeded inclusive practices in the primary schools investigated for this study. Subsequent chapters that address data presentation and analysis explore this aspect in greater detail.

Policy definitions are often enshrined in cultural beliefs and perceptions. Therefore the nature of government policy cannot be overlooked in matters relating to disability awareness and inclusion in society because policy definitions play a role in the social construction and societal understanding of disability. Because several prevailing cultural views about disability are themselves disabling (Zammit 2009) and are socially constructed, there is a need for the development of social policies to remedy the disadvantages the disabled in society face. This calls for a social model of disability approach to address disability issues in general and dyslexia awareness in particular as the social model lends itself more to the rights of the disabled in society where the medical model falls short because it does not allow for a robust view on disability rights in relation to inclusion.
2.4 An overview of historical attitudes towards disability

The history of negative attitudes towards the disabled is not only specific to Nigeria, or indeed Africa, as many nations the world over at some point have passed through eras of ignorance of disability issues. Ingstad (1990) proposes that there is evidence that all cultures - western and non-western - exhibit reactions to disability and disabled people which form a continuum. Documented historical events evidence the fact that various societies passed through the process of adapting and adjusting beliefs and perceptions of disability and the rights of the disabled in society before they arrived at current improved policies propagating disability rights. It is interesting to note how attitudes and beliefs about disability in different parts of the world have changed over time and how these changes in attitude have brought about legislation protecting the rights of the disabled in society. In many social contexts perceptions of disability are driven by cultural beliefs and practices which have morphed over time to present existing disability rights in society. (Kisanji 1995) postulates that the use of the concept of culture places disability in its proper context, especially in relation to attitudes and attitude change in the community.

History is replete with examples of disabled people worldwide being ridiculed, killed, and abandoned to die or condemned to permanent exclusion in asylums (Pritchard, 1963). Years ago disabled people were perceived as incapable of making their own decisions and of taking control of their lives; they were seen as people who always needed to be helped or as objects of pity and charity (Coleridge, 1993). History reveals that not only in Africa but in many parts of the
world people with disabilities are regarded as incapable and incompetent to carry out decisions. In Europe for instance, many years ago people with disabilities were considered to pose a social threat, to contaminate an otherwise pure human species and were sometimes killed and used as objects of entertainment (Kisanji 1999). During this period the needs of people with disabilities were catered for by hospitals, religious communities and philanthropic individuals in society.

During the medieval times and the Renaissance superstitious beliefs about epilepsy were prevalent at the time; people who suffered from epilepsy were considered possessed (Diamantis 2009). Similarly, some African societies believed (and many still believe) disability in the family to be retribution from God or caused by witchcraft. Disability in this instance is socially constructed and socially addressed as illustrated in research carried out by Hop (1996) on Botswana attitudes towards children with disabilities summarised in the diagram overleaf. Such cultural beliefs are counterproductive to promoting the wellbeing of people with disabilities (Anderson 2004). Even in present times the socially constructed perception of disability presents the challenge of elevating the stigma attached to being disabled. The tendency to locate the problem with the individual results in the failure to acknowledge the effect of cultural beliefs (Anderson 2004).
The history of special education can be traced as far back as Plato's recommendation that children with extraordinary intellectual ability should be provided special leadership training. Special education has had a long and sometimes turbulent history (Richards 2009). The development of special needs education has been highly associated with laws and worldwide agreements since the 1950s. Human rights movements have aided significantly in the development of providing special education services to children with disabilities worldwide in the 20th century (Poon-McBrayer and Lian 2002). Special education has historically stemmed from religious charities and societal responsibility for the poor, to the normalisation movement, and finally the ideology of inclusive education (Coleridge 1993; Ihatsu 1995). The concept of normalisation brought the movement of deinstitutionalisation (Wolfensberger 1972), which later
nurtured the concepts and movements of the least restrictive environment and inclusion for children with disabilities (Poon-McBrayer and Lian 2002).

The philosophies on education relevant to issues relating to inclusion in different parts of the world which have served to inform this research are viewed through the lenses of the different models of disability discussed in the subsections that follow.

2.5.1 The moral model of disability

The moral model of disability is historically the oldest and is less prevalent today. It has been associated with shame on the entire family with a member with a disability in some less extreme cases being ostracised from society (Kaplan 2000). The moral model asserts that disability is a defect of character, or the soul. There are many cultures that associate disability with sin and shame, and feelings of guilt, even if such feelings are not overtly based in religious doctrine (Kaplan 2000). It is still believed among some societies that people with disabilities should be not be treated favourably because they sinned in another lifetime and their bad karma has caused them to suffer in their present lifetime. In cultures where the moral model prevails, some people with disabilities are hidden by their families, denied education and excluded from any social role in the community. This model presents a very extreme approach to addressing disability.
2.5.2 The inclusive model of disability

While several prevailing values about disability are themselves disenabling (Zammit 2009), negative public attitudes are one of the biggest obstacles to meaningful inclusion into mainstream community life (Barnes 1997) and education. The inclusion model of special education argues that every child has the right to education irrespective of their disability/learning difficulty. Inclusive practice entails that children learn together in schools irrespective of their neuro-diversities. The Salamanca Statement and Framework for Action (1994) states that

The fundamental principle of the inclusive school is that all children should learn together, wherever possible, regardless of any difficulties or differences they may have. Inclusive schools must recognize and respond to the diverse needs of their students, accommodating both different styles and rates of learning and ensuring quality education to all through appropriate curricula, organizational arrangements, teaching strategies, resource use and partnerships with their communities. There should be a continuum of support and services to match the continuum of special needs encountered in every school.

A publication by the Open University (2005) proposes that

Inclusive education goes beyond integration – a term which, until the late 1990s, was generally used to describe the process of repositioning a child or groups of children in mainstream schools. Today inclusive education implies a radical shift in attitudes and a willingness on the part of schools to transform practices in pupil grouping, assessment and curriculum. The notion of inclusion does not set boundaries around particular kinds of disability or learning difficulty, but instead focuses on the ability of the school itself to accommodate a diversity of needs.

McAnaney, (2007) proposes that if we treat people differently and educate them in a parallel system, they will develop differently and never fully integrate into the mainstream of society and society will always view them as different and
stigmatised. The shift from ‘integration’ to ‘inclusion’ is not simply a shift in terminology, made in the interests of political correctness, but rather a fundamental change in perspective. It implies a shift away from a ‘deficit’ model, where the assumption is that difficulties have their source within the child, to a ‘social’ model, where barriers to learning exist in the structures of schools themselves and, more broadly, in the attitudes and structures of society. Our knowledge and understanding of academic success and failure, and ability and disability can be considered as cultural constructions (Carrier 1990). This is because the dominant group in a society define the features of the culture that differentiate ‘those who can’ and ‘those who can’t’ where cultural understandings of difference are reflected not only in the beliefs and attitudes of people, but also in the reactions and behaviour of individuals (Gliedman et al. 1980). The inclusive model brings to focus the roles attitudes, systems and services (or the lack of them) play in creating disability (McAnaney, 2007).

Learners with disabilities and chronic medical conditions often require support to cope with the academic demands of their courses. On close observation one will notice that these educational needs are related to the learning environment rather than the disability itself. Oliver (1996) notes that it is not individual limitations, of whatever kind, which are the cause of the problem, but rather society’s failure to provide appropriate services and adequately ensure the needs of disabled people are fully taken into account in its social organisation. Some critics have seen the focus on students with disabilities and difficulties in learning as distracting from the real issue, that is, the processes of inclusion and exclusion that leave many
students, not simply those with disabilities, unable to participate in mainstream culture and communities (Booth, 1996).

The democratic classroom is one that seeks to embrace all stakeholders in the dialogue to create a new curriculum (Fisher 2007). However, attitudes about inclusion are extremely complex and vary from teacher to teacher and school to school (Fakolade, et al. 2009). Failure to accommodate the environmental and accessibility needs of persons with disabilities in the society will inevitably inhibit their participation in educational, social, recreational and economic activities (Harkness and Groom, 1976; Steinfeld et al.1977). Ajuwon (2008) argues

It is not sufficient for government officials to merely endorse international protocols of special needs education that have not been adequately researched or tested in developing countries. Ideas and strategies about the best way to educate children, especially those with disabilities in developing countries, are generally influenced by external rather than internal circumstances. This is largely due to the historical ties between the developed and developing countries, the open door policy that characterises the educational system of developing countries, and the impact international development agencies continue to exert on recipients of funds and services.

It is this type of relationship that has shaped Nigeria’s policy on education over the years, and is clearly reflected in the newly-revised National Policy on Education with its focus on inclusive education of children and youth with special needs in ordinary schools (National Policy on Education, 2008). The National Policy on Education document, among other things, calls for access of special needs children, with their varying abilities, to education in conducive and less restrictive environments, as well as the education of such children to enable them to achieve self-fulfilment.
2.5.3 The social/environmental model of disability

Finkelstein and Stuart (1996) define the social model of disability as a model that ‘incorporates a holistic interpretation of the situation facing disabled people. The social/environmental model is concerned with how disability is experienced as a function of the interaction between a person and psychological and social environments. The ideology of the social model of disability addresses the concept of disability as a social phenomenon since it allows people to be perceived as a group (Harris 1995), and advocates full citizenship and participation and integration into society. This model recognises that some individuals have physical or psychological differences which can affect their ability to function in society. Even though disability has always been part of the human condition the response of society may vary among countries (Bartha 2005). This model holds that it is a society’s responsibility to provide for all, irrespective of their capabilities, abilities or disabilities by removing environmental, economical and cultural barriers to participation. In other words, the model suggests it is society that causes the individual with these physical, psychological or learning differences to be disabled because individuals with impairments are not disabled by their impairments but by the barriers that exist in a society that does not take into account their needs. The disadvantage experienced by people with impairments emphasises the social, economic and environmental barriers to participation in society (Burchardt 2004). The lack of opportunity to participate in social activities due to physical or social barriers has its roots in the struggle of disabled people for the realisation of their civil rights. The disablement resulting in deprivation and sometimes exclusion is a result of society reactions to people
with impairments and disabilities. Finkelstein and Stuart (1996) suggest that people with physical and mental impairments can have satisfying life-styles if the focus of attention is shifted towards the removal of disabling barriers rather than concentrating only on the rehabilitation of disabled individuals. McAnaney (2007) argues that in many societies disability is no longer understood as a feature of the individual, but rather as the outcome of an interaction of the person with a health condition or an impairment and the environmental factors.

Models of disability and SEN have been subject to extensive discussion and debate as their proponents have attempted to provide a framework for understanding the way in which people experience disability (Low, 2006; Mitra, 2006). The social model of disability makes distinctions between impairment – lacking part or all of a limb or having a deflec-tive limb, organ or mechanism of the body (including psychological mechanisms) and disability – the restrictions caused by the organisation of society which does not take into account individuals with physical or psychological impairments (UPAIS, 1976). This distinction is embedded in social constructionism - a philosophical foundation of the social model, which states that these terms differ in that impairment exists in the real physical world and disability is a social construct that exists in a realm beyond language within a complex organisation of shared meanings, discourses and limitations imposed by the environment at a particular time and place (Brain HE 2006).

The social and medical models of disability are not only different in the ideologies that they promote, they also differ in their conception. The social model has been
constructed to oppose an oppression felt by the disabled in society while the medical model has developed over a very long period of time and is therefore interlocked with several other discourses. The medical model of disability appears to suggest that disabilities are seen as a negative phenomenon in society. The emphasis on this model is to facilitate change in the disabled person in order for them to be assimilated into normal society. Linton, (1998) proposes that:

...the medicalization of disability casts human variation as deviance from the norm, as pathological condition, as deficit, and, significantly, as an individual burden personal tragedy. Society, in agreeing to assign medical meaning to disability, colludes to keep the issue within the purview of the medical establishment.

The social model however, defined by The Union of the Physically Impaired Against Segregation (UPIAS) (1976) set a distinction between the term impairment and disability. The term disability connotes:

...the disadvantage or restriction of activity caused by a contemporary social organisation which takes no or little account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities. (UPIAS, 1976, cited in Swain et al 2003).

In the social model the definition of impairment is what the medical model traditionally terms as disability, which is the actual bodily difference that marks the person out as a deviant from the norm. The social model of disability has become the engine of the disability movement, providing the platform on which disabled people have increasingly voiced their demands for civil rights (Lawson, 2001). For the purpose of this study the social models of disability and dyslexia will be at the forefront of the debate in support of the need for a more
comprehensive awareness of a range of disabilities, both physical and hidden, as the lack of it evidently affects inclusive practices in schools.

2.5.4 The medical model of disability

The medical model of disability focuses on difference rather than normality, on illness rather than well being, and particularly on the ‘problem’ with individuals with disabilities. The medical model of disability regards disability as a defect or sickness which must be cured through medical intervention (Kaplan 2000), as opposed to the social model which sees disability as a difference rather than a problem. Reiser (2001) in comparing the social model and the medical model of disability give an apt description of the differences in approach to viewing disability (see Appendix B). The medical model of disability views all disability as a result of some physiological impairment due to damage or to a disease process (Llewellyn and Hogan 2000). However, from a social model of disability standpoint, individuals are disabled by disenabling environments in society. The medical model is the most widespread and is based on the diagnosis and treatment of children with disabilities/learning difficulties. This model focuses on difference rather than what would be considered usual and normal. It lays emphasis on illness rather than health. Basically, the model focuses particularly on the ‘problem’ with the child. The model is based on the premise that the diagnostic category to which a person has been designated can be used as the key to the type and level of education required (Triano, 2000).
In the classic medical model of disability, people with disability are assumed to be the problem and therefore need to change and adapt to society and the circumstances that they are presented as opposed to society making these changes. In other words they need to be rehabilitated as proposed by the rehabilitation model, an offshoot of the medical model which regards disability as a deficiency that must be fixed by a rehabilitation professional or other helping professional (Kaplan 2000). The medical model reflects the old World Health Organisation (WHO) definition of disability where disability is defined as any restriction or lack of ability to perform an activity in the manner or within the range considered normal for a person (WHO, 1980). This definition of disability provided poor guidance for policy-making and political action and was therefore revisited by WHO in 2001 when disability was defined as:

‘A contextual variable, dynamic over time and in relation to circumstances. One is more or less disabled based on the interaction between the person and the individual, institutional and social environments.’

This new definition is more adaptable to human rights or social models, and focuses on the interaction between a person with a disability and the environment. McAnaney (2007) is of the view that this approach is most often in evidence in systems where distinctions are made between different types of disabilities in funding and developing services.
2.5.5 The social model of dyslexia

Amesbury (2006) looks at two conflicting focuses on dyslexia, one as a diagnostic label which largely equates to a medical model of disability; and the second as a difference rather than a deficit which is more in tune with a social model of disability. Cooper (2006) however positions dyslexia quite strongly within the social model of disability rather than the deficit model by emphatically stating that:

‘We challenge the deficit models of dyslexia in favour of a social model that maintains that we are not ‘disabled’ by our dyslexia, but by the expectations of the world we live in. There is nothing ‘wrong’ with being dyslexic per se. We have learned to expect that definitions of dyslexia will focus on the precise nature of the difficulties dyslexics experience, rather than on the nature of the disabling expectations that lead to these difficulties. But the two cannot be meaningfully separated. For example, if we expected everyone to be able to think fluently in 3D as most dyslexics can, some other people would have difficulty with this. We might be tempted to describe this as a ‘disability’ and even look for ‘causes’. But without this expectation, there is no difficulty. So the difficulty can be recognised as a result of the mismatch between the person and the expectations, but turning this difficulty into a ‘disability’ depends on the social value given to the expectation (early reading, good memory etc).’

From the perspective of the social model of disability, many of the difficulties dyslexics experience could be overcome by making society and education more accessible. Hughes and Dawson (1995) argue that for dyslexic people this would suggest making changes in the compulsory educational system as this is where many of the difficulties begin. Cooper (2010) emphasises that individuals are not disabled by dyslexia, rather they are disabled by the expectations the educational system and other systems have for them.
Research suggests that the educational system shapes the experiences of those with dyslexia through the dominant social and political forces of the time (Hearne and Stone, 1995). The social model of disability draws attention to impairments which are transformed into difficulties by the negative attitudes of the society in which people with dyslexia live (Olive and Barnes 1998). Whereas the medical or clinical model of dyslexia has focused on the underlying cognitive impairments with phonological difficulties at the forefront (Snowling, 1998), the social and educational models of dyslexia lay emphasis on mediating effects of the environment where there is an identified deficiency in the environment which intensifies the difficulties experienced by individuals with dyslexia (Cooper 2006; Riddick 2001). As well as laying great emphasis on the social construction of disability, this study adopts a social model approach to understanding disability in the society investigated. Taking on this approach creates the opportunity for an alternative perception of disability to be viewed. It also brings in to the limelight the disablement caused by social constructions of disability while providing a framework for understanding and investigating further how the social model of disability could create a shift from socially constructed perceptions of disability prevalent in the society investigated to a reconstruction of disability awareness driven by the social model of disability.

2.6 The social construction theory

The social construction theory is relevant to this study as it creates an understanding of how individuals in society participate in the creation of their perceived reality. The theory sheds light on how social phenomena are created,
institutionalised and become traditions by society. The ideology of this theory posits that reality is a social construction of individuals. Meanings ascribed to this construction and its interpretation depend both on institutionalised types of communication and the social biography of an individual, an important feature of which is one’s cultural distance from the community (Schutz and Luckmann 1973). The social construction theory can be viewed through the interrelated lenses of the social constructivism and constructionism theories, both of which are sociological theories of knowledge which focus on phenomenon and interpretations of perceived reality in social contexts. Social constructivism emphasises the importance of culture and context in understanding what occurs in society and constructing knowledge based on this understanding (Derry, 1999; McMahon, 1997). It also focuses on individuals making meaning of knowledge within a social context. Social constructionism on the other hand lays emphasis on development of phenomena in social contexts.

Understanding social behaviour involves understanding how people interpret and construct a particular context. It could be argued therefore that in a given society, language and constructed meaning associated with the language aid in creating realities. Both language and meaning are important elements in determining social actions as they inform what will be considered important practices which in effect influence policy making, as in the case of disability issues. Policy and terminology go hand in hand because terminology is often constructed to suit policy or vice-versa, that is, policy and terminology are constructed to suit and meet societal needs and serve a purpose in society.
2.6.1 The relationship between socially constructed knowledge, reality and inter-subjectivity

From a social constructivist point of view, human activity brings about the construction of reality. This is because reality does not exist prior to social invention. In other words, it cannot be discovered. Rather, as Kukla (2000) proposes members of a society together invent the properties of the world. Individuals create meaning through their interactions with each other and with the environment they live in. Society plays an important role in the way individuals that live in it perceive themselves. These instilled values are socially constructed and can be traced back to concepts engrained in tradition, religion and ruling power.

Knowledge is a human product, and is socially and culturally constructed (Ernest, 1998; Gredler, 1997; Prawat and Floden, 1994). Knowledge is derived from interactions between people and their environments and resides within cultures (McMahon, 1997). Although there are notions that hold that individuals can take charge of what they choose to know through self determination and experience, from a social construct view this is challenged because the social construct ideology holds that our experiences only inform us about the world through a set of discourses which have a pre-existence in culture through language. Hence knowledge is seen as a process and not a stable structure. Berger and Luckman, (1966) hypothesise that knowledge objectifies this world through language and the cognitive apparatus based on language, that is, it orders it into objects to be
apprehended as reality. It is internalised again as objectively valid truth in the course of socialisation.

The construction of knowledge is also influenced by the inter-subjectivity formed by cultural and historical factors of the community (Gredler, 1997; Prawat and Floden, 1994). When the members of the community are aware of their inter-subjective meanings, it is easier for them to understand new information and activities that arise in the community. Rogoff (1990) defines inter-subjectivity as a shared understanding among individuals whose interaction is based on common interests and assumptions that form the ground for their communication. Communications and interactions entail socially agreed-upon ideas of the world and the social patterns and rules of language use (Ernest, 1999). Construction of social meanings, therefore, involves inter-subjectivity among individuals. Social meanings and knowledge are shaped and evolve through negotiation within the communicating groups (Gredler, 1997; Prawat and Floden, 1994). Any personal meanings shaped through these experiences are affected by the inter-subjectivity of the community to which the people belong. Inter-subjectivity not only provides the grounds for communication but also supports people to extend their understanding of new information and activities among the group members (Rogoff, 1990).

This study emphasises that the construction of knowledge of disability in the society investigated is formed by cultural and historical factors that are manifested in educational policy and inclusive practices in schools. Feelings of inclusion and exclusion or feelings of disability can be dependent on environmental, subjective
and inter-subjective factors which can be influenced through policy and practice interventions (Simmons et al). Perceptions of disability are not objectively determined but socially constructed to serve as dominant notions that shape educational reform. The following subsection discusses the role schools play in propagating social constructions of knowledge of disability.

2.6.2 The school as a socially constructed institution

Institutions are human inventions designed to fulfil specific social and cultural needs of groups of people (Berger and Luckman, 1966). Voelker (1935) postulates that although there is probably no institution that may be said to represent the collective will of all of human society, a great number of institutions have been set up to carry out the collective will of large organised groups of human beings. Institutions where learning takes place are an example of a medium for inculcating culture and societal values. Dudley-Marling (2004) proposes that schools are among the institutions that have been created to serve societal needs. Although individuals may previously have been exposed to early socialisation and schooling experiences by the family, according to Meyer and Rowan (1978), it is actually the societal needs that schools are designed to serve and not really the needs of the individual or family.

Social constructivists view learning as a social process by which individuals are introduced to a culture by more skilled members. In many societies schools are controlled by centralised political authorities, important elements in the environments of schools (Meyer and Rowan 1978). Learning does not take place
only within an individual, nor is it a passive development of behaviours that are shaped by external forces (McMahon, 1997). Schools could rather been seen as a deliberate construction designed to suit societal purpose. Dudley-Marling (2004) is of the view that as schools are human creations; there is nothing natural about the institution of schooling, nor the way that schools are organised. It is however difficult for an established institution to remain as a useful agency of the will of the group for a considerable length of time (Voelker, 1935). This is because societal needs and values are subject to change. Some of the changes that happen in schools are as a result of changing needs of society brought about by global trends such as technology for instance. Other changes are influenced by government policy while some changes are reflections of human rights movements and social inclusion where the rights of the disabled in society feature quite strongly in some societies. This type of change is where learning disabilities addressed in the school structure tend to feature.

Dudley-Marling (2004), proposes that one cannot be learning disabled on one’s own and that it takes a complex system of interactions performed in just the right way, at the right time, on the stage we call school to make a learning disability; learning difficulties/disabilities are intelligible only in the context of schooling. The existence of learning difficulties/disabilities as a linguistic and institutional category ensures that a proportion of the school population will acquire the learning difficulties/disabilities label because language plays a role in creating and sustaining institutional categories (Berger and Luckman, 1966). It is in schools, where children are routinely sorted and evaluated in terms of certain learning behaviours, that learning difficulties/disabilities come to life’ (Dudley-Marling
Learning disabilities defined in terms of a delay in acquiring specific (pre)reading skills, for example, make sense only in a context where these skills are salient (Dudley-Marling 2004). Individual students cannot have learning difficulties/disabilities on their own (McDermott and Varenne, 1999), hence the performance of learning difficulties/disabilities requires an institutional framework that assigns particular meanings to students’ behaviours that, in other cultural contexts, do not carry the same significance (Dudley-Marling 2004).

The ideology of social construction and its application to the construction of knowledge around learning support practices can be said to be based on a history of special education practices – the current ones; those that have failed and those in need of improvement; all of which are subject to change. In light of this the following questions arise:

- What happens in a society that has not yet identified with linguistic and educational categories pertaining to learning difficulties/disabilities for example dyslexia as in the case of Owerri West?
- Does the lack of identification of dyslexia in the classroom setting mean non-existence in society?
- If we say meaningful learning occurs when individuals are engaged in social activities, what happens when learners are restricted from engaging in social activities because of barriers to learning caused by specific learning difficulties/disabilities that the society is not aware of?
- How important is the need for the term ‘dyslexia’ to feature the primary school curriculum? To what extent will this change the face of inclusive practice in primary schools?
2.6.3 The social construction of disability

The social construction theory relates to the way individuals structure experiences and analyse the world they live in. The theory holds that individuals structure their reality and act on their knowledge, experiences and interpretations of the world around them. This gives rise to social phenomena which over time become institutionalised and become tradition.

The social constructionist world-view can be applied to many social issues including learning disabilities. In many parts of the world, disability is perceived and constructed as a social problem. The concepts of disability have historical roots as such many ideas of social construction of knowledge and the existence of knowledge of learning difficulties/disabilities are based on a history of practices. Because disability is deemed a social construct we cannot overrule the role culture plays in determining the extent to which people with disabilities are hindered in society. Legislation protecting the rights of people with disabilities, should therefore effectively serve to break down societal barriers that otherwise hinder active participation of people with disabilities in society. Social policy analysis however has been slow to recognise the role of ideology in the development of social policies (George and Wilding, 1976).

The deconstruction and reconstruction of social problems in many cases give rise to the creation of social policy. Social policy manifests as a response to a society’s changing need or as a result of a society’s need to improve or maintain already existing practices. Foucault (1978, 1979) argues that power is exercised through a
set of legitimating discourses which produce knowledge about and attach meaning to categories of people and actions. It is important to note that social policies are approached differently according to ideological understanding of the governing power in a particular society. Erlanger and Roth, (1985) identify that one of the problems of disability policy is that it is often embedded in more general policy such as labour, veterans or welfare policy. A society’s values are to a large extent governed by its needs, and language pertaining to policy. These all play significant roles in determining predominant political practices in society.

2.7 Disability as a social phenomenon: an interpretivist perspective

Interpretivism as a paradigm recognises that reality is subjective and people experience reality in different ways which can only be imperfectly grasped through the use of language which defines a particular reality. Social constructions such as a language, consciousness, shared meanings, documents, tools, and artefacts are ways in which reality is understood and experienced. The way we organise and interpret a social world relates to which information is arranged and organised (Aronsson 1995). Language and constructed meaning associated with the language aid in creating realities about disabilities and learning difficulties in society. They play important roles in policy making and in determining social actions as they inform what will be considered important practices. Interpretivism as a paradigm is discussed in further detail in chapter three.
Traditionally, disability is considered a personal predicament and a medical condition. It can therefore be argued that disability is an outcome of certain principles framing it as a social phenomenon where pertinent information will be organised in a way that makes sense to society (Hedlund 2000). From an interpretivist stand point, disability as a phenomenon suggests that our knowledge of reality is a social construction by human actors. The interpretivist approach to disability emphasises disability as an individual experience, albeit one situated within a social context (Gabel and Peters 2004). This approach seeks to understand social members’ definition of the situation (Schwandt, 1994).

2.8 Disability and inclusion framework

The United Nations have estimated that at least 25% of any population is adversely affected by the presence of disability (United Nations Enable, 2006). Based on this statistic one might deduce that a proportionate percentage is representative of disabled learners in schools. The disabled in society face the challenges of exclusion and discrimination in the broader society. These challenges permeate the walls of education in various forms such as equal opportunities, access to learning, inclusion and exclusion etc. As a means to combat these challenges and improve on equality measures, the ‘key-word’ inclusion has been at the forefront of curriculum planning in schools with the intent of bettering the learning experiences of learners with disabilities.

Children with disabilities and many others who experience difficulties in learning are often marginalised within or even excluded from school systems (Ainscow and Haile-Giorgis 1998). As a result of the 1990 World Conference on Education
for All: Meeting Basic Learning Needs, the challenge of exclusion from education has been put on the political agenda in many countries (Ainscow and Haile-Giorgis 1998). However, the Salamanca Statement produced under the leadership of the United Nations Educational, Scientific and Cultural Organisation (UNESCO) in 1994 remains a cornerstone document in the discourse of inclusion (Ellison 2008). The Salamanca Statement and Framework for Action on Special Needs Education, Article 7, (1994) proposes that there should be a continuum of support and services to match the continuum of special needs encountered in every school. The United Nations Convention on the Right of Persons with Disabilities acknowledges that all children with special needs have equal human rights and freedom like any other child (United Nations, 2006). The universal right to education for people with disabilities irrespective of age is addressed in the Convention on the Rights of the Child (1989). The Convention of the Rights of the Child which came into force in 1990 was the first legally binding international document to incorporate a range of human rights which encompasses civil, cultural, economic, political and social rights. Article 23 of the document makes particular reference to the welfare of children with disabilities (see Appendix D for extract of Article 23).

The universal right to education for people with disabilities is also addressed in several significant, internationally approved declarations, including the World Declaration for Education for All (1990), the Standard Rules on the Equalization of Opportunities for Persons with Disability (1993), the UNESCO Salamanca Statement and Framework for Action (1994), and the Dakar Framework for
Action (2000), all of which have helped in various ways expand on the concept of inclusion.

2.9 Nigerian disability policy and legislation and its impact on inclusion

Law forms the fundamental framework from which mechanisms for equality of opportunity can be established (Michailakis 1997). It is therefore important that issues pertaining to disability policy and legislation are clearly defined and identified in order to ensure that disability rights are widely covered and effectively implemented. Disability involves a broader conceptualisation than what can be captured through personal experiences, as it is part of a social practice and social life (Hedlund 2000) therefore it is essential that definitions are as elaborate as possible to encompass and represent the whole of society to avoid exclusion. Disability policies are fashioned around set definitions and understanding of the term disability in a given society. The descriptiveness of disability policy is a reflection of what disability is believed to be and the perceived rights and needs of the disabled in a society. Policy definitions of disability play an important role in determining social construction of disability. Schneider and Ingram (1993) suggest that many constructions are fluid and manipulated by media, political leaders, literary and artistic leaders as well as social scientists. In relation to this, Hahn (1985) states that fundamentally, disability is defined by public policy; in other words, disability is whatever policy says it is.
The extent to which definitions of disability vary and the extent to which these definitions are elaborated and portrayed in policy and implemented in the wider society, can be said to be dependent on the level of socio-economic development of a country. Although disability legislation may not be as detailed or aptly practiced in Nigeria as it is done in some developed countries there is evidence of government involvement in taking cognisance of the rights of people with disabilities. A Wa Po (2008), however, points out that the 1993 Nigerians with Disability Decree and the National Policy on Education (NPE) (1977 revised 1981, 1985, 1998 and 2004) are the only government literature available that addresses education and disability in Nigeria. The aim of the 1993 Nigerians with Disability Decree is to provide clear and comprehensive legal protection and security for Nigerians with disabilities. Section 5 of the Decree addresses provision for the disabled in educational institutions (see Appendix C for extract of the Nigerians with Disability Decree 1993 Section 5 on education). However, one of the problems identified with Nigerian disability legislation is the poorly defined disability categories reflected in the 1993 Nigerians with Disability Decree. The 1993 Nigerians with Disability Decree (cited in GLADNET Collection, 2008) defines disability as the following:

“Disabled Person” means a person who has received premilminary (sic) or permanent certificate of disability to have a condition which is expected to continue permanently or for a considerable length of time which can reasonably be expected to limit the person’s functional ability substantially, but not limited to seeing, hearing, thinking, ambulating, climbing, descending, lifting, grasping, rising, any related function or any limitation due to weakness or significantly decreased endurance so that he cannot perform his everyday routine, living and working without significantly increased hardship and vulnerability to everyday obstacles and hazards.
Ogbue (1975, 1981) notes that the categories of disability in Nigeria include: the blind and partially sighted, the deaf and partially hearing, the physically handicapped, the mentally retarded and hospitalised children. I argue that the concept of disability in Nigeria should extend beyond the four kinds of disability to embrace more specific rights and benefits of other intricate categories of disability.

While the definition of disability set out in the 1993 Nigerians with Disability Decree acknowledges various ways disability could pose limitations to active participation in society, it is not very comprehensive and does not for instance mention intellectual, neurological or developmental disabilities. The definition of disability is the framework on which the Disability Decree is built so even though it acknowledges rights and privileges of people with physical disabilities, it does not specifically draw attention to or include cognitive or learning disabilities. As a result, these disabilities are not addressed in Section 5 of the Decree (see Appendix C). This constitutes a problem to those affected as there is no legislation governing or protecting the educational rights of people with SpLD for instance. There is a need for the government to put priority on improving educational policies geared to improve the quality of mankind (Rachman 2003) because decisions about policy, services and intervention, based on firm evidence will result in optimal gains for people with disability (Mmatli 2009; Parahoo 2000). However, what happens when there is no evidence of the existence of a disability because linguistic labelling of the disability in question does not yet feature in policy? This rhetorical question is open for debate where arguments on the issue will most likely be centred around the fact that disability awareness is culture
bound and subject to societal knowledge and understanding. McQuillan (1998) quite explicitly states: ‘our expectations and cultural belief systems reflect our values and perspectives and at the same time can close our minds to accepting other ways of thinking and doing.’ There does appear to be a relationship between the way disability is perceived in Nigerian society and the way it features in policy. Chapters four, five and six discuss this point in more depth.

The preamble of the Convention of the Rights of Persons with Disabilities, on the other hand, gives a more apt description of disability in stating:

‘persons with disability include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others’ (United Nations, 2006).

The implication of this description of disability is that it is more embraceive and is more likely to lend itself to inclusivity in schools and society as a whole as well as create a strong platform on which disability rights can be argued. The Convention of the Rights of Persons with Disability emphatically states that people with disabilities should receive support to facilitate their education (see appendix E). If one were to use this as a basis for debate the debatable questions will be; even though Nigeria is a signatory to the Convention, to what extent can it be said that Nigeria has taken cognisance of other subtle disabilities where learning support will need to feature? To what extent has learning support of pupils with dyslexia and other SpLD disabilities featured in policy for it to be said that it has effectively been adopted in the school curriculum? An article in The Guardian (April 12, 2009) hints that despite the declaration of full participation in the disability agenda of the United Nations by the Nigerian government, Nigerians
with disabilities are still faced with the challenges of poverty, marginalisation and exclusion in society.

Poor implementation of policy is another area in need of address. While the literature in itself presents the recognition of the rights of people with disabilities, A Wa Po (2008) stresses that, despite the passing of the Nigerians with Disability Decree, the situation of those with disabilities in Nigeria remains desperate. None of the programs set out in the 1993 Nigerians with Disability Decree have been enacted to any substantial degree, and the number of children born with physical and learning disabilities remains unclear with no reliable census having been carried out (A Wa Po 2008). The Federal Ministry of Education (2008) emphasises that the National Policy on Education identifies the disabled, the disadvantaged and the gifted as the three groups that have taken centre stage on the problems and challenges of inclusion in Nigeria. Each group highlighted by the Federal Ministry of Education (2008) has several categories of learners with specific needs that have been identified and located within two recent policies - Guidelines for Inclusive Education which address impairment and disability that have traditionally been excluded from educational opportunities, and Guidelines for the Identification of Gifted Children and an implementation document known as the Proposed Implementation Plan for Special Needs Education Category published by the Federal Ministry of Education. Even though this is a laudable effort by the government to help create equal opportunity and access for children with disabilities the problem still remains – the incomprehensive definition and limited understanding of disability that has placed limitations on learning support provision in schools.
The extent to which legislation has transferred from paper to practice has been found wanting in many areas. In view of this Oluborode (2008) argues that the human rights, concerns and needs of Nigerians, particularly the marginalised groups, till date remain unaddressed even though since the 1993 Nigerians with Disability Decree, two significant bills for persons with disabilities were introduced at the National Assembly in 2000, namely; a Bill for an Act to provide Special Facilities for the Use of Handicapped Persons in the Public Buildings and a Bill for an Act to Establish a National Commission for the Handicapped Persons to address issues pertaining to education and social development.

Eleweke (2003) highlights that even after twenty-five years of the publication of Nigeria’s National Policy on Special Education evidence indicates that most of the provisions of the policy document have not been implemented. Abang (1989) posits that heroic ideas that are generally conceived and put on paper but rarely implemented are a common phenomenon among developing countries. Although there is appreciable effort made by the government to equalise educational opportunities for all children irrespective of their disabilities, Ajuwon (2008) argues that much more is needed to translate into action the goals of the National Policy on Education intended to improve quality of special education services. Eleweke (2003) suggests that there is a need for legislation to enhance the implementation of special educational policy as the lack of such legislation has resulted in limited support in implementation of the policy document. Also as a way forward, Rachman (2003) suggests that educational (and disability) policy can be improved by the establishment of co-operative actions with different roles
being established among the stakeholders of education: government, relevant United Nations agencies, international organisations and NGOs.

2.10 The interplay between policy, innovation and change in Nigerian disability issues

Education systems are often vulnerable to changes that take place at the socio-political and economic levels (Ainscow and Haile-Giorgis 1998). However, as a means of good practice it is important that existing policies are reviewed to take cognisance of a broader range of disabilities. It appears that disability legislation in Nigeria needs further investigation (A Wa Po, 2008) as the severe lack of legislation relating to the education of disabled children in Nigeria has ultimately impacted negatively on support provision for children of school age with hidden disabilities such as dyslexia.

History tells us that every system is subject to change over time. Systems grow, develop and change, rather than remain routinised and standard (Miles, 1964). As a society’s ideology changes so do the practices predominant in the society. Globalisation has brought about the need for societies to be acquainted with modern technology and trends which not only concern economical processes but also political, educational, cultural, social and environmental processes that help produce a healthy, diversified system in society. It is imperative to consider who dictates what is to change in the educational system and what external influences determine change (Ajoku, 2006). In every system there are always agents that drive change.
The illustration below identifies interaction agents involved in change.

Figure 2: Interaction agents involved in change. Adapted from Havelock (1971)

Size, complexity, finances, congruence between practices and values of receivers and the innovation are factors in the environment which predispose educational systems to change (Huberman, 1973). These factors appear to influence change where it concerns disability policy and the impact it has on learning disability identification and support in the Nigerian context. Therefore it could be argued that a difference in approach to disability issues is desired; in other words – there is a desired need for change. It is the effectiveness and resilience of approach taken and how a system tackles change that determines the overall outcome of how changes will apply and the innovations that will follow. Innovation extends beyond identifying and altering existing practices to include putting things in place to make sure that the system works to the advantage of the society. Miles (1964) makes the distinction between change and innovation as the latter is
somehow more deliberate, willed and planned, rather than occurring spontaneously.

Change is necessary to development of any society. Changes in economic, social and political situations create the need for constant innovations and reforms in the educational system (Adamu 2003). Huberman (1973) proposes that when educators write of change they mean that something has happened between some original time and some later time in the structure of the school system, in any of its processes, or in its goals or purposes. In education, most changes involve a different pattern of behaviour towards learners. Educational systems always change although the rate and pace at which changes occur varies from society to society; the needs identified by a society and the values attached to the needs identified. The way special needs education has been addressed over the years depicts changes that have been made to the way the school curriculum is addressed in order to offer more inclusive practices to its learners.

Breslow et al. (1960) identify that there are three forces that influence the curriculum:

(a) forces generated by special interest pressure groups consciously attempting to direct school policy for their own purpose

(b) forces arising out of general social and technological trends throughout the world accentuated by increased communication among nations and rapidity of scientific development
(c) forces generated by new insights from the scholarly fields particularly as to the nature of man as a learner, the dynamics of the groups, the nature of the school society and its relation to the larger community

Lachiver and Tardif (2002), identify that curriculum change is managed in a logical five-step process:

1. an analysis of the current offerings and context;
2. the expression of key programme aims in a mission statement;
3. a prioritisation of resources and development strategies;
4. the implementation of the targeted curricula change;
5. the establishment of monitoring tools and processes

Change comes with challenges, some of which prove more difficult to overcome than others. What is of utmost importance, however, is a society’s acknowledgement of the need for change. Having made this acknowledgement, the next step is to make allowances for necessary structural changes to happen. Westley (1969) proposes that there are three processes at work in change:

- Innovations occur through the accretion of small changes: introduction of a new textbook, better professional preparation of teachers, newer testing and diagnostic methods. As in quantum theory, changes are generated slowly but amount to continual improvement in the system.
- The ‘grass roots’ theory: the system receives new ideas all the time and transforms those it is ready to assimilate into a new form in keeping with its own norms and practice.
• Change through policy decision: nothing happens within the educational system until a central governmental authority decides to adopt a new idea and issues the necessary executive orders.

Educational innovations are often introduced to make education more utilitarian, and this has generated a whole theoretical field with a focus on how the innovations are initiated and how they achieve their effects (Adamu 2003). Innovation is the driving force behind a school’s continuous survival and growth and, as Hargreaves (2000) argues, innovation cannot exist without creativity; creativity is not simply about incremental improvement, it is also a process which breaks down existing patterns of the mind and develops new ways of doing and seeing things. However, Zhao et al. (2002) are of the view that innovations often fail when they are perceived as not being aligned with the cultural values and beliefs of schools, when they are seen as externally imposed, or when there is a dependence upon external resources. Sutch et al (2008) propose that the creation of a culture of innovation is built on a cycle of knowledge and practice.
Sutch et al (2008) posit that the cycle begins with insight, which starts with problem identification, building knowledge of the field and also exploring the routes for finding solutions and the tools to help deliver them. Having gained insight the next stage is the invention which comprises creative processes of developing new ideas and challenging existing ‘logic’ or practices. The next stage is the application which is the use of strategies and organisational structures to implement new approaches, including key issues around innovation, diffusion and routes to successful implementation which may themselves require new practice to emerge. The final stage is reflection and communication which involves ensuring strategies in place are effective, regularly reviewed and refined, and that they are disseminated to, and understood by, all those affected.
2.11 Conclusion

The literature review has laid the foundation on which subsequent chapters are built. This chapter has brought to focus disability awareness issues and the impact of culture, tradition, policy and societal understanding on disability awareness and disability rights issues in Nigeria. For the purpose of this research the importance of addressing disability awareness at national level before looking at disability awareness at state level (Imo State) and the local government level (Owerri) cannot be overemphasised. Doing this has helped create a more rounded understanding of the awareness of disability in the society being studied. It has also helped create an understanding of how legislation at national level infiltrates practices at the level of state and local government area. The subsequent chapters focus on Owerri West in particular, where this study was based. Literature makes no reference to any explicit evidence of awareness of dyslexia as a disability in Nigeria in general or Owerri West in particular. Therefore issues arising from information gathered through original source data for the purpose of this study and the resulting findings authenticate the originality of this study. The next chapter—Methodology, addresses the data collection process.
CHAPTER 3

*Information is a source of learning. But unless it is organised, processed and available to the right people in a format for decision making, it is a burden not a benefit.*

*(William Pollard 1911 - 1989)*
3. Research Methodology

3.1 Introduction

The hunt for new information, the craving for knowledge and the need to understand why there is a problem play important roles in forming part of the basis of research in any field of study. The search for knowledge is known to be accompanied by problematic areas both the envisaged and the unforeseen, which need to be solved. The methodology adopted in research systematically lends itself to the way research is carried out in order to address problems highlighted at the onset. Every research involving data collection is carried out through a procedure. The consistency of the different methods adopted in data collection in research makes it resonant. For the purpose of this study it was important that different sources of evidence used as methods of data collection were relied on because no single source of evidence has complete advantage over the other; rather, each complements the other. In this study, literature as a secondary source of data corroborated evidence provided in primary source data derived from observations, interviews and questionnaires.

The two research questions that motivated this research are:

1. What are the forces that drive inclusion in the educational system and how has this impacted on dyslexia awareness and curriculum planning in primary schools in Owerri West, Imo State, Nigeria?
2. To what extent are the conceptions and perceptions of learning difficulties/disabilities as a whole responsible for the lack of dyslexia
awareness in Nigeria and how has this impacted on dyslexia awareness in primary schools in Owerri West Imo State Nigeria?

The research questions were used to form the basis of the investigation where the main aims were to:

1. explore possible reasons why very little research has been carried out in the area of dyslexia in Owerri West
2. examine reasons for lack of government attention and recognition of hidden disabilities and explore how this has impacted on policy making in the area of specific learning difficulties
3. investigate how ideologies for acceptance, policy making and funding in the realm of special needs education are inevitably determined by general conceptions and the understanding of special needs in Owerri West, Imo State and Nigeria in general
4. scrutinise reasons why government departments dealing with disability in Imo State Nigeria seem to lack dedication in terms of exploring new avenues to include children with specific learning difficulties
5. investigate how the lack of specialist training in the area of dyslexia awareness impacts on classroom teaching in primary schools in Owerri West, Imo State

3.2 Rationale for qualitative research

Qualitative research methods were developed in the social sciences to enable researchers to study social and cultural phenomena (Myers 2009). Creswell
(1997) describes qualitative research as an ‘inquiry process of understanding a social or human problem, based on building a complex, holistic picture, formed with words, reporting detailed views of informants, and conducted in a natural setting.’ Although qualitative research is time consuming, it is worth conducting especially when the researcher relies heavily on participants’ interpretations of realities that exist in the society studied. These interpretations play an important part in informing the study because individuals’ interpretations and understanding of phenomenon is rich and less able to be generalised. Therefore its significance in this research cannot be over emphasised. This study adopted a qualitative approach because qualitative research allows the researcher to explore and understand beliefs, experiences, attitudes, behaviour and interactions which this study relied heavily on. Qualitative study is multi-method in focus, involving an interpretive, naturalistic approach to its subject matter (Denzin and Lincoln 1994). Qualitative research provides the researcher with the perspective of target audience members through immersion in a culture or situation and direct interaction with the people under study (Weinreich, 2006).

Quantitative research on the other hand tends to take on a more objective approach which can be argued is more efficient in testing hypotheses as the intent is to seek precise measurement and analysis of target concepts. Creswell (1997) defines quantitative study as ‘an inquiry into social or human problems, based on testing a theory composed of variables, measured with numbers and analysed with statistical procedures in order to determine whether the predictive generalisations of the theory hold true.’ The disadvantage of using quantitative research in this particular study is that contextual detail on disability issues which this research
relies heavily on it is missed. This is because in quantitative research, the researcher tends to be objectively separated from the subject matter. Qualitative research on the other hand is not only interested in establishing statistical facts of existence. Rather it is interested in answering questions such as why things happen (restricted inclusion), why things do or do not exist (as in the case of dyslexia awareness) or why things are perceived in a certain way (disability perceptions and the resultant impact on inclusive education) – questions to which quantitative answers fall short of addressing. However, this does not in any way suggest that quantitative data is less important, as statistical evidence does in many ways substantiate an argument. Quantitative evidence has the advantage of appearing clearer and stronger, the downside however being that it tends to overshadow the opinions of the people directly involved in matters investigated. It is for this reason that it can be argued that quantitative data applied in social research contexts is not sufficient on its own as it does not afford the richness derived from the researcher’s interaction with participants over a period of time. It also does not create opportunities for the voice of participants to be heard which is very important in this particular study. As such, with regards to this study, quantitative research is therefore not sufficient on its own as it does not lend itself to the depth and richness that qualitative research offers. While quantitative research seeks to investigate percentages of an occurrence of an event or practice for instance, qualitative research focuses more on individual situations and the human understandings that feature in those situations.

Qualitative research applies itself well to understanding practices in societies investigated which are subject to change and adaptation. Using quantitative
methods to understand social situations highlighted in this study would have proved abortive given the complexity of social situations and the difficulties this poses on numerical description. In other words, quantitative research lends itself more to precision which has its advantages; however, such precision does not suit itself effectively to understanding the complex nature of people’s perceived reality in society. Although preconceptions of notions and practices were used to guide this research, it was important to interact with the subjects and analyse their views on prevailing issues this research addresses. Qualitative research permits this kind of in-depth exploration that expresses experiences, opinion, attitudes and behaviour of individuals in society. It also affords the luxury of exploring and writing in a literary style (Creswell 1997). In addition, qualitative research produces more in-depth information supplied by the informants and is evidence that individual perceptions and beliefs show no single reality as these realities are based on individual perceptions.

3.3 Choice of paradigm

All research, whether quantitative or qualitative, is based on some underlying assumptions about what constitutes ‘valid’ research and which research methods are appropriate. In selecting a research paradigm it was important for me as a researcher to identify the problem, the research aims and assumptions. A further consideration of the nature and reason for the social phenomenon investigated was necessary. It was also important to consider whether the social phenomenon was objective or subjective by nature. It was equally necessary to consider the bases of knowledge in relation to social reality. In the case of this particular study, once it
was established that the research required an anti-positivist approach to investigation the importance of embarking on qualitative research became clear. Myers (1997) suggests that qualitative research can either be positivist, interpretive or critical depending on the underlying philosophical assumptions of the researcher. As this research intended to investigate and understand participants’ views of a particular social phenomenon and their views on situations that prevailed in their society the choice of paradigm became apparent. It was also apparent that an interpretivist approach best suited the purpose of the study.

![Figure 4: Underlying philosophical assumptions (Myers, 1997)](image)

3.3.1 **Rationale for the interpretivist paradigm**

The way in which research is carried out is dependent on specific research philosophy, that is, the reasoning behind the way data about a phenomenon should be gathered, the research strategy employed and the research instruments used. The framework on which the social construction theory is built and which this
research is analysed is interpretivism – a paradigm that holds that our knowledge of reality is a social construction by human actors. Qualitative research places much emphasis on the participants’ world view of reality because they are presumed to be authorities of the phenomenon being studied; hence their contribution to the research is vital. Interpretivism as a research philosophy holds that the world is constructed, interpreted and experienced by people in their interactions with each other and with wider social systems. Interpretivism as a paradigm recognises that reality is subjective and people experience reality in different ways. It recognises that the use of language defines a particular reality and that reality can only be imperfectly grasped.

Interpretive studies attempt to understand phenomena through the meanings people assign to them. Interpretive researchers start out with the assumption that access to reality (given or socially constructed) is derived through social constructions such as language, consciousness and shared meanings. In order to conduct and/or evaluate qualitative research, it is important to know what these (sometimes hidden) assumptions are (Myers 1997). This is because it is the attempt to understand, describe and interpret experiences of participants, as in the case of this research that influences the choice of paradigm. Interpretive research is philosophically based on hermeneutics and phenomenology (Boland 1985). Interpretive research does not predefine dependent and independent variables but focuses on the full complexity of human sense making as the situation emerges (Kaplan and Maxwell 1994). From an interpretivist stand point, the social world is produced and reproduced daily by people in society. Things that are seen to be true in a given society may be subject to change over a period of time. Also
certain things held true in one society may not hold true in another. In other words, the social word is understood and interpreted in different ways by different people in different societies who find themselves in different situations. Nothing can be said to be true or untrue at all times as reality is subject to the context in which it operates. Therefore it is important to view or describe reality from the standpoint of those that experience it and are involved in a given situation. In the case of this study, the participants’ realities are enshrined in their experience and knowledge of perceptions of disability prevalent in their society. It is the experiences of the participants involved in this study that stand as the ‘voice’ of reality in a sense. The aim of this ‘voice’ is to project and portray the seen and unseen realities of inclusivity in primary schools where it concerns unidentified dyslexia in schools and the impact the lack of dyslexia awareness has on inclusive educational practices.

3.3.2 Rationale for choice of theoretical approach and research method

This research was mainly viewed through the lenses of the social models of disability, dyslexia and inclusion as well as the social construction philosophical framework. The theoretical approaches suit this research because they emphasise and help make clear how disability rights in a society are influenced by societal perceptions, knowledge, understanding and use of language/terminology that defines disability.

This study adopted ethnographic research techniques for the purpose of gaining an understanding of prevalent disability issues in the society. An ethnographic
approach allows for a descriptive, interpretative, evaluative and potentially authentic vision of the society investigated (Hammersley and Atkinson 1995). The ethnographic investigation allowed the use of qualitative research methods which allowed for an in-depth exploration of possible explanations as to why dyslexia awareness is not widely spread in primary schools in Owerri West. Adopting an ethnographic approach was relevant because it involved social scientific writing about a particular ethnic group to reveal the interrelationship between individual beliefs and, cultural norms and social rules and to make the beliefs and values of a particular culture intelligible (Tedlock, 2000 and Berg, 2001). Ethnography as an approach to inquiry relates to culture or subculture of a group of people where the aim is to understand the world view of the subjects being studied. This kind of research placed me, the investigator, in an advantageous position where cyclic data was collected and analysed throughout the research. During the course of data collection certain data provided new information which stimulated me to delve into other related areas of interest to the research or even elicit confirmation of an interpretation from individuals that participated in the research. Williamson (2006) stresses that with all interpretivist research, ethnography is flexible in terms of research design with researchers seeking “to be totally open to the setting and subjects of their study” (Gorman and Clayton, 1997). The ethnographic techniques adopted in the study afforded a thorough investigation of the contextualisation of disability awareness in Owerri West in general. The investigation gives an insight into societal, political and cultural influences on disability awareness and how this impacts on dyslexia awareness. It also gives insight into how these influences impact on other issues such as curriculum planning, funding and inclusion in primary schools. It is evident from this
research that social interactions and perceptions of disability, and existing government disability legislation are all interwoven and to a large extent influence curriculum planning and the way disability issues are addressed in primary schools.

3.4 Research design

In every research there is planning involved. Investigations carried out in this study started with a review of literature which enabled me as researcher to have an initial understanding of the topic investigated and also helped create an idea of the data collection plan required to carry out the investigation in depth. The research design aimed at focusing on how information was to be gathered; the data collection instruments to be used; who the participants were to be and how the data will eventually be analysed. Williamson (2006) suggests that the research design tends to be nonlinear and iterative, meaning that the various elements in the research are interwoven, with the development of one influencing decisions about the others.

3.4.1 Research instruments

Triangulation as a technique used to establish credibility of data gathered in qualitative research ensures that conclusions drawn from the research are stable in that information obtained is viewed from several vantage points and not from a single source. Triangulation is essential in qualitative research as it helps in making informed judgement. The triangulation design was part of the original
plan. Data for the research were mainly gathered through a triangulation of data collection methods which included interviewing, observations and the administration of questionnaires. In addition to affording the opportunity for data to be collated using different data collection methods, triangulation also ensured that issues raised and suggestions put forward by the participants were a product of various sources of information that expressed realistic points of view.

It was important to establish from the onset of this research how information was going to be gathered. Information derived from the literature review played a vital role in piecing together and supporting verbal and observed evidence gathered through interviews and observations. Observations were very useful as they served to provide first-hand experience of school practices as well as help consolidate further the understanding of perceptions, beliefs and ideology derived from the interpretations of participants’ responses in interviews and questionnaires. Chapters four, five and six discuss in detail justification of choice of data collection methods - ethnographic engagement, interviews, observations and documentary evidence, all of which combined to achieve triangulation.

3.4.2 Data collection methods and analysis

The data gathering procedure followed a particular order. The first stage was the literature review which followed on to questionnaires then observations and finally interviews. Each data collection method served to refine the one it preceded. This enabled me as a researcher to have a clearer picture of the suitability of the structure of each data collection method in order to attain
relevant information as well as arrive at well supported conclusions. The literature review as part of triangulation of the data collection process served as part of the loop in the data collection process because of its importance in shaping and guiding this study. It served to outline past and current practices, issues, debates around the study. It initially formed the basis of defining the research problem as well as informed me as a researcher of what information needed to be sought in terms of disability awareness, knowledge, cultural influences, policy and practices specific to the society investigated.

Having done the literature review, administering questionnaires was the next stage in the data collection process. Although questionnaires are not among the most prominent methods in qualitative research (Woods, 2006) they were used in this study to facilitate the qualitative research. One of the advantages of administering questionnaires before conducting observations and then interviews was that it helped consolidate ideas raised in the literature review. The responses given in the questionnaires to an extent highlighted the need to rephrase certain intended interview questions in the bid to gather resonant information necessary to enrich the study and also delve deeper into relevant issues pertaining to the investigation. Again the questionnaires served to shed more light on aspects of interest that perhaps may not have been considered during the observations that took place. Since the study is qualitative by nature the analysis of the questionnaires took on a more descriptive approach as opposed to a statistical approach which best suits quantitative research. The analysis of the questionnaires and the findings are discussed in detail in chapter four.
My role as a complete observer warranted that I kept a descriptive record of what was being observed. Photographs were taken to support and substantiate the data gathered through observational notes, which served to elicit data as well as record and demonstrate aspects of interest that are relevant to the study. It was important that my presence did not obstruct or influence the natural sequence of occurrences in the settings. The findings of the observations that took place are discussed in detail in chapter five.

Interviews were conducted with teachers, headmasters, headmistresses and lecturers. It was imperative that data gathered from the respondents was resonant and original in quality. As such, care was taken not to structure the interview questions in such a way that influenced particular responses. Rather, the structure took on more of a semi-structured approach to allow flexibility of responses from where themes were extracted and generalisations postulated. These generalisations were used to propose taxonomies and classify findings. The interviews conducted were transcribed and the thematic analysis was used to draw out common themes. Thematic analysis was used to identify categories, themes, ideas, views and commonly shared understanding of phenomenon expressed by the participants all in the attempt to make meaning of the phenomenological experiences of the participants as well as find answers to the research questions that guided the study. Chapter six addresses the analysis of interviews and discusses the findings in detail.
3.4.3 Validity and reliability

Reliability and validity address issues about the quality of data and appropriateness of the methods used in carrying out research. Qualitative methods usually research a question through several methods and in doing so most often use a combination of documentary analysis, together with non-participant observation and interviews all in the bid to corroborate an account with other sources of data.

This research adopted a mixture of methods in order to shed light on various viewpoints. This triangulation ensured validation of information and responses given and in addition ensured a deepening and widening of understanding in the area of research. Both theory triangulation and data triangulation played a vital role in overcoming biases and enhancing the credibility of the results. Validity was addressed through the depth of richness and scope of the data collected through the review of literature, questionnaires, observations and respondent interviews.

Reliability addresses the accuracy of research methods and techniques in producing data. Therefore the more a researcher is able to gain agreement of different data sources on a particular issue, the more likely the reliability of the interpretation of data. This study adopted a combination of sources of information to corroborate the truth of evidence gathered. Reliability of this research was achieved by evidencing that the findings of the study were supported by substantial data. It was important to approach the study with an open mind with
the intent of analysing the experiences of the participants through their own viewpoint. This helped avoid bias as it did not allow my personal views to influence judgement.

3.5 Sampling and access

Qualitative studies involve making generalisations through sampling. Qualitative researchers tend to make analytic generalisations (Miles and Huberman 1994), which are “applied to wider theory on the basis of how selected cases ‘fit’ with general constructs” (Curtis et al., 2000). The sampling process requires that a subgroup is selected from a larger group with the intent that the subgroup represents the larger group and in the same vein be used to draw inferences about the larger group. In other words, generalisations about the larger group are inferred based on observations of the sample used for the research.

As previously mentioned in chapter one, there are currently approximately 2,040 primary schools in Imo State. However as Imo State was too large a sample size to carry out this particular investigation, this research limited itself to selected primary schools in Owerri West Local Government Area in Imo State. The Imo State Universal Basic Education Board Owerri 2009/10 records show that Owerri West has a total number of 66 primary schools; 46 of which are public (government) primary schools and 20 of which are registered privately owned primary schools and missionary primary schools. Because of time constraints it was impossible to carry out investigations in all the 66 primary schools in Owerri West. However a representative sample of 22 out of the 66 primary schools which
represented 33% of the total number of primary schools in Owerri West was investigated. The choice and selection process of the 22 primary schools used for the research was done by selecting primary schools from the three wards that represent Owerri West. Finding out the total number of schools in Owerri West was the first step in determining how many schools were to be chosen as the sample for the investigation. It was important to consider the characteristics of the study population as this helped in determining the sample size to be selected. It was however necessary to investigate a proportionate figure of government owned and private primary schools. Bearing this in mind the research limited itself to, 7 out of 20 private/missionary primary schools and 15 out of 46 government owned schools, making a total of 22 primary schools investigated.

The research adopted the cluster random sampling technique. Since the 66 primary schools found in Owerri West were too large a sample size to investigate given time and financial constraints, in order to derive a representative sample it was vital to have a list of all the primary schools in the wards representing the clusters and then randomly selecting primary schools to be investigated from the list. The fact that all the primary schools in Owerri West are mixed schools and the study population did not present any wealth or geographical location disparities helped limit biases and made it easy for samples to be selected. For this study, it was initially important to choose samples from pre-existing groups – in this case, the three wards that make up Owerri West. The primary schools investigated in the various wards were used as clusters to derive a representative sample of inclusive practices prevalent in the schools. Also considered was the extent of knowledge of disability awareness; dyslexia awareness in particular.
However, before any of the proposed investigations were carried out, the State Universal Education Board (SUBEB) was first consulted and consent was sought. It was important that SUBEB was informed of the intent of the research to avoid any breach of ethical issues. Once consent was given by SUBEB, consent was then sought from headmasters and headmistresses of schools and other participants involved in the study. The following subsection discusses ethical considerations in more depth.

3.6 Ethical considerations

Flew (1979), defines ethics as “a set of standards by which a particular group or community decides to regulate its behaviour – to distinguish what is legitimate or acceptable in pursuit of their aims from what is not.” Tyrer (2005) proposes that we live in a curious society in which we are becoming ever more open with regard to freedom of information but ever more protective towards the disclosure of personal information. Given the delicate nature and sensitivity of information obtained in research it is important that as researcher I considered ethical implications of the study. Gaining informed consent of participants to use the information supplied is a key issue in research with human subjects especially as the intent of education research is to share findings of the research inquiry with a broader scholarly community. Emphasis need to be laid on how vital it is for researchers to be able to tactfully strike the balance between the rights of participants’ privacy and public’s right to know. It is essential to note that however true the outcome of the research, it is vital that it is approached with caution because of the sensitive nature of issues raised. Although researchers are
obliged to make known findings of the research, it is imperative that researchers understand the power relations between the researcher and the researched and in doing so respect the participants’ views and their right to privacy.

It was essential that the subjects who were directly involved in the research gave their consent for the information supplied to be used. Consent letters distributed served to inform the participants about the nature of the research. This gave them the opportunity to gain insight into what the research entailed and possible implications of information supplied. The confidential nature of the research was also reiterated verbally before data gathering began. The informants were assured they will remain anonymous and were informed of their right to opt out at the onset if they felt they no longer wanted to partake in the study. Ethical consent was also sought from the University of Greenwich as a measure to ensure that the standards for research involving human subjects were met.

3.7 Conclusion

This chapter has briefly discussed research instruments, design and choice of paradigm. The following chapters four, five and six discuss these in more detail as well as address data analysis, findings and discussion. The following chapters critically examine views on issues surrounding the lack of dyslexia awareness in selected primary schools in Owerri West from the viewpoint of the participants. The information gathered through original source data is compelling and is substantiated by the different forms of data collection which were used and which have resulted in the findings discussed in the next three chapters.
CHAPTER 4

To separate clearly the condemnation of discriminatory practices from the greater problems of definition, especially as they apply to future generations, would be to create a stronger coalition of persons active and vigilant in addressing discriminatory practice today.

(Koch, 2001)
4. Questionnaires
Data Presentation, Analysis, Findings and Discussion

4.1 Introduction

While this chapter does not specifically highlight factors responsible for the lack of dyslexia awareness in Owerri West, it does however indentify the underlying problems surrounding disability perceptions, the impact this has on inclusive learning and how this could possibly contribute to reasons for the lack of dyslexia awareness. In addition, this chapter also addresses special needs education practices and learning support provision issues, all of which feed into broader discussions around learning disability awareness in primary schools. The data analysis presented in this chapter stakes a claim for the need for further investigation through different methods of data collection which is achieved in chapters five and six. This chapter and the two subsequent chapters take the reader on a journey of the data collection process, presentation of data, the analysis, the findings of the study and the discussions that follow. Hitchcock and Hughes (1995) best describe the journey undertaken in these three chapters as... “ways in which the researcher moves from a description of what is the case to an explanation of why what is the case is the case.”

According to Marshall and Rossman (1990) data analysis is the process of bringing order, structure and meaning to the mass of collected data which is a
messy, ambiguous, time-consuming, creative, and fascinating process. Qualitative data analysis is a search for general statements about relationships among categories of data (Marshall and Rossman 1990) and it usually relies on inductive reasoning processes to interpret and structure the meanings that can be derived from data (Thorne 2000). As mentioned in chapter three, the first stage in data collection for the purpose of this study involved distributing questionnaires to teachers in primary schools which led on to observations of classroom teaching and practices and finally interviews. This chapter focuses on responses to the questionnaires distributed in selected primary schools in Owerri West.

4.2 Rationale for the use of questionnaires

According to Woods (2006), questionnaires are not among the most prominent methods in qualitative research, because they commonly require subjects to respond to a stimulus and thus they are not acting naturally. However, they have their uses, especially as a means of collecting information from a wider sample that cannot be reached by personal interview. One of the advantages of using questionnaires in this research was that it was an inexpensive way of gathering data from a potentially large number of respondents. In deciding the methods of data collection to use for this research, one of the foremost aspects considered was the time effectiveness of the methods of data collection chosen. In this case, the advantage of using questionnaires as a method of data collection cannot be over emphasised. Given the time constraints of this research using questionnaires as an instrument of data collection enabled me as a researcher gather information from a large number of respondents simultaneously rather than having to conduct
individual interviews with a large number of respondents. Woods (2006) proposes that although the information provided in questionnaires is necessarily more limited, it is still very useful for instance in a case where certain clearly defined facts or opinions have been identified by more qualitative methods, a questionnaire can explore how generally these apply. Although the use of questionnaires is not a very typical method of data collection in qualitative research, it was necessary for this research to have a wealth of expressed opinions by respondents both in verbal (interviews) and written form (questionnaires) as each served to substantiate and authenticate the general findings of the study.

4.3 Ensuring reliability and validity of questionnaires

One of the advantages of questionnaires is that it permits anonymity which could possibly increase the rate of honesty of opinions and responses given. On the other hand, one cannot altogether overlook the fact that the anonymous nature of questionnaires can sometimes attract responses that are not genuine.

In order to ensure reliability, the questionnaire was first piloted to verify consistency. There is never a one hundred percent guarantee that respondents to questionnaires will be honest in their responses at all times. For this reason the validity of questionnaires could be questionable because participants may lie or decide to give answers that they feel are desirable. However, I argue that its use as a method of data collection is still relevant, especially if the information elicited is supported with other qualitative methods of data collection. The information gathered through questionnaires coincided with responses given in interviews and
the information gathered through observations. This in itself served as an indication of validity of design of questionnaire as well as the validity of responses obtained.

4.4 Questionnaire design

The questionnaire had a total of thirty six questions which comprised of both open-ended and closed questions. The questionnaire was divided into four main segments and was designed to elicit respondents’ views on issues surrounding the following:

- The impact of socially constructed perceptions of disability on disability awareness
- Government policy and legislation implementation
- Cultural and historical impact on disability awareness
- Importance of identification, support, funding and teacher training
- Teacher awareness of learning difficulties/disabilities
- Government involvement and funding

The first main segment of the questionnaires dealt with disability awareness. The respondents were required to indicate what they considered a disability and learning difficulty. The aim of this segment was to obtain an initial and holistic picture of respondents’ awareness of disability.

The second segment was designed as a five point likert scale with the options: ‘strongly agree’, ‘agree’, ‘neutral’, ‘strongly disagree’ and ‘disagree’. It was
designed to measure the degree of positive and negative responses to questions that addressed disability rights, policy and legislation.

The third segment of the questionnaire was designed as ‘yes’, ‘no’, ‘don’t know’ responses. This segment incorporated some open-ended questions for further comments and clarity of responses. This segment was intentionally placed in the middle of the questionnaires due to the somewhat intrusive nature of the questions asked which to an extent revealed the respondents’ knowledge and awareness of disability issues, special educational needs practices and teacher involvement. Placing these questions at the beginning of the questionnaire might have been off-putting and therefore could have potentially affected the response rate. During the process of data analysis it was noted that answers to some of the questions were omitted by the respondents. This is not uncommon in surveys. In order to ensure the integrity of data, the answers that were not supplied were indicated as ‘no response’. Although it is not clear why some questions in this section were not answered, this does however raise suspicions as to whether this happened because some respondents were uncomfortable making comments on aspects that flagged up the extent of their professional knowledge and practice. Perhaps having a neutral option might have overcome the problem of missing data. However incorporating a neutral option in open-ended questions could prove awkward given the ‘yes’, ‘no’, ‘don’t know’ design used for this segment of the questionnaire.

The fourth segment was again designed as a five point likert scale. This segment aimed at obtaining feedback that best aligned with the respondents’ views on
issues raised on disability identification and support, teacher training and issues centered on government funding.

4.5 Analysis of data

A total number of 122 teachers participated in the survey. Frequency counts and percentages were used to analyse data gathered through the questionnaires distributed to teachers. Charts, graphs and grids have also been used to present data and create a clear snapshot picture of responses. A more in-depth interpretative analysis subsequently follows to corroborate and elaborate the quantitative data provided. The interpretative analysis adds resonance to the quantitative presentation of responses and at the same time helps maintain the descriptive qualitative nature of the study.
4.6 Findings

Table 4

<table>
<thead>
<tr>
<th>Summary of findings of questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teachers</td>
</tr>
<tr>
<td>Poor awareness of special needs education</td>
</tr>
<tr>
<td>Poor awareness of developmental and neurological disabilities</td>
</tr>
<tr>
<td>Poor awareness of specific learning difficulties/dyslexia</td>
</tr>
</tbody>
</table>

4.7 Survey questions: responses and discussion

Q 1. Please specify the age category of the pupils you teach.

The age category specified as shown in the grid below ranged from ages five to fourteen.
Table 5

<table>
<thead>
<tr>
<th>Classes and age category of pupils</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary 1</td>
</tr>
<tr>
<td>Primary 2</td>
</tr>
<tr>
<td>Primary 3</td>
</tr>
<tr>
<td>Primary 4</td>
</tr>
<tr>
<td>Primary 5</td>
</tr>
<tr>
<td>Primary 6</td>
</tr>
</tbody>
</table>

Q 2. Please specify the class of pupils you teach.

The classes ranged from primary 1 to primary 6. The grid below shows the percentages of teachers that partook in the survey and the classes they teach.

Table 6

<table>
<thead>
<tr>
<th>Percentages of teachers that participated in survey and classes they teach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary 1</td>
</tr>
<tr>
<td>Primary 2</td>
</tr>
<tr>
<td>Primary 3</td>
</tr>
<tr>
<td>Primary 4</td>
</tr>
<tr>
<td>Primary 5</td>
</tr>
<tr>
<td>Primary 6</td>
</tr>
</tbody>
</table>
Q 3. According to the ‘Nigerians with Disability Decree 1993’ “disabled person” means a person who has received preliminary (sic) or permanent certificate of disability to have a condition which is expected to continue permanently or for a considerable length of time which can reasonably be expected to limit the person's functional ability substantially, but not limited to seeing, hearing, thinking, ambulating, climbing, descending, lifting, grasping, rising, any related function or any limitation due to weakness or significantly decreased endurance so that he cannot perform his everyday routine, living and working without significantly increased hardship and vulnerability to everyday obstacles and hazards.’

Using the definition of disability given above coupled with your own understanding, please tick the boxes that apply to learning difficulty and disability.

The table below shows the responses the question above.

Table 7

<table>
<thead>
<tr>
<th>Indication of responses showing awareness of learning disability/difficulty</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Dyslexia</td>
<td>3%</td>
<td>(4)</td>
</tr>
<tr>
<td>Dyspraxia</td>
<td>2%</td>
<td>(3)</td>
</tr>
<tr>
<td>Autism</td>
<td>3%</td>
<td>(4)</td>
</tr>
<tr>
<td>Asperger’s syndrome</td>
<td>2%</td>
<td>(3)</td>
</tr>
<tr>
<td>Down’s syndrome</td>
<td>22%</td>
<td>(27)</td>
</tr>
<tr>
<td>Attention deficit disorder</td>
<td>51%</td>
<td>(62)</td>
</tr>
<tr>
<td>Attention deficit hyperactivity disorder</td>
<td>34%</td>
<td>(41)</td>
</tr>
<tr>
<td>Tourette syndrome</td>
<td>2%</td>
<td>(3)</td>
</tr>
<tr>
<td>Serious behavioural problems</td>
<td>52%</td>
<td>(63)</td>
</tr>
<tr>
<td>Hearing impairments</td>
<td>63%</td>
<td>(77)</td>
</tr>
<tr>
<td>Deafness</td>
<td>47%</td>
<td>(57)</td>
</tr>
<tr>
<td>Visual impairments</td>
<td>61%</td>
<td>(75)</td>
</tr>
<tr>
<td>Wheelchair user</td>
<td>34%</td>
<td>(41)</td>
</tr>
<tr>
<td>Mental health</td>
<td>50%</td>
<td>(61)</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>16%</td>
<td>(20)</td>
</tr>
<tr>
<td>Physical disability</td>
<td>72%</td>
<td>(88)</td>
</tr>
<tr>
<td>Mobility difficulty</td>
<td>39%</td>
<td>(35)</td>
</tr>
</tbody>
</table>

Total number of respondents that participated in survey: 122
Discussion

The overall response shows that there is limited awareness of behavioural, developmental and neurological disabilities and disorders. The response shows there is very little awareness of specific learning difficulties. However the response indicates there is slightly more awareness of behavioural difficulties although still not to a very large extent. Perhaps the increased awareness in this area is so because exhibitions of behavioural difficulties are quite an exploited area in teaching and are also quite common, especially in large classrooms where there are many distractions caused by noise, lack of teacher attention of individual pupils, overpopulated classroom sizes etc. Hayes (1997) identifies some of the key problems of teaching large classes as discomfort, control, attention, evaluation and learning effectiveness. This is a typical scenario where a teacher's classroom management skills come into play. As highlighted in this research, this is an issue that many teachers in Owerri West are confronted with and have to contend with on a daily bases. Onwu (1998) argues that the social demand for formal education has led to an upsurge in school enrolment with a dramatic increase in class size thereby resulting into high teacher – pupil rates. Overpopulated classrooms are considered to be uncondusive for both teachers and students in terms of continuous assessment marking and the ability to give individualized attention to students needing extra help (Federal Ministry of Education [FEM] 2005).
Respondents showed significant awareness of Down’s syndrome, a developmental difficulty, in comparison to dyslexia and dyspraxia which are hidden disabilities. This could be partly due to the visible nature of the disability and the more obvious effects Down’s syndrome has on learning. When disabilities are obvious it is quite difficult to ignore them. Acknowledgment of a disability attracts inclusive processes and sets them in motion. Although the extent to which these manifest in support provision is still subject to a number of factors all centered round culture, understanding, policy and funding.
Figure 6: Pie chart showing comparison of extent of awareness of neurological, developmental and learning disabilities

The chart below shows the distribution of respondents’ awareness of impairments and disabilities. Again the most obvious impairments and disabilities ranked higher than the more subtle disabilities shown in figure 5.

Figure 7: Distribution of awareness of impairments and disabilities
16% of the respondents identified HIV/AIDS as a disability. It is of interest to note here that HIV/AIDS is not always considered in legislation as a disability as it is subject to different countries’ perceptions of what disability is and who qualifies under legislation. While some argue that people with HIV/AIDS have disabilities caused by the illness that make them vulnerable in society and should therefore be considered in disability policy, others are of the view that the illness is disenabling and as such it should be classified as a disability. There is the difference here between HIV/AIDS making those affected vulnerable, hence the humanitarian consideration of the illness being included under protection laws, and the straight off classification of HIV/AIDS as a disability.

The statement made by the National Institute of Neurological Disorders and Stroke outlined below presents a very interesting take on HIV/AIDS as a disability.

AIDS is primarily an immune system disorder caused by the human immunodeficiency virus (HIV), but it can also affect the nervous system. HIV does not appear to directly invade nerve cells but it jeopardizes their health and function, causing symptoms such as confusion, forgetfulness, behavioural changes, headaches, progressive weakness and loss of sensation in the arms and legs, cognitive motor impairment, or damage to the peripheral nerves. Other complications that can occur as a result of HIV infection or the drugs used to treat it include pain, seizures, shingles, spinal cord problems, lack of coordination, difficult or painful swallowing, anxiety disorder, depression, fever, vision loss, gait disorders, destruction of brain tissue, and coma. (National Institute of Neurological Disorders and Stroke, 2010)

This could be contrasted with the status given to HIV/AIDS at the Convention on the Rights of Persons with Disabilities (United Nations, 2006) where it was reported that:
“Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others” (Article 1)

The Convention does not explicitly refer to HIV or AIDS in the definition of disability. However, States are required to recognize that where persons living with HIV (asymptomatic or symptomatic) have impairments which, in interaction with the environment, results in stigma, discrimination or other barriers to their participation, they can fall under the protection of the Convention.

States parties to the Convention are required to ensure that national legislation complies with this understanding of disability. Some countries have accorded protection to people living with HIV under national disability legislation. Other countries have adopted antidiscrimination laws that either explicitly include discrimination on the basis of HIV status or can be interpreted to do so. Such laws offer a means of redress against HIV-related discrimination in a number of areas, such as employment or education. (UNAIDS, WHO and OHCHR [Office of the High Commissioner for Human Rights] Policy Brief April 2009)

Again this could be compared with the Nigeria’s National Policy on HIV/AIDS (2003) where the overall goal of the Nigeria’s National Policy on HIV/AIDS is to:

Control the spread of HIV in Nigeria, to provide equitable care and support for those infected by HIV and to mitigate its impact to the point where it is no longer of public health, social and economic concern, such that all Nigerians will be able to achieve socially and economically productive lives free of the disease and its effects.

On ethics and human rights Nigeria’s National Policy on HIV/AIDS affirms that:

Persons living with or affected by HIV shall not be discriminated against on the basis of their health status with respect to education, training, employment, housing, travel, access to health care and other social amenities and citizenship rights.
It is based on the general understanding of HIV/AIDs as a global phenomenon that HIV/AIDS was included as an item in number 3 of the questionnaire. This was also done in order to ascertain the extent to which respondents identified HIV/AIDS as a disability. Interestingly only 16% of respondents identified HIV/AIDS as a disability. The significance of this though not investigated in depth in this study is of interest and begs the question whether the lack of identification of HIV/AIDS as a disability is due to societal understanding of HIV/AIDS or the extent to which the National Policy on HIV/AIDS sheds light on it or both. Also to what extent has HIV/AIDS been presented in Nigeria as disenabling for it to assume disability status? Such issues are subject to a society’s values, the understanding and interpretation of concepts, and the way these concepts are interwoven in the everyday lives of the people living in the society.
### Table 8

<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q 4</td>
<td>Do policy definitions play an important role in determining the social construction of disability?</td>
<td>27% (33)</td>
<td>47% (57)</td>
<td>7% (9)</td>
<td>15% (18)</td>
<td>4% (5)</td>
</tr>
<tr>
<td>Q 5</td>
<td>Are the definitions of disability portrayed strongly in education policies and provision for children with disabilities?</td>
<td>24% (29)</td>
<td>49% (60)</td>
<td>4% (5)</td>
<td>13% (16)</td>
<td>10% (12)</td>
</tr>
<tr>
<td>Q 6</td>
<td>Does specific lack of legislation relating to the education of children with learning difficulties/disabilities ultimately impact negatively on support provision for primary school children with learning disabilities?</td>
<td>47% (57)</td>
<td>32% (39)</td>
<td>8% (10)</td>
<td>9% (11)</td>
<td>4% (5)</td>
</tr>
<tr>
<td>Q 7</td>
<td>Do the extent to which definitions of disability vary and the extent to which they are elaborated in policy depend on socio-economic development in Nigeria?</td>
<td>44% (54)</td>
<td>39% (48)</td>
<td>4% (5)</td>
<td>11% (14)</td>
<td>1% (1)</td>
</tr>
<tr>
<td>Q 8</td>
<td>Are you of the view that issues regarding disability policy are not clearly defined in the ‘Nigerians with Disability Decree 1993’ in order to ensure effective implementation in primary schools?</td>
<td>36% (44)</td>
<td>38% (46)</td>
<td>7% (8)</td>
<td>11% (14)</td>
<td>8% (10)</td>
</tr>
<tr>
<td>Q 9</td>
<td>Do you think that the implementation of the national policy on special needs education has been poorly executed?</td>
<td>57% (69)</td>
<td>25% (30)</td>
<td>7% (8)</td>
<td>6% (7)</td>
<td>7% (8)</td>
</tr>
<tr>
<td>Q 10</td>
<td>Are you of the view that perceptions of disability are driven by cultural beliefs which manifest in disability rights?</td>
<td>20% (24)</td>
<td>35% (43)</td>
<td>9% (11)</td>
<td>26% (32)</td>
<td>10% (12)</td>
</tr>
<tr>
<td>Q 11</td>
<td>Does this influence the way disability issues are addressed in society?</td>
<td>25% (31)</td>
<td>42% (51)</td>
<td>11% (14)</td>
<td>16% (20)</td>
<td>5% (6)</td>
</tr>
<tr>
<td>Q 12</td>
<td>Do you believe that the understanding of disability in society today has historical roots which influence attitudes towards the disabled?</td>
<td>32% (40)</td>
<td>39% (47)</td>
<td>8% (10)</td>
<td>15% (18)</td>
<td>6% (7)</td>
</tr>
<tr>
<td>Q 13</td>
<td>Do you think that the Nigerian society and educators have little understanding of disabilities as a human rights issue?</td>
<td>42% (51)</td>
<td>29% (35)</td>
<td>6% (7)</td>
<td>18% (22)</td>
<td>6% (7)</td>
</tr>
<tr>
<td>Q 14</td>
<td>Do you think that the lack of guidance and services available to citizens regarding learning difficulties/disabilities hinders disability awareness in Owerri?</td>
<td>50% (61)</td>
<td>31% (38)</td>
<td>5% (6)</td>
<td>7% (9)</td>
<td>7% (8)</td>
</tr>
</tbody>
</table>

### Discussion

It was agreed by a large percentage of respondents that the interplay between policy and support provision of the disabled in society is deeply seated in societal understanding of disability. Over 70% of the respondents agreed that members of the society and educators in Nigeria have little understanding of disability as a human rights issue. This point corroborates a report by Lang and Upah (2008)
whose investigation highlighted that the Nigerian society, including senior government officials, perceives disability issues in terms of welfare and charity, and there is little understanding of disability as a human rights issue. The report noted that Nigerian disability groups have little comprehension of the social model of disability and there are hardly any services provided for disabled people especially in rural areas. The extent to which disability rights are inclusive or exclusive is dependent on the nature of government policy as this will invariably affect disability rights. Putman (2005) postulates that identity is a key issue in political debate; the transition from common disability experience to disability-related political agenda may be a long path for some, a shorter one for others. People experiencing disability often feel affinity, or even solidarity, with others who also experience disability (Longmore, 2000; Scotch, 1988). However Lang and Upah, (2008) argue that the absence of disability discrimination laws, lack of social protection, poor understanding of disability issues by the public, and poor access to rehabilitation services are some of the factors that have caused the disability agenda in Nigeria to suffer. The argument raised here is also reflected in the responses given to question 14 of the questionnaire. As a means to rectify this issue Lang and Upah (2008) suggest the collection of robust and reliable data, and an advocacy for the passage of the disability bill into law.
As a way forward in addressing human rights of the disabled in society; very recently, Lagos State, one of the 36 states in Nigeria, passed a disability bill in the bid to improve living conditions of people with disabilities in Lagos State. Balogun (2010) expands on this in the following extract below from the NEXT Report.

The Lagos State House of Assembly on Thursday passed a bill that will ensure equal opportunities for people living with disabilities.

The Lagos Assembly is the first to pass such bill in Nigeria and if passed into law, the State will be the first in the country to have such law; though, it took so long for the much expected bill to be passed, having been on the floor of the House since August 12, 2008.

The bill was passed after about two hours of deliberation on the report of the House committee (ad-hoc) on Youth, Sports, and Social Development which was presented by Babatunde Ayeni, the committee’s chairman.

While it was difficult for the lawmakers to fully agree with the provisions of the Bill because they were not comprehensive enough compared to
what obtained in developed countries, the House decided to pass the Bill, no matter how crude.

“The law can always be improved upon with time,” said Adeyemi Ikuforiji, the Speaker of the House.

The bill provided a window period of five years for owners of public buildings to make them accessible to people living with disabilities. Any physically challenged person that is denied access into any public building, within five years after the bill has been passed into law, can sue the owner of such building to the penalty of N5000 which will be paid to the person on daily basis until the owner of the building comply with the law.

The bill also provided social security for people living with disabilities who are 60 years and above. However, the amount to be received on monthly basis has not been decided. It was also argued that physically challenged people should be paid special salaries which will enable them live comfortably.

“While a normal person can rush to get a bus, a physically challenged person cannot and thus should be paid higher than normal person so he/she can afford to charter a taxi,” said Adebayo Osinowo (Kosofe).

The bill also stated that companies with 100 employees or more must dedicate a certain percentage of the fund earmarked for corporate social responsibility to disability-related activities.

Other states in Nigeria will benefit from passing similar bills as it will help create national awareness of disabilities especially if the bills are eventually passed into law as suggested by Lang and Upah, (2008). Unfortunately until a bill is passed into law there are not legal repercussions for people, companies or institutions who fail to comply with the stipulations mentioned in the bill. Government support is therefore desperately needed to back this up. Upon reflection, the questions that come to mind are: How will the bill impact on the more subtle invisible disabilities and learning difficulties like dyslexia? How will the bill be implemented in school inclusive practices? What will be the impact of the bill on support provision for people with developmental and learning disabilities in schools and in the workplace?
The Lagos State Disability Bill has been addressed from the standpoint of a social model of disability where the lack of enabling provision in society has been identified as areas in need of address. The bill passed is commendable as it is a pivotal point for greater things to come. However it is important to point out that emphasis of this bill is laid on physical disabilities. No reference was made to hidden learning disabilities which are equally disenabling. This begs the questions; could the lack of reference be associated with societal understanding of the scope of disability? To what extent can disability issues be addressed outside societal perceptions and comprehension of disability? An on-line article posted by News Desk (April 16, 2010) cited in AfricaLoft Media identified some implications of the Lagos State Disability Bill. One of the issues highlighted in the article was the question of how disability is defined and who qualifies under this bill? The failure of the media report to provide clarity on this was also stressed.

In line with this observation, the majority of respondents that participated in the survey agreed that policy definitions play a vital role in determining the social construction and societal understanding of disability. The way disability is understood by society and presented in policy is portrayed through various economic, social, industrial and educational structures.
Majority of respondents agreed that policy definitions play a role in determining who is labelled disabled in society, and that government constructions of who is disabled is a prerequisite for determining who is liable for support. According to Hahn (1985) disability is whatever policy says it is. This in effect reflects what educational support is rendered in schools and who receives it. A significantly large percentage of respondents were of the opinion that the definitions of disability are strongly portrayed in educational policy. With regards to Nigerian disability policy it appears that there is an identified need for an expansion of disability definitions to allow for a more representative and diverse interpretation of disability which will ultimately transcend into inclusive practices in schools. Barnartt and Scotch (2001) propose that the desire to modify public policies, in their language, aims, coverage, and funding levels, has driven much of the disability rights movement’s activity in the past.
It was also pointed out in the article referenced above that disability is a ‘catch-all’ term if the bill “ensures equal opportunities for people living with disabilities”, then it must be clearly stated medically and administratively, who is covered. This suggestion takes on a medical model approach to viewing disability. It was also reported that, unfortunately the media report on the bill, which at the time of posting was only available online does not offer much detail. Finally, it was identified that the report seems to focus more on people with limited mobility. Again, in my opinion this emphasises the somewhat limited understanding of disability issues in the Nigerian society.
Table 9

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Don't Know</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Q 15</strong> Do you have a teaching qualification?</td>
<td>97% (118)</td>
<td>3% (4)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Please specify your highest level of education below.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>See discussion section for an elaboration of responses given</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Q 16</strong> Do any of your learners have special educational needs?</td>
<td>46% (56)</td>
<td>50% (61)</td>
<td>-</td>
<td>4% (5)</td>
</tr>
<tr>
<td><strong>If yes please specify below what their special educational needs are.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>See discussion section for an elaboration of responses given</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Q 17</strong> Do any of the pupils you teach have extreme difficulties with</td>
<td>78% (95)</td>
<td>21% (26)</td>
<td>1% (1)</td>
<td>-</td>
</tr>
<tr>
<td>spelling, reading, writing and understanding concepts of taught lessons?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Q 18</strong> Are these pupils assessed for specific learning difficulties?</td>
<td>42% (51)</td>
<td>54% (66)</td>
<td>2% (3)</td>
<td>2% (2)</td>
</tr>
<tr>
<td><strong>If yes please specify below who assesses these pupils.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>See discussion section for an elaboration of responses given</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If yes please indicate what support is offered to these pupils after they have been assessed. <em>See discussion section for an elaboration of responses given</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Q 19</strong> Have you heard of the term dyslexia? If yes please explain what dyslexia means below. <em>See discussion section for an elaboration of responses given</em></td>
<td>6% (7)</td>
<td>78% (95)</td>
<td>5% (6)</td>
<td>11% (14)</td>
</tr>
<tr>
<td><strong>Q 20</strong> Do you teach dyslexic learners?</td>
<td>4% (5)</td>
<td>75% (92)</td>
<td>10% (12)</td>
<td>11% (13)</td>
</tr>
<tr>
<td><strong>Q 21</strong> Are you trained to support dyslexic learners?</td>
<td>3% (4)</td>
<td>72% (89)</td>
<td>7% (9)</td>
<td>16% (20)</td>
</tr>
<tr>
<td><strong>Q 22</strong> Have you ever undertaken any specialist training in the area of specific learning difficulties? If yes please specify below <em>See discussion section for an elaboration of responses given</em></td>
<td>4% (5)</td>
<td>84% (103)</td>
<td>4% (5)</td>
<td>7% (9)</td>
</tr>
<tr>
<td><strong>Q 23</strong> If your answer to the question 22 is ‘no’, would you like to receive training in the area of specific learning difficulties?</td>
<td>89% (108)</td>
<td>5% (6)</td>
<td>2% (2)</td>
<td>5% (6)</td>
</tr>
</tbody>
</table>
Discussion

The response to question 15 shows that a total of 70% of the respondents have achieved a degree or the NCE (Nigerian Certificate of Education) teaching qualification which according to the Nigerian policy is the lowest acceptable qualification primary school teachers should possess. Although only 2% of the respondents were identified as having the TC II (Teacher Certificate Grade II) qualification it is important to note that this qualification has been phased out. A more elaborate discussion on teacher training qualifications is seen in chapter five.

Figure 10: Respondents' level of qualification

Akinbote, (2007) is of the view that the quality of Nigerian primary school teachers needed to ensure the realisation of aspirations of primary school children has fallen below expectation. On quality assurance, Dr Aminu Ladan Sharehu Director General of National Teachers Institute (NTI) in Nigeria in an interview with Daily Trust (July 2, 2010) stated:
‘...if our teachers remain with Grade II or NCE certificates, certainly there is no way you can ensure quality. There should be a way in which to support those that have Grade II to update their knowledge to have NCE certificates... again, those who have the NCE certificates should be encouraged to have Bachelor of Education degrees and even Masters and PhD degrees. There is nothing wrong in having a number of our teachers in primary and secondary schools with Masters and PhD degrees. In fact, these are the kind of qualifications Nigeria needs for its teachers in primary and post-primary schools to ensure sound and quality education for the citizenry.’

I argue here that the possession of a teaching qualification or a degree does not necessarily ensure quality of education. Rather, it is the richness of the teacher training curriculum that should be the determining factor. Durosaro (2006) is of the view that ensuring a sound teacher education system is the first step towards teacher professionalism in Nigeria. Durosaro (2006) further argues that the quality of teacher education must be able to equip the teacher with the relevant basic and specialised knowledge and capability to achieve the nation’s educational goals.

**Q 16  Do any of your learners have special educational needs?**
*If yes please specify below what their special educational needs are.*

46% responded ‘yes’ while 50% responded ‘no’ to this question. 4% did not respond to this question. Not all the teachers that responded ‘yes’ to the question gave further elaborations on what the special needs of the identified pupils were. However, the majority of the responses given in answer to what the special educational needs of the identified pupils were showed a very poor understanding of the concept of special needs education.
Table 10

Q 16 Do any of your learners have special educational needs?

If yes please specify below what their special educational needs are.

<table>
<thead>
<tr>
<th>Responses given showing an understanding of special educational needs</th>
<th>Responses showing poor understanding of special educational needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 4 indications of visual impairment</td>
<td>• Need glasses</td>
</tr>
<tr>
<td>• 2 indications of epilepsy</td>
<td>• Need learning materials</td>
</tr>
<tr>
<td>• 2 indications of hearing impairment</td>
<td>• Need electricity</td>
</tr>
<tr>
<td>• 1 indication of Down’s syndrome</td>
<td>• Need computers</td>
</tr>
<tr>
<td>• 1 indication of mental health</td>
<td>• Need reading materials</td>
</tr>
<tr>
<td>• 1 indication of imbecility*</td>
<td>• Need books, writing materials</td>
</tr>
</tbody>
</table>

*An interesting choice of terminology again featuring in chapter six. Such terminology appears acceptable in the Nigerian context but is considered politically incorrect in the UK for instance.

A distinction should be made between the need for teaching materials and school infrastructure necessary for a conducive learning environment, and special educational needs which at its core focuses on disability and in effect emphasises the need for additional learning support and enabling learning environments. The former appears to be what the majority of respondents indicated as the special
educational needs of their pupils. Children with special needs have sensory, physical, developmental or learning disabilities and as such need support with schoolwork, reading, writing, developing social skills, etc. Ranges of support strategies are therefore needed to enable them to cope in the learning environment. It appears that the majority of the responses given refer to what the respondents feel is needed to enhance learning for all their pupils rather than an understanding of what special needs education really is. It is difficult to support what is not understood. If there is a poor understanding of special needs education it is unlikely that additional learning support provision will be addressed adequately.

Q 17

95% of the respondents responded ‘yes’ to having pupils who experience severe difficulties with spelling, reading, writing and understanding concepts of taught lessons. Difficulties of this nature, though not at all times, are indicative of dyslexia. For this reason learning opportunities have to be appropriate. Where learning opportunities are not appropriate it is difficult to assume that failure to learn is the result of a learning difficulty. This presents strong arguments for further investigation into the identification and diagnosis of learning difficulties. It is therefore very important that pupils suspected of having specific learning difficulties are identified and assessed so as to benefit from early identification and support. The problem however remains, how does one address what has not yet been identified as a disability/learning difficulty. The hidden nature of dyslexia poses a problem of identification of the subtle symptoms of the disability. Learning difficulty is often hidden so the casual observer may not
realise that difficulty in processing information can cause a person to cope differently from others in learning and living situations (Stage and Milne 1996). The fact that there is a lack of awareness of dyslexia and a lack of dyslexia specialists who have the expertise to diagnose and assess dyslexia compounds the problem. It is important that tutors are able to notice when a pupil has a learning difficulty. It is equally important that schools are aware of the effects learning difficulties have on literacy acquisition so as to make necessary inclusive adjustments to the curriculum.

Q 18

78% of the respondents indicated that some of the pupils they taught had severe difficulties with spelling, reading, writing and understanding concepts of taught lessons. Question 18 asked if these pupils were assessed for specific learning difficulties. 42% (51) responded ‘yes’ to this question but only 23% (28) gave further elaborations on who assesses the pupils and the support given to those identified.
The grid below shows some of the responses given by the respondents.

Table 11

<table>
<thead>
<tr>
<th>Who assesses</th>
<th>Teachers’ responses on support offered after being assessed</th>
</tr>
</thead>
<tbody>
<tr>
<td>The class teacher</td>
<td>Reinforcement</td>
</tr>
<tr>
<td></td>
<td>No support given</td>
</tr>
<tr>
<td></td>
<td>The teacher re-teaches the lesson</td>
</tr>
<tr>
<td></td>
<td>Extra lessons</td>
</tr>
<tr>
<td></td>
<td>Give more assignments and do corrections</td>
</tr>
<tr>
<td></td>
<td>Encouragement and counselling</td>
</tr>
<tr>
<td></td>
<td>Appraisal and reinforcement</td>
</tr>
<tr>
<td></td>
<td>Provision of learning materials</td>
</tr>
<tr>
<td></td>
<td>Visually impaired—place in front of classroom, segregation</td>
</tr>
<tr>
<td></td>
<td>The teacher re-teaches and retests</td>
</tr>
<tr>
<td></td>
<td>Encouragement</td>
</tr>
<tr>
<td></td>
<td>As a teacher I assess them, I aid them to write</td>
</tr>
<tr>
<td></td>
<td>By using 30 minutes to ask questions on areas not getting well</td>
</tr>
<tr>
<td>Headmistress/headmaster/teacher</td>
<td>Provision of text books/give assignments</td>
</tr>
<tr>
<td>Teacher/supervisors</td>
<td>Pay attention to them and support by giving text books</td>
</tr>
</tbody>
</table>

Again the responses given demonstrate a poor understanding of the intricate nature of specific learning difficulties and specialist support necessary to help pupils with specific learning difficulties cope with learning. None of the respondents mentioned that the pupils are assessed by a qualified specialist in the area of special educational needs or specific learning difficulties.

Q 19 – 22

These questions were aimed at eliciting knowledge about the respondents’ awareness of dyslexia and the extent of their knowledge. The terms dyslexia and
specific learning difficulty were used interchangeably because it was important to ascertain whether respondents knew what they claimed to know about SpLD/dyslexia and the extent to which they knew what they claimed to know.

Although 6% (7) answered ‘yes’ to question 19 which asked the respondents if they had heard of the term dyslexia, only 1 respondent attempted giving further elaboration of what dyslexia meant. In answer to the question – *please explain what dyslexia means* the respondent answered ‘*dyslexia means learning and forgetting easily.*’ The response given shows very little understanding of dyslexia.

![Q 19 Awareness of dyslexia](image)

**Figure 11:** Dyslexia awareness among primary school teachers in Owerri West
In response to question 20 which asked if the respondents taught dyslexic learners, 4% (5) indicated they taught dyslexic pupils. In response to question 21 only 3% of the respondents indicated they were trained to support dyslexic learners. Although there appears to be consistency in the claims, the fact that the respondents were not able to state what dyslexia is rings bells of untruthfulness. Perhaps the questions asked raised a fear of exposure even though the respondents were aware of the anonymous nature of questionnaires and were also assured that the information supplied will be treated in confidence.

In response to question 22, 4% (5) of the respondents indicated that they had undergone training in the area of specific learning difficulty. However, only one respondent indicated that the training they had received was a degree in Educational Psychology/Guidance and Counselling. Although the revelation of the very high percentage of respondents who did not know about specific learning difficulties is somewhat daunting it is however quite encouraging to know that a high percentage (89%) on the other hand expressed interest in receiving specialist training in the area of specific learning difficulties.
Figure 12: Teachers’ expressed interest in receiving specific learning difficulty training
<table>
<thead>
<tr>
<th>Q 24</th>
<th>In your opinion is the identification process of pupils with learning disabilities poorly done?</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>36% (44)</td>
<td>44%</td>
<td>8%</td>
<td>8%</td>
<td>3% (4)</td>
</tr>
<tr>
<td>Q 25</td>
<td>Do you agree more attention should be paid to the screening, identification and assessment process of learning disabilities in order for pupils with learning difficulties/disabilities to be adequately supported and included in the educational system?</td>
<td>70% (85)</td>
<td>29%</td>
<td>1%</td>
<td>1%</td>
<td>-</td>
</tr>
<tr>
<td>Q 26</td>
<td>Do you think the teaching and learning curriculum in universities and colleges of education is not broad enough to adequately address a wide range of learning disabilities found in classrooms?</td>
<td>31% (39)</td>
<td>41%</td>
<td>7%</td>
<td>16%</td>
<td>4% (5)</td>
</tr>
<tr>
<td>Q 27</td>
<td>If this is the case do you think that graduate teachers are sometimes not adequately trained to meet the needs of pupils with learning difficulties/disabilities?</td>
<td>41% (50)</td>
<td>33%</td>
<td>9%</td>
<td>13%</td>
<td>4% (5)</td>
</tr>
<tr>
<td>Q 28</td>
<td>Do you think primary school teachers in the rural areas in Owerri are at a disadvantage with regards government funding for teacher training?</td>
<td>41% (50)</td>
<td>30%</td>
<td>5%</td>
<td>11%</td>
<td>13% (16)</td>
</tr>
<tr>
<td>Q 29</td>
<td>Does lack of government funding impact negatively on opportunities for in-house teacher training and professional development through workshops and seminars etc?</td>
<td>48% (58)</td>
<td>47%</td>
<td>2%</td>
<td>3%</td>
<td>1% (2)</td>
</tr>
<tr>
<td>Q 30</td>
<td>Is inadequate training in the area of learning difficulties/disabilities an issue for teachers?</td>
<td>32% (39)</td>
<td>48%</td>
<td>4%</td>
<td>8%</td>
<td>7% (9)</td>
</tr>
<tr>
<td>Q 31</td>
<td>If inadequate training is an issue, does it impact negatively on inclusive practice in primary schools?</td>
<td>37% (45)</td>
<td>47%</td>
<td>5%</td>
<td>11%</td>
<td>1% (1)</td>
</tr>
<tr>
<td>Q 32</td>
<td>Does inadequate knowledge of specialist teaching and learning strategies place children with learning difficulties/disabilities at a disadvantage?</td>
<td>47% (57)</td>
<td>36%</td>
<td>4%</td>
<td>11%</td>
<td>2% (2)</td>
</tr>
<tr>
<td>Q 33</td>
<td>Do you think that in general there is little awareness of learning difficulties/disabilities and its effects on learning among educators in Owerri?</td>
<td>38% (46)</td>
<td>49%</td>
<td>7%</td>
<td>1%</td>
<td>5% (6)</td>
</tr>
<tr>
<td>Q 34</td>
<td>Should the Federal Ministry of Education engage more in research in the area of learning difficulties/disabilities in order to provide useful statistics on the percentage of people affected in Nigeria in general?</td>
<td>72% (88)</td>
<td>23%</td>
<td>2%</td>
<td>2%</td>
<td>-</td>
</tr>
<tr>
<td>Q 35</td>
<td>Do you think the educational system in Nigeria as a whole is vulnerable to changes in disability issues?</td>
<td>34% (42)</td>
<td>41%</td>
<td>7%</td>
<td>13%</td>
<td>4% (5)</td>
</tr>
<tr>
<td>Q 36</td>
<td>If you agree do you think this vulnerability is linked to financial constraints?</td>
<td>42% (51)</td>
<td>32%</td>
<td>9%</td>
<td>10%</td>
<td>7% (9)</td>
</tr>
</tbody>
</table>
Discussion

The results of the questionnaire show that a large proportion of the respondents agreed that the identification process of pupils with learning difficulties is poorly addressed and that pupils with learning difficulties will benefit from screening, identification and assessment as this will improve inclusive practices. Reschly (1996) proposes that the two main purposes of identification and assessment of students with disabilities are to determine whether they are eligible for special education services and, if they are eligible, to determine what these services will be. It was also agreed to a large extent that the teacher training curriculum needs to be more embracive so as to include a wide range of learning disabilities found along the learning difficulty spectrum. Presently this does not seem to be the case and as such a large proportion of respondents were of the opinion that teachers are not adequately trained to support the needs of pupils with learning difficulties.

The lack of government funding was identified as problematic by over 70% of the respondents who agreed that this has negative impacts on opportunities for continuing professional development. Many respondents agreed that learning difficulty training was important as it will help eliminate disenabling barriers and enhance existing inclusive practices. A report by VSO (2006), states that teachers play a pivotal role in delivering education reforms as they are both recipients and deliverers of change and are therefore better placed and better informed than any other stakeholder about what does and does not work in educational policy. Government funding for training is therefore needed because it allows teachers who might not be able to self fund their own training gain expertise in identified
areas of need required to deliver change and improvement of educational practices. The majority of the respondents however agreed that the nation is vulnerable to changes in disability issues and that this vulnerability is linked to financial constraints.

Over 90% of the respondents were of the opinion that it was necessary for the Federal Ministry of Education to provide useful statistics on the percentage of people who have learning difficulties in Nigeria. Evidence-based practice emphasises the importance of assessment, planning, delivery, and evaluation of services based on sound research results (Parahoo, 2000). As noted by Okonjo-Iweala and Osafo-Kwaako (2007), the lack of statistical information in many African countries is, “both a symptom and a cause” of underdeveloped programs. The disability agenda in developing countries has not yielded adequate results partly due to the paucity of statistical studies to gather reliable data, poor dissemination of research results, and inability to use the available data optimally (Amusat 2009). This represents the current situation in Owerri West and in Nigeria as a whole.

4.8 Conclusion

This chapter has hinted at aspects of interest that have laid a foundation for understanding issues surrounding the lack of dyslexia awareness in Owerri West. Subsequent chapters lay even more emphasis on issues highlighted in this chapter and in doing so pull together a more interpretive picture of the phenomenological experiences and interpretations of the members of the society used for the purpose
of this study. Chapters five and six discuss in detail the findings derived from data gathered through observations and interviews. Disability awareness issues are explored in further detail in an attempt to bring to limelight the impact the lack of dyslexia identification has on teaching and learning in primary schools in Owerri West.
Investigating the truth about what is, and what is not is not so simple. It calls for empirical judgement based on facts and opinions and often involves a collision of different realities.
5. Observations

Findings and Discussion

5.1 Rationale for the use of observations

Understanding how pupils with special needs experience the world must involve an examination of the context within which their interaction takes place (Barton 1997). Observation as a method of data collection enables the investigator to accept a role within the social situation that is studied and permits easy entrance into the social situation by reducing the resistance of the group members, decreasing the extent to which the investigator disturbs the ‘natural’ situation, and permitting the investigator to experience and observe the group’s norms, values, conflicts and pressures (Hargreaves 1967).

Observation entails an invasion of the social world of those being observed and relaying information gathered to the outer world. It was important to consider ethical implications of interacting with the participants, especially as the ultimate intent is to use information gathered in a wider context. It was therefore important for me as a researcher to be mindful of the role of power relations and of how this could influence perspective and in doing so shape interpretations and the outcome of the research. The power issues associated with this process cannot be understated as such, as researcher I needed to be prepared for the potential tensions that present themselves during the process of observation. It was
therefore important that I adopted a candid approach during interactions within the society studied. It was equally important that transparency was maintained and that the participants were aware of the intent of the research, reasons for the observations and the possible impact of the research on the society investigated. As one of the advantages, transparency served to eliminate any elements of deception and at the same time gave the participants the opportunity to disengage with the study at any point during the period of observation.

The study began with the assumption that dyslexia exists in primary schools in Owerri West but that there was a problem of the lack of awareness of its existence. Presumptions have a bearing both on how we look at problems and on how we look at existing and available sets of techniques and at knowledge in general (Arbnor and Bjerke 1997). Based on this assumption, the observations were carried out to investigate how the lack of dyslexia awareness affects teaching and general inclusive practices in primary schools in Owerri West. The research questions that ultimately led the investigation were:

1. What are the forces that drive inclusion in the educational system and how has this impacted on dyslexia awareness and curriculum planning in primary schools in Owerri West, Imo State Nigeria?

2. To what extent are the conceptions and perceptions of learning difficulties/disabilities as a whole responsible for the lack of dyslexia awareness in Nigeria and how has this impacted on dyslexia awareness in primary schools in Owerri West Imo State Nigeria?
The main area of interest that guided the observation process was the impact lack of dyslexia awareness has on teaching and learning and how learning support is addressed in the primary schools. Other specific areas of interest for observational purposes were: the learning environment; approaches to teaching; teaching resources and the use of assistive technology. Carrying out observations required that I became part of the process by associating myself with the groups studied. The process also involved making notes of observed practices and then reflecting on aspects of significance. Approaching the observations this way enabled me to arrive at more comprehensive conclusions and interpretations of the study. I deemed it necessary to encourage teachers’ verbal input during the process as this enabled me to make more sense of what was being observed.

Observations for the study took place in six primary schools located in the three wards in Owerri West. Although I found observations as a method of data collection time consuming and required a high level of commitment. As a researcher there was a strong need for me to indulge in this method of research as it created the opportunity for me to have personal and direct contact with the groups studied. It also created the opportunity for me to acquire direct insight into the issues of interest relevant to the research. The process enabled me to investigate the disparity between what is said on paper to be the practice and what is actually practiced in the area of support provision of pupils with learning difficulties, or the lack of it as it were.
5.2 Findings

The findings of the observations carried out are very revealing. Although in this case observations as a method of data collection did not in itself supply straightforward answers as to why there is a lack of dyslexia awareness in Owerri West, Imo State, it served as a platform for further investigation in the area and in many ways helped guide and influence the interview questions. The observations however did very clearly portray the impact lack of dyslexia awareness has on approaches to teaching and inclusive practices in the primary schools investigated.

In summary, observations carried out identified the following findings:

Table 13

<table>
<thead>
<tr>
<th>Positive areas identified</th>
<th>Deficient areas identified</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Teachers were passionate about the pupils they taught.</td>
<td>• Lack of specialist training needed to support learners with learning difficulty/disability.</td>
</tr>
<tr>
<td>• Teachers showed willingness to help pupils who had difficulties with learning although applied support strategies did not always appear to be effective.</td>
<td>• Lack of dyslexia awareness and other learning difficulties along the specific learning difficulty spectrum.</td>
</tr>
<tr>
<td>• Pupils appeared self motivated to learn despite the lack of teaching and learning materials.</td>
<td>• Lack of a broad range of instructional materials to meet diverse needs of the pupils.</td>
</tr>
<tr>
<td></td>
<td>• Lack of funds to provide basic instructional materials and infrastructure.</td>
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<td></td>
<td>• Limited inclusion awareness in the schools.</td>
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<td></td>
<td>• Lack of assistive technology in classrooms.</td>
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<td></td>
<td>• Inadequate training in the area of assistive technology needed to support learning.</td>
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<td></td>
<td>• Lack of knowledge of ICT among teachers.</td>
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5.3 Discussion

Does dyslexia exist in every classroom? A socially constructed viewpoint

The simple response to the question above could be yes, as extensive research in the area and available statistics conducted in various countries suggest so. Also arguments taken from a neuro-diverse standpoint equally suggest such. However there are implications for such straight forward answers because one could argue that the existence or non-existence of something could be based on societal constructions of what is known to exist and what does not exist within a given society. The findings derived from the observations carried out in the primary schools that participated in the study quite clearly demonstrate that dyslexia as a terminology is presently not known in the schools investigated. This begs the question: how does one identify with an idea or notion that is not seen as a reality in a given society? If terminology has not yet been adopted in a system and does not feature in the curriculum or legislation does this essentially rule out its existence? This chapter does not supply the answers to these questions but in many ways builds on the presumption that dyslexia does exist in primary schools in Owerri West but unfortunately educators have not yet identified with the terminology. As such the issue is not addressed. Chapter six however elaborates on this problem, which is one of lack of identification and labelling that has caused the lack of address of dyslexia awareness issues. Chapter six elaborately addresses perceptions of the problem from the viewpoint of respondents.

Problems of identification could be said to be caused by the invisible nature of dyslexia as a learning disability. It was noted that the teachers in the primary
schools that participated in the observation process were not aware that they had dyslexic learners because the term ‘dyslexia’ was unknown to them and since the language did not exist in their instructional vocabulary the learning difficulty was equally unknown. Language is associated with progress and is a powerful tool that could be used to create enlightenment. Where terminology associated with a concept does not exist there is less a chance of progressive enlightenment in that area. Giles and Wiemann (1993) propose that the manner in which language is used (or I add, the lack of it) has a profound impact on how we perceive social phenomena. The four walls of a classroom can be considered a miniature society where practices exhibited in the classroom are reflections of what is practiced in a broader society. In other words, the beliefs, practices and knowledge dominant in the broader society are the very ones that exist in the reality of the school, its classrooms and the realistic practices that govern and influence the curriculum. An understanding of language is essential for the understanding of the reality of everyday life (Berger and Luckmann 1966). Language cannot exist outside reality. What is known to exist by a society is what is considered reality for that society. Concepts that do not conform to socially constructed ideas of a society or that are not part of its practice, active language or terminology may not be grasped and may be not bear significant credence. In such a situation a society may need to undergo a process of orientation and awareness before it becomes part and parcel of the society’s constructed notion. Therefore if the term ‘dyslexia’ is not understood or recognised by society it therefore follows that there generally will not be a need to address it, let alone attach any importance to it in the school curriculum. Knowledge cannot exist outside reality. However, if awareness is created there stands a chance of recognising what ‘is’ that is, what silently existed
(dyslexia) which before awareness was created was not assigned a name (no identifiable terminology/language) and was therefore ignored or not recognised.

Berger and Luckmann (1966) propose that language brings with it information and misinformation, distortion, and social disparities in everyday interaction. Berger and Luckmann further argue that the everyday life we know is not something that has meaning, or even existence, outside of social contexts. It is, rather, something that is meaningful to us primarily by way of others. Schutz (1967) in agreeing with this, states: “only a very small part of my knowledge of the world originates within my personal experience . . . the typifying medium par excellence by which socially derived knowledge is transmitted is the vocabulary and syntax of everyday language.” In effect, knowledge is not only socially derived but it is also shared through individuals’ interactions and communications with others. According to Acemoglu et al. (2009), individuals form beliefs on various economic, political and social variables based on information they receive from others, including friends, neighbours and co-workers as well as local leaders, news sources and political actors. This suggests that beliefs and practices are a product of transmitted information from forceful agents such as the school, media, educational stakeholders and policy makers.

The lack of awareness of dyslexia in Owerri West meant that none of the schools that partook in the research had a dyslexia identification process in place to determine the number of pupils affected. As a result the lack of identification meant that there were no observed reasonable adjustments in place to limit significant restrictions to learning of those affected.
It is vital, however, as previously mentioned in chapter one, to stress that the lack of identification of dyslexic pupils is not a justifiable reason to suggest the non-existence of dyslexic children in the schools that participated in the study rather I argue it testifies the gap in the educational system that does not at present allow for a defining, classifying and diagnosing process. Even though none of the pupils in the classrooms observed had been identified as dyslexic, as a researcher it was important to know if the teachers thought that some of their pupils exhibited considerably more difficulty than others in processing information. It was quite revealing that a significant number of pupils were identified by their teachers as having significant difficulties with reading, writing, spelling, short-term memory retention, and understanding instruction. It was pointed out that this affected their level of confidence, achievement and performance. Interestingly the teachers pointed out that despite all their efforts to help these students, their performance did not seem to improve. This presented a typical scenario of learning difficulties associated with dyslexia where traditional teaching methods quite often have little impact on the enhancement of learning. This highlights the need for dyslexia training and the need for specialist in-class support.

It is important to reiterate here that it was revealed that there was no form of dyslexia assessment, diagnosis and support practiced in the schools that participated in this research and as such none of the children in the primary schools used in the study were identified as dyslexic. However, my job role as a dyslexia specialist, coupled with the experience of assessing, diagnosing and supporting dyslexic learners placed me in a position where I was able to spot the signs indicative of dyslexia that were exhibited by some of the pupils.
A child who is dyslexic will attempt to use made-up coping strategies in the bid to mask their inabilities and shortfalls. However, these do not eliminate the feeling of difference, despair, embarrassment, inferiority, isolation, loneliness and stress, all of which attribute to making the learning process a very difficult and unfavourable experience. Learning support for children with dyslexia, where it exists, will help enhance learning and make it a more pleasurable experience. Unfortunately, because of the lack of dyslexia awareness in Owerri West, many learning needs of children with unidentified dyslexia are not being catered for by the educational system and such children are left to their own devices. As a result, learning is a laboured process for them. This raises questions as to how much of their full learning potential is achieved under such learning conditions. Observations revealed that the children believed to have more difficulties than others in grasping taught lessons exhibited poor reading skills when asked to read aloud from their English text books. The children in question had difficulty decoding words that were appropriate for their age. I found it rather daunting that the teachers lacked dyslexia awareness and specialist teaching strategies that could enhance word recognition. As I sat through lessons it became more obvious the difficulties unidentified dyslexics will experience trying to cope with the conventional teaching methods. Sir Jackie Stewart, President of Dyslexia Scotland stressed that:

“The early recognition by teachers of children with learning difficulties is absolutely paramount; they must be identified and assessed. All teachers require the skills and particularly the disciplines of consistent practice to assist children suffering from dyslexia, or any other form of learning difficulty. Unidentified dyslexia can cause extraordinary damage to a young person’s life and can remove any possibility of them reaching their true potential.” (Cited in Engage for Education June 2010)
While poor reading skills is not the only presiding evidence of dyslexia, it is however one of the major difficulties that is indicative of dyslexia. It has been suggested that 70 – 80% of all people with poor reading skills have dyslexia and 75% of all children that show poor reading skills early in education can be helped to overcome these difficulties (Dyslexia Health 2009). If one uses such statistics as evidence to arrive at conclusive suggestions about the existence of dyslexia, it could be implied that dyslexia may well exist in almost every classroom and those affected will benefit from learning support. It is quite clear then that the approach that needs to be taken for dyslexic learners to benefit from the educational system is one that includes undertaking in-depth research in Nigeria as a whole to ascertain the exact percentage of the population affected. This should be followed by mass awareness through government involvement through legislation, policy making, effective policy implementation, innovative practices in education and specialist teacher training.

Discussions pertaining to provision for children with learning difficulties should be presented as an issue of upmost importance as there appears to be a lack of input by policy makers and the forces that drive the curriculum with regards to how recognition at policy level and support provision in schools could benefit those with the more subtle learning difficulties/disabilities like dyslexia. The call to educate children with disabilities in Nigeria could be traced back over 60 decades. According to Okeke (2000), the response to the educational needs of people with disabilities in Nigeria may have begun as far back as 1954 when the then Western Region’s Education law stated that special schools should be made available for children with difficulties. The 1977 National Policy on Education in
Nigeria was the turning point in Nigeria’s special education programme (Garuba, 2003). The policy emphasised giving concrete meaning to the idea of equalising educational opportunities for all children; their physical, mental and emotional disabilities notwithstanding. Though disability recognition in Nigeria is not very emphatic in some areas, especially where it concerns invisible disability, one can still anticipate recognition of dyslexic learners in the future. It is hoped that Nigeria will someday be on par with many western nations on equal opportunities and access to learning support. However, until adequate awareness is created the fate of many children in primary schools who have undiagnosed dyslexia may remain grim.

Further discussions on findings from the observations which are discussed in detail below in the following subheadings shed more light on the extent to which the lack of awareness of dyslexia has impacted on teaching, learning, curriculum implementation and inclusive practices in these schools. It further stresses the implications this has for the broader society.

5.4 The environment

Quality education is education that meets the needs of the learners. One of the first steps to achieving quality education is ensuring that education takes place in a suitable environment. The National Education Policy document advocates access to education of children with special needs in conducive and less restrictive environments in order to enable them achieve self-fulfilment (Ajuwon 2008), but to what extent could one argue that the policy advocacy is a reality in primary
schools in Owerri West? And to what extent is it a realistic attainment in primary schools where government and private funding is lacking?

It was observed that the learning environment and available learning resources in the primary schools investigated were not tailored to meet the needs of pupils who have learning needs indicative of dyslexia. The Educational Reforms Act of 2007 (Federal Ministry of Education [FME], 2007) clearly highlighted the need to:

‘...improve the quality of instruction in Nigerian schools, provide enriched learning environment, provide more access to education, and provide the students with knowledge and skills necessary for the 21st century work place, as the motivating factor for the educational reforms.’

The Education Reforms Act pin-points necessities that form the fundamental basis needed to produce a literate society that can compete with others. A suitable learning environment is needed where children with disabilities could have equal opportunities to access education, and what better environment is there to teach skills necessary to compete in the global world than the school? There is no doubt quality education for all is desired but it is how a system sets out to achieve this and actually achieving what is desired that matters. Poor learning environments deter academic performance levels of pupils more so for the child with unidentified dyslexia who is likely to have significantly greater difficulty in learning than the majority of children their age. Learning spaces should be in harmony with modern teaching methods and technologies. This will encourage better interaction between teachers and learners, and between learners themselves.
Education buildings are an essential part of the enabling environment for learning. Abimbade (1999) states that in an investigation by UNESCO and UNICEF on schooling conditions in 14 African and Asian countries in 1995, it was found that in 75% of the schools surveyed, 35% to 90% of the school buildings required major repairs, maintenance work or re-building.
Similarly, Adepoju and Fabiyi (2007), citing three demographic studies, highlighted serious shortcomings of past educational policies in the primary education sector in Nigeria which revealed, among other things poor learning conditions. Also highlighted in the demographic studies was that 12 percent of primary school pupils sit on the floor, 87 percent of classrooms are overcrowded, while 77 percent of pupils lack textbooks. They also noted problems associated with poorly motivated teachers as well as lack of community interests and participation in management of schools.

It was observed that the majority of learning environments in the primary schools visited in Owerri West were not conducive and were characterised by dilapidated buildings and class population sizes that were too large. Some of the causes of overcrowding in classrooms could be attributed to budgetary cuts, relocation of people to a particular area or the lack of space. However, in the case of the schools that were investigated, overcrowded classrooms were as a result of too few classrooms and the lack of funding necessary to build more.
Overcrowded classrooms tend to exhaust teachers therefore it is best that smaller numbers are maintained to ensure that the teacher is aware of the needs of individual pupils. This will also help check quality of learning and extent to which learning takes place. Since more is attainable in small classes it is important that the ratio of teacher to student is kept low. It was noted that classrooms were arranged in accordance to traditional classroom seating positions which tend not to lend itself favourably to dyslexic learners who tend to work better in small groups.

Figure 15: Image showing an overcrowded classroom with a painted wall used as a blackboard.
The teachers that participated in the study agreed that the physical environment contributes either negatively or positively to a child’s performance in school and
can greatly influence academic performance. The teachers revealed that the school environment which they consider very significant to the learning process is constantly neglected by the government and as such the school buildings are in constant need of refurbishment. The EFA Assessment: Country Reports: Nigeria (2000) reported a similar situation of inadequate teaching and learning materials and infrastructural facilities in Nigeria as a whole. Sadly it was observed that due to the nonconductive nature of the classroom buildings in primary schools in Owerri West some lessons are had under trees. The disadvantage of this is that it encourages inattentiveness among pupils and impedes concentration. Conducive learning environments are essential to educational achievement. For education in school to be effective, the environment needs to allow the pupils space and time to interact in the learning and teaching process.

Heyneman (1980) proposes that:

At the minimum a school is acceptable if it can provide a place for students to work without the danger of a roof collapsing; if neither wind nor rain sends students into a corner for protection; if there is a place for each to sit down, a place to write, material to write with, and a certain minimal number of maps, charts, and reference books from which to derive information.

Adekola (2007) stresses that:

Despite recent efforts to upgrade schools, the conditions in which teaching and learning takes place are well below any minimum standard for effective teaching and learning. School infrastructure, furniture, books and materials are still in short supply. School profile data collected in 2003 indicated that 80 percent of the primary schools lacked basic school infrastructure (adequate classrooms, school furniture, blackboards); and that 60 percent of the schools lacked adequate curriculum modules and textbooks.
The illustration below shows the poor environmental conditions many primary school children in Owerri West are subjected to.

Figure 18: Image showing a classroom of a primary school in Owerri West in need of refurbishment with no doors and windows.

As Obong et al (2010) point out, a school’s location (and the classrooms) can determine to a large extent the stability of the student’s mind for academic readiness. Because information is power as well as the key to empowering learners to understand the world around them, it is of paramount importance that appropriate accessibility to information takes place in a suitable learning environment. In the same vein, the way information is presented and the environment in which it is presented goes a long way in determining how much information is retained and the extent to which it is used. A dyslexic learner needs to be able to organise their thoughts and concentrate in a learning environment without distractions. The illustration overleaf is a typical setting in some of the primary schools visited. It shows inevitable distractions caused by having two parallel lessons going on simultaneously. An environment such as this is prone to cause distractions and inhibit learning.
Figure 19: Image showing two separate classrooms with no walls separating them where lessons are carried out simultaneously (see far left).

The impact inadequate learning conditions will have on a child with unidentified dyslexia cannot be overemphasised. Pupils with learning difficulties are subjected to the same social, environmental and cultural barriers that pupils without learning difficulties are exposed to. Every child matters and has the right to basic learning needs therefore the point raised here is not peculiar to dyslexic learners alone. However, one cannot help but imagine the accelerated effect such unfavourable learning conditions will have on a child whose learning difficulty has not been identified and as such their learning needs are not being catered for in schools. The existence of dyslexic learners in a school needs to be a major aspect that calls for investigation. Where there is a lack of identification and recognition of a learning disability/disability there generally appears to be a lack of the basic needs to include the learners concerned in the school system.
5.5 Inclusive classroom practice

Inclusion or inclusive education can be interpreted as the philosophy and practice for educating students with disabilities in general education settings (Bryant et al. 2008; Lipsky and Gartner, 1997; Rogers, 1993; Salend, 2001). Although the children with unidentified dyslexia are being educated in the general setting I argue that since they have not been identified as learning disabled, they have not been included. Because the existence of their learning difficulty is not known there is no available support provision in place to cater for their needs. From a social model of disability stand point this situation is disenabling. It is the disenabling conditions in this situation that makes dyslexia a disability (Cooper 2006 and Cooper 2010).
The inclusive education paradigm in Nigeria (like that of other countries) has evolved out of the realisation that all children have the right to receive the kind of education that does not discriminate on the grounds of disability, ethnicity, religion, language, gender, or capabilities (Ajuwon 2008). The level of understanding of what inclusion entails and the method of implementation are the two aspects that determine the success of inclusive practice. In recent years, the debate about inclusive education has moved from high-income countries like the United States and Canada to a low-income country like Nigeria, where an official policy on educating children and youth with disabilities alongside their peers without disabilities in ordinary schools has been adopted (National Policy on Education, 2008). The debate continues among educators, local, state and federal policy makers, parents, and even people with disabilities in Nigeria regarding the efficacy of inclusion and the inevitable restructuring of general education that will need to occur to make learning meaningful in an inclusive environment (Ajuwon 2008). Ajuwon further states that the perception has been that the debate has resulted in pressure greater than ever before for most students with disabilities to access the general curriculum and attain the same standards as typical students.

Ajuwon (2008) proposes that for the child with a disability to benefit optimally from inclusion, it is imperative for general education teachers to be able to teach a wider array of children, including those with varying disabilities, and to collaborate and plan effectively with special educators. Ajuwon (2008) further stresses that before inclusion is adopted as a blanket policy, there is need to document the number, characteristics and specific geographic location of students required to be in inclusive programs, the number of specialists who will support
their instruction, the necessary amount of in-class and out-of-class collaboration between special and general education teachers, and the optimal type and extent of support from ancillary staff. International research suggests that it is especially the acceptance of learners with intellectual disabilities that seems to raise the most sensitive issues for teachers within inclusive classrooms (Engelbrecht et al. 2003).

The Nigerian education system is in the midst of a major reform, with the policy to include students with special needs in regular classrooms (Ajuwon 2008). However, inclusion without adequate provision is questionable and as Smith (2007) points out ‘inclusion requires a commitment to move essential resources to the child with a disability rather than placing the child in an isolated setting where services are located.’ Failing to accommodate the environmental and accessibility needs of persons with disabilities in the society will inevitably inhibit their participation in educational, social, recreational and economic activities (Harkness and Groom, 1976; Steinfeld et al. 1977).

5.6 Quality of classroom teaching and learning

Education plays a meaningful role when the satisfaction of learning needs is connected to social requirements, when teaching is relevant and fully assimilated, and when learning is effective and sustained (Rachman 2003). Educational practices are typically linked to an assumptive network, that is, a set of preliminary beliefs about the nature of human beings and their capacities, however these assumptions are not be void of what society and policy dictates about quality of education. Common et al. (1988) note that:
Prevailing notions about quality in education are influenced by a range of societal circumstances and pressure. A further complication in defining quality is the considerable cultural diversity that characterizes our society. It is necessary to recognize that there are simultaneously competing interpretations of quality in education and areas of agreement and consensus. The areas of agreement provide the basis for a “working consensus” on the goals of education but that consensus will always be “ragged around the edges.”

The national coordinator of National Parent-Teacher Association of Nigeria (NAPTAN), Alhaji Babs Animashaun, recently identified inadequate funding and policy inconsistency as the two major challenges that have lead to a decline in the standard of education in Nigeria (Daily Trust, August 2010). The definition of quality in primary education is affected by constantly shifting social and educational circumstances, and inevitably controversial in the sense that it is subject to competing interpretations by different members of society (Common et al. 1988). Ajimoke (1976) argues that there is no common standard for the definition or assessment of quality in education. Quality assurance has different perceived levels or standards based on expectations of fulfilment of a school. In other words, the assessment of the quality of any educational system depends on the goals or objectives that have been put in place to guide the operations of schools within a particular socio-cultural system (Asagwara 1997). According to Coombs (1985), what is often said about quality in education tends to be rooted in individual judgments or points of view, which invariably emanate from the observers’ particular background and experience, social philosophy, values, and pedagogical biases. As a researcher I went into the learning environment with preconceived notions of what I deemed quality teaching. Though not extensive, my notions of quality teaching centred around the knowledge of subject area, the incorporation of various learning styles into teaching and the use of ample
relevant teaching and learning resources as well as assistive technology to enhance learning. It was observed that although the teachers exhibited good knowledge of their subject area, teaching resources used during lessons were limited to blackboards, a few text books, and few charts on classroom walls. Although standard teaching methods do not usually incorporate teaching styles appropriate to dyslexic students (BRAIN. HE, 2006) in my professional opinion such limited instructional resources used in classroom teaching impact negatively on the quality of teaching especially where dyslexic learners are concerned. Although it was noted that teachers did make commendable efforts to address the pupils’ learning needs, it was apparent that the lack of awareness of learning difficulties/disabilities and the lack of knowledge of how to support pupils with such needs placed pupils who exhibited some form of learning difficulty at a disadvantage.

As mentioned earlier, personal views and opinions on quality of teaching are subject to individual ideas of what constitutes quality teaching. Having said that, the majority of pupils appeared to respond well to their teachers and the lesson taught. They appeared to grasp ideas and concepts quickly. There were, however occasions where it was clear that some pupils seemed to struggle and lag behind in tasks given during the course of the lesson. My initial thoughts centred round the need for these pupils to have one-to-one support sessions and also work closely with in-class support staff. The support given to these pupils during the lesson was rather generic and lacked elements of specialised support strategies that will help the learners cope with their difficulty. Support given took the form of re-explanations of instruction and class tasks. From my observations the nature
of some of the difficulties these pupils had in learning were typical of dyslexic learners. The way support for these pupils was handled presented a clear indication of teachers’ lack of awareness of specific learning difficulties and its impact on learning. It also demonstrated the lack of awareness of how specific support strategies that can be applied to enhance learning. This in a sense begs the question: to what extent could it be argued that the teaching is of high standard if the needs of every pupil irrespective of their abilities and capabilities are not met? Abimbade (1999) proposes that instructional designers and teachers must concern themselves with the selection of appropriate strategies to teach the required skills; such selection of lesson delivery strategy is crucial to effective learning.

It was however very clear that the teachers all exhibited good levels of creativity and enthusiasm in teaching even though they had very few teaching resources to work with. The lack of suitable teaching materials could impede the quality of the lesson, however the pupils and teachers did not show that it placed them at a disadvantage; perhaps this was so because it was the normal practice for them. Although the presence of more sophisticated teaching material will enhance learning, it did not appear to be regarded a dire problem during the lessons and as a result it did not come across during the observations as a noticeable disadvantage to the teachers and most pupils. This is not to say that the pupils will not benefit from more modern and relevant teaching materials, rather the fact that they did not appear to be phased by the lack of teaching materials could suggest that teachers are used to the constant lack of teaching materials such that it has gradually become the norm in classroom teaching. The fact that teachers and
learners cope with unfavourable conditions does not support the fact that more favourable conditions are none the less desirable. Even though the teachers appeared to cope well with very little teaching resources, discussions with teachers revealed that the lack of teaching resources was problematic. It was pointed out that teaching resources were needed to make learning more enjoyable for the pupils. Questions for reflection that came to mind during observations were; does this adaptability then make it right? Should teachers constantly wallow in a state of insufficiency? How has this insufficiency impacted on quality of education? Mwamwenda and Mwamwenda (1987) argue that quality of education depends on variables such as the availability of classrooms, furniture, equipment, and textbooks. The problems of book scarcity and the cost of buying them have hindered the successful implementation of many laudable educational programmes and curriculum projects (Ivowi, 1998).

Figure 22: Image showing the library of a primary school considered to be one of the best primary schools in Owerri West. A laudable effort by management but too few books to cater for a population of over 600 pupils.
Since its independence in 1960, Nigeria has struggled with designing and implementing a sustainable educational curriculum that adequately prepares its children for adulthood (Marinho 2009). Marinho (2009) further argues that Nigeria’s curriculum does not adequately prepare students for the demands of a competitive, talented workforce and despite meaningful public policy created to address the needs of Nigerian students; there remain systemic shortcomings that fail to realise government goals. Abimbade (1999) concurrently points out that:

“for Nigeria, curricula expectations for pupils’ achievement are high. This has not been backed with curricula implementation because of frequent school closures, class capacity (over-crowded), very large steps of concepts, and examination oriented curriculum. Textbooks are the major source for curriculum teaching, and classroom teaching is not always backed by instructional materials”.

The issues highlighted by Abimbade have a negative effect on the quality of classroom teaching and learning. A survey of most public schools in Nigeria revealed that only 30% of the pupils had access to textbooks; a factor that greatly limits the arousal of curiosity, the acquisition of knowledge and early introduction of numbers and letters (Ajibola 2008).

The endeavour to produce a primary education system in Nigeria that is of a high standard and that offers quality education has spanned several decades. In 1999 Nigeria launched the Universal Basic Education (UBE) scheme in the bid to reform the educational system. The UBE scheme replaced the Universal Primary Education (UPE) project of 1976 which failed to meet required standards needed to enhance quality education and bring Nigeria in conformity with a number of international protocols. Asagwara (1997) observes that those who planned the
UPE scheme in 1976 apparently forgot to consider the importance of the availability of qualified teachers, adequate learning environments, equipment and textbooks, classroom management and supervision, and the content of the curriculum. Asagwara further argues that even with increased budgetary allocations to the UBE scheme, it is doubtful that the quality of education will substantially improve to a meaningful level needed to achieve the goals enunciated in the UBE plan. This is a significant aspect that affects inclusive education and the challenges facing effective implementation of educational policies in Nigeria.

Teacher education requires special consideration in any deliberation on education because no organised education can rise above the quality of its teachers (Osuji 2009). Teacher education in Nigeria is aimed at providing trainees with intellectual and professional background adequate for their assignment and to make them adaptable to any changing situations in the country and the world (Adeosun et al. 2009). Adeosun et al. (2009) describe this goal as a mere wish as most teachers do not exhibit the required competencies needed, especially to teach at foundation level. Agun (1986) identifies that there is a need for development of skills by teachers undergoing their training so that they are able to use a wide variety of instructional materials.

It is the quality of a teaching force that determines how well a nation’s educational policy is effectively implemented in the classroom. Until fairly recently the training of teachers for the nation’s primary schools was the responsibility of Grade Two teacher training colleges. This changed when the
federal government stipulated that the minimum qualification for teaching in primary schools should be the Nigerian Certificate in Education (NCE) as opposed to the Teachers’ Grade Two Certificate which was previously the minimum certificate but which has gradually been phased out. The NCE certificate which is attained after three years of study is presently the minimum qualification needed to teach in primary schools in Nigeria. While this stipulation is fully implemented in the secondary schools it is yet to be achieved in the primary schools across Nigeria (Adekola 2010). Again this raises questions around the quality of teaching delivered in primary schools.

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Source: Statistics Division, Federal Ministry of Education (FME), Abuja

Figure 23: Source: Statistics Division, Federal Ministry of Education (FME), Abuja
Dr Aminu Ladan Sharehu the Director General of National Teachers Institute (NTI), stated:

...if our teachers remain with Grade II or NCE certificates, certainly there is no way you can ensure quality. There should be a way in which to support those that have Grade II to update their knowledge to have NCE certificates. In fact, not just for them to have the certificates but for the education to go through them and not them to go through the education. Again, those who have the NCE certificates should be encouraged to have Bachelor of Education degrees and even Masters and PhD degrees. There is nothing wrong in having a number of our teachers in primary and secondary schools with Masters and PhD degrees. In fact, these are the kind of qualifications Nigeria needs for its teachers in primary and post-primary schools to ensure sound and quality education for the citizenry. Therefore, the National Teachers Institute needs to be supported by government and all stakeholders in the education sector so that we can have quality teachers with Masters and PhD degrees in primary and secondary schools in the country. (Daily Trust Newspaper, July, 2010)

The EFA 2000 Assessment: Country Reports: Nigeria identifies that:

A study commissioned by the National Council on Education and carried out by the NERDC showed that there are numerous unemployed NCE holders roaming the street. Largely because the local Government Education Authorities prefer to employ the Grade II teachers to reduce the amount spent on teacher salaries.

This implies that even though there has been a growth in qualified teachers there appears to be some reluctance in employing qualified teachers. Dr Ahmed Modibbo Mohammed, the Executive Secretary of Universal Basic Education Commission (UBEC) unequivocally stressed:

The employment of unqualified teachers by some state governments is a deterrent to the country’s educational development. Unqualified teachers are threats to the educational development of the country, adding that it is abnormal for state governments to employ unqualified teachers or people that have nothing to do with education as education secretaries in the
various local government education units. National president of the Nigerian Union of Teachers, Comrade Michael Alogba Olukoya emphasised that the nation’s educational system is bedevilled with so many problems, difficulties and challenges that need urgent intervention (Daily Trust Newspaper, August 2010).

5.7 Assistive technology

Assistive technology is equipment and software used to maintain or improve the functional capabilities of a person with a disability. The use of assistive technology is particularly beneficial to some dyslexic individuals. Ajibola (2008) identifies the lack of electronic gadgets that aid reading and diction as a problem in many Nigerian schools. This appeared to be the prevalent situation in the primary schools investigated in Owerri West. The main observations made with regards the use of assistive technology in teaching were:

- A complete lack of its use in the classrooms
- Computers where used were mainly used to type and print exam papers and official school letters
- Teachers that engaged in discussions during the observation process did not appear to be aware of the benefits of using assistive technology in classroom teaching
Figure 24: Image showing classroom with blackboard as the only instructional material.

The use of assistive technology compensates for difficulties experienced in learning rather than providing remedies. However in so doing it creates learning opportunities for individuals with learning difficulty thus allowing a person with a learning difficulty to demonstrate their intelligence and knowledge. The social model of disability argues that barriers to accessibility and participation are sometimes caused by the lack of necessary educational facilities, for instance assistive technology. The social model advocates that compensatory measures to these barriers could take the form of specialist teaching and support to ensure that those with disabilities/learning difficulties are not placed at a disadvantage but are still able to learn and acquire necessary skills needed in the wider society. It is important to bear in mind that the use of assistive technology in schools is a made-to-fit implementation and can only be successful if teachers have come to grips with its use themselves before they can use it as an educational tool. It is important for teachers to be aware of assistive technology suitable for their learners because it is the nature of the type of difficulty experienced in learning that determines technology required in classrooms. This will likely prove difficult
if a learning difficulty/disability has not been identified because trial and error may be required to find a set of appropriate tools and techniques to support specific pupils as it is the nature or type of difficulty experienced in learning that will determine technology required in a school setting. Having selected the type of assistive technology needed by the pupils teachers are expected to find out what actually works well for the pupils who have specific learning needs and adapt, change and refine its use to suit the pupils. This is rather complicated because if assistive technology is to be used to enhance learning for pupils with learning difficulties, the learning difficulty in question has to be identified first. One cannot ignore that funds play a vital role in any implementation. Where there is a lack of funds there tends to be lack of progress and advancement. Some teachers mentioned that this appears to be the situation. The willingness of the teachers to be trained to better educate their pupils is not supported by government funding and dedication.

The teachers involved in the study generally agreed that all their pupils would benefit from using assistive technology in school as they pointed out that the world is advancing and it is important that in a modern society one moves with the trend. They however pointed out that they were not sure of how assistive technology could transcend into the classroom and aid in helping learners with learning difficulties/disabilities. There appeared to be a lack of confidence expressed by the teachers in discussing issues around the area of assistive technology. Assistive technology needs to have a specific educational purpose and should be used regularly in order to have a positive impact on a student’s success. A student’s disability must take precedence over any other issue when choosing
any assistive technology device hence the dire need for awareness of learning difficulties/disabilities. This point reiterates the need for in-depth specialised teacher training which will serve to empower teachers to use specialist teaching strategies and at the same time encourage the use of information and communication technology in teaching. Information and communication technology has the potential for not only introducing new teaching and learning practices, but also for acting as a catalyst to revolutionise the educational system (Yusuf and Yusuf, 2009). It can empower teachers and learners and promote the growth of skills necessary for the 21st century workplace (Trucano, 2005). Allen (1961) observed:

One of the prime functions of the school, indeed the chief function, is to provide a set within which boys and girls can grow intellectually. This can only be accomplished through the learners’ association with information, knowledge, facts. Books can help. So can laboratories. So can numerous other types of learning materials. But always there stands the teacher, always on the edge, often front and centre. What he knows can make a difference. What he does not know can be an irreparable loss.

Teaching begins with a teacher’s understanding of what is to be learned and how it is to be taught (Shulman, 1987). It is not possible for a teacher to impart knowledge that is not known to them. Not only should teachers be trained to efficiently use assistive technology in general classroom teaching, it is of equal importance that they are fully aware of the advantages of using assistive technology in teaching learners with learning disabilities.

Although assistive and adaptive technology does not “cure” a specific learning disability the use of assistive technology in teaching and learning could go a long
way in enhancing information processing especially among pupils who have learning difficulties/disabilities. According to Johnston and Johnston (1996) technology can enhance teaching, motivate learners as well as assess their progress. In the teaching-learning process, the most meaningful and productive use of technology engages learners in knowledge construction, articulation, collaboration and reflection (Jonassen 1995). Abimbade (1999) suggests that the use of relevant instructional technology is paramount and that the school curriculum must be based on satisfying basic learning needs, which should include access to information to stimulate a learner’s ability to discover categories and ways of organizing the enormous flow of information. General feedback from teachers who engaged in discussions on this issue highlighted the lack of government funding as a typical reason for this shortfall. They agreed that as teachers they will also need to undergo some form of training to be able to competently use assistive technology and for it to be of benefit to the primary school children in Owerri West. However they pointed out that as a first step it needs to be practically initiated by the government, lip service in this instance is not enough.
Yusuf and Yusuf (2009), postulate that Nigeria, as a nation, has recognised the potentials of information and that of information and communication technology in the school system. This is evidenced in the educational reform policies aimed at integrating the use of ICT, particularly the computer, in the Nigerian school system. The first national programme was the Federal Government (1988) policy document, National Policy on Computer Education (Federal Ministry of Education [FME], 1988). The document emphasised the need for primary school pupils to be introduced into basic computer skills, the use of the computer to facilitate learning, and rudimentary use for text writing, computation and data entry. The Nigerian National Policy for Information Technology (Federal Republic of Nigeria [FRN], 2001), which followed recognised the need for ICT to be used for education. The three major objectives of the policy emphasises the need to:

- empower youths with ICT skills to prepare them for competitiveness in a global environment
• integrate ICT into the mainstream of education and training

• establishment of multifaceted ICT institutions as centres of excellence on ICT

The National Policy on Education (NPE) emphasises the need to make education relevant to the needs of the country, equip students with the relevant knowledge to change their private and professional lives, make education accessible to more people, and pay more attention to science and technology (Bello 2007). The National Policy on Education (Federal Republic of Nigeria [FRN]), as revised in 1998 and 2004, re-emphasised the need for the integration of ICT in the Nigerian education system. This is a testament of the acknowledgment of the importance of ICT. However actual practice in this area has been found wanting.

Ajibola (2008) states that many schools have undertaken widespread reform of the curriculum in line with the change in focus to science and technology to ensure that it is sensitive to regional and international issues such as gender, disability and globalisation. However, this is yet to be the practice in Owerri West. It is clear that the Nigerian government has deemed these reforms necessary but to what extent are they actually realised? What is the reason for the delay in implementation of this in Owerri West? Adeosun et al. (2009) propose that there is often wide disparity between policy pronouncements and policy implementations in Nigeria. This has led to many government proclamations amounting to nothing in terms of effective implementation. Young and Levin (1999) defined educational reforms as a program of educational change that are government directed and initiated based on an overtly political analysis (that is,
one driven by the political apparatus of government rather than by educators or bureaucrats), and justified on the basis of the need for a very substantial break from current practice. If reform is acknowledged in the Nigerian educational system and has been identified as necessary why have educators and other relevant stakeholders not been consulted in realistic and attainable educational reforms especially where it concerns learners with disabilities? Yusuf and Yusuf (2009) argue that none of the policy documents, National Policy on Computer Education (FME, 1988), National Policy on Education (2004, 4th ed.), and the Nigerian National Policy for Information Technology (FRN, 2001), recognised the need to use the computer or ICT to provide access to education for people with disability which underscores a major inadequacy in the policy document.

Yusuf and Yusuf (2009) state:

...another significant document on ICT was the Federal Ministry of Education (FME, 2004) Ministerial Initiative on e-Education for Nigerian Education System which unlike the previous documents, the initiative was drawn based on input from major educational and human development commissions and board (National Universities Commission, National Colleges of Education Commission, National Board for Technical Education, Education for All, Universal Basic Education, etc.) and for the first time the need to integrate ICT in special education, particularly for people with disability was emphasised. However, the document could not be implemented because the Minister who initiated the document was removed. Thus signalling the death of the document which was meant to leapfrog the Nigerian educational institutions into ICT compliant ones. Since then, no national document had been developed on the integration of ICT in Nigerian educational institutions.

5.8 Conclusion

This chapter has reflected on the findings of the observations carried out in the primary schools investigated and has raised the issues of accessibility,
empowerment, the curriculum and delivery, classroom practice, professional practice, quality assurance and teacher training all in relation to how these issues impact on pupils with unidentified dyslexia. The issues highlighted in this chapter will be discussed further in chapter six which addresses findings and discussion of respondent interviews conducted for the study.
CHAPTER 6

The voice of redundancy does not speak at top volume. It makes itself heard only to those who have learned to listen carefully to the subtle and often hidden messages in speech containing traces of social structure and social existence. Utterances and verbal interactions of people in everyday situations abound in such redundant, but hidden messages.

(Larcher, 1993)
6. Interviews

Findings and Discussion

6.1 Introduction

This chapter focuses on participant interviews, one of the most desired and valued approaches to data collection in interpretivist phenomenological research. Different people conceptualise the phenomenon of disability differently (Bhanushali 2007). Therefore, using interviews as a method of data collection was vital to the study, as it highlighted the participants’ interpretations and understanding of the construct of disability. They further highlighted perceptions of disability and how these perceptions reflect the models of disability which have been used to interpret and understand disability awareness issues that are prevalent in the society.

Phenomenology is often considered central to the interpretive paradigm (Clark, 1998; Denzin and Lincoln, 1998; Koch, 1995). Phenomenological analysis aims to understand, from the participants’ perspective, how the everyday intersubjective world is constituted (Schwandt 2000). Because the research was not theory driven it was important that the method of inquiry chosen laid bare the experiential world of the research participants. Although there were preconceptions that acted as an initial driving force of the research, it became apparent that these had to be set aside to allow resonant accounts given by the
participants set the stage on which the phenomenological experience of the participants was understood and appreciated. The accounts given by the participants offered a clear picture of the models of disability and the different perceptions of disability predominant in the society that informed the study.

The depth and richness of data gathered through interviews cannot be overemphasised. Being aware of and understanding social issues from the personal standpoint of the interviewees was invaluable. The genuineness of approach to issues raised, the comments made and body language and expressions that are unobservable through data gathered from questionnaires told an in-depth story that in many ways addressed unanswered questions. The interviews helped close a void that could only be done through the understanding of a phenomenon through the voiced experience of the interactors in the society which is very important in qualitative research.

Disability is defined by culture and is culturally constructed to establish the expectations of society. Interviews were used to solicit information on respondents’ perceptions of the impact of the cultural and political toggle on disability awareness. The understanding of disability has undergone changes over time, and could be said to be interpreted differently among different cultures and societies. Various interpretations and perceptions of disability stem from historical influences as well as influences driven by several models of disability such as: the social model of disability which is a rights based model of disability; the moral, and the medical models of disability. These models as well as the social constructions or understanding of disability, have created a pivotal point for the
way disability issues are perceived and approached. The interviews highlighted that the most prominent views held in Owerri West on learning disability issues were in line with the moral and medical models of disability.

Data gathered from the interviews also highlighted societal behaviour towards educating the disabled and how government involvement or the lack of it impacts on learning difficulty/disability awareness issues. Above all at the heart of it was the search to understand possible reasons for the vacuum in the awareness of dyslexia in Owerri West and the impact this has on inclusive learning. Not everyone approached was keen to give an interview. This was respected and appreciated. However the few that did respond offered invaluable information that afforded an expansion on already existing knowledge and ideas derived from researched literature, questionnaires and observations. In other words conducting interviews as a method of data collection added an extra layer of depth to the findings.

Gathering data from the interviews was the last piece of the puzzle of the research. The invaluable information collated helped create a clearer picture of the phenomenon investigated. The richness of what was revealed in the interviews in itself speaks volumes and to a great extent makes existing literature on the topic of research much more appreciated and of relevance to the study. The phenomenon ceased to be a myth to me. I found myself exposed to personal interpretations of the participants’ perceived reality and the meanings attached to these perceived realities. The time spent investigating, observing, reflecting, piecing together facts and opinions and arriving at conclusions that could only be drawn on when one
has delved deeply into research of this nature enabled me arrive at the much sought after understanding of the phenomenon. What started out as an assumption indeed ended up a manifestation of reality of the people involved in this study.

The research questions that motivated the investigation were:

1. What are the forces that drive inclusion in the educational system and how has this impacted on dyslexia awareness and curriculum planning in primary schools in Owerri West, Imo State, Nigeria?
2. To what extent are the conceptions and perceptions of learning difficulties/disabilities as a whole responsible for the lack of dyslexia awareness in Nigeria and how has this impacted on dyslexia awareness in primary schools in Owerri West, Imo State, Nigeria?

The aims of the research listed below also served to form the basis for deciding how to approach the interviewing process and the manner in which the interview questions were to be structured.

1. explore possible reasons why very little research has been carried out in the area of dyslexia in Owerri West
2. examine reasons for lack of government attention and recognition of hidden disabilities and explore how this has impacted on policy making in the area of specific learning difficulties
3. investigate how ideologies for acceptance, policy making and funding in the realm of special needs education are inevitably determined by general
conceptions and the understanding of special needs in Owerri West, Imo State and Nigeria in general

4. scrutinise reasons why government departments dealing with disability in Imo State Nigeria seem to lack dedication in terms of exploring new avenues to include children with specific learning difficulties

5. investigate how the lack of specialist training in the area of dyslexia awareness impacts on classroom teaching in primary schools in Owerri West, Imo State

6.2 The interviewing process: setting the scene

Information gathered through observations and questionnaires indicate that dyslexia is a very grey area in Owerri West. Interestingly, only a minimal proportion of the population investigated had heard of the term dyslexia. This finding was very significant to the study. Although at the onset it was speculated that there was a lack of awareness of dyslexia, the extent of the lack was not known. The discovery of the profound lack of awareness was very revealing and would have presented the problem of investigating a concept that was unknown to the participants. Hence the chances of finding and interviewing someone who knew about it were extremely slim. As it so happened, ‘dyslexia’ as it were was an alien terminology to all the people that participated in the interviews. Because this problem was foreseen, the interviewees were given a letter of consent that served a dual purpose; firstly, to introduce myself and my research interest and secondly, to give the interviewees a general overview of dyslexia and its effects on learning.
Though the information given was very brief it was enough for the interviewees to ascertain whether they knew about dyslexia or not and to what extent. It was equally important that the interviewees understood dyslexia to be an invisible/hidden disability, this enabled the interviewees make the connection and the distinction between support given (or the lack of it) to people with physical disabilities and those with invisible disabilities such as dyslexia.

6.3 Findings

Five themes emerged from the interviews conducted. The findings of the research are discussed under related themes.

Table 15

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<thead>
<tr>
<th>Themes</th>
<th>Findings</th>
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<tr>
<td><strong>Theme 1.</strong> Awareness of dyslexia in Owerri West.</td>
<td>• Lack of awareness caused by society not identifying with terminology/language specific to various types of learning difficulties.</td>
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<td></td>
<td>• Lack of identification of dyslexic pupils.</td>
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<td>• Lack of specialist learning support offered.</td>
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<td>• Poor language skills identified in classes but no specialist help or specialist teaching strategies applied.</td>
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<td>• An establishment of the need to recognise invisible disabilities.</td>
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<td><strong>Theme 2.</strong> The influence of cultural perceptions of disability on inclusion in primary schools in Owerri West.</td>
<td>• Cultural perceptions and beliefs as well as poverty to an extent all play a role in influencing disability awareness.</td>
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<td>Theme 3.</td>
<td>Reason for lack of government dedication and interest in exploring dyslexia.</td>
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<td>Need for government input in the area of disability policies within government departments at both national and local government levels.</td>
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<tr>
<td>Other possible factors identified as causing the lack of dyslexia awareness are lack of foresight, lack of funds, lack of government interest, reluctance to change, and corruption.</td>
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<th>Theme 4.</th>
<th>Impact of lack of specialist training of primary school teachers on inclusive practices in primary schools.</th>
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<td>Lack of specialist training.</td>
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<td>Poor teacher training curriculum content in the area of specific learning difficulty.</td>
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<td>Lack of training resulting in unidentified dyslexic primary school children being disadvantaged in the educational system.</td>
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<th>Theme 5.</th>
<th>Extent to which disability legislation supports primary school children with invisible disabilities.</th>
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<td>The need to retrain teachers to get acquainted with dyslexia as a learning disability/difficulty.</td>
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<td>The lack of experienced policy makers. Policy makers conversant with disabilities across the board are needed in government office to enact change.</td>
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<td>The school curriculum needs to be revisited to include the broad spectrum of specific learning difficulties as this will benefit the children concerned.</td>
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- Societal understanding of disability affects the way children with disabilities in general are treated.
- Lack of training on the part of primary school teachers also affects disability awareness.
- General lack of government and societal support for people with disabilities.
6.4 Discussion

The following discussions are expansions of the findings derived from information gathered through respondent interviews. The excerpts from the interviews are used to substantiate significant issues raised around the lack of dyslexia awareness in Owerri West, Imo State, Nigeria and serve to put into perspective disability awareness issues as experienced by members the society investigated.

6.4.1 Theme 1: Awareness of dyslexia in Owerri West

In response to views on awareness of dyslexia in Owerri West the general consensus depicted a lack of awareness of dyslexia within the primary school settings. As previously mentioned in chapter two, terminology plays a great role in identification of a learning difficulty therefore terminology can be seen as a focal point which cannot be ignored when determining why a learning difficulty has not been given credence. In light of this the following questions arise: ‘to what extent is the language/terminology associated with specific learning difficulties known in the educational system and how does it feature in inclusion?’ ‘Is dyslexia an experience that is yet to be associated with terminology (a label)?’

The responses given in the interviews clearly show that there appears to be a lack of awareness of dyslexia (here I refer to the label ‘dyslexia’). However it appears clear that teachers are aware that there exist some pupils who clearly have difficulties in learning. If one were to investigate this one might find that some of these difficulties experienced in learning are dyslexia type difficulties. So
although the teachers have not yet been acquainted with the language associated with specific learning difficulty, they are aware that these pupils in question find it difficult coping with traditional teaching methods.

On the issue of awareness of dyslexia as a label, a college of education lecturer commented:

‘...it is not a popular word in the Nigerian educational system although many people who are well read are aware of it and are trying to bring it to be a full learning experience in the Nigerian educational system’.

A teacher quite simply responded:

‘I’ve not heard of dyslexia before’.

Another expressed:

‘No I have never come across that word before this is my first time of hearing it’.

The same sort of response was given by two heads of school. A headmaster responded:

‘No I haven’t heard about it at all even though I’ve been to teacher training, teacher grade 2 teacher grade 3, NCE I had what they call in-service training but I’ve never heard about this’.

While a third reported:

‘It isn’t like that here. Complete lack of it. We don’t feel that there is a need to probe into these type of matters. There is no need, we don’t see the value. Unless one or two people who travel out, they are the people who are thinking about their own children’.

When asked if dyslexic learners where identified in the primary schools and if there was anything like dyslexia as far as the cultural context was concerned, a teacher quite candidly expressed:
'It exists but we don’t know that this is the name and we don’t know how to handle it. So since we don’t know how to handle it and it exists I think it will be of great importance to introduce or teach teachers how to handle this issue, how to treat pupils with this particular problem so that we can move our country forward. To that I don’t know your major aim of carrying this project out if you can help us enshrine this in our curriculum so that teachers to be will study this while studying their own course in the university so that whenever they become full teachers in their various schools they will be able to handle pupils with this problem'.

When asked if dyslexia support is practiced in Owerri West a headmaster responded:

‘I don’t know really but I think there are special schools to handle these cases’.

Interestingly the teacher quoted above understood dyslexia to be a ‘problem’ with the pupils. Dyslexia here has been interpreted as a problem that needs to be solved though intervention. This understanding of dyslexia is very much based on the medical model of disability as it identifies the individual with a learning difficulty as the person who needs to be rehabilitated, changed and made to conform to expectations of society. This interpretation could also be seen in the response given by a headmaster where dyslexia has been identified as a ‘case’ which could again be interpreted as a problem that needs to be addressed through a special means, clearly not one that his primary school will be able to address.

The following discussion posted April 27, 2008 on Nairaland, a Nigerian dyslexia forum website is quite an insightful exposition on the position of dyslexia awareness in Nigeria.

“I’ve got two younger brothers both of whom are dyslexic and have got ADHD. These are two very serious learning disorders than can hinder a
child from learning like his peers... I know that there are SO MANY kids in Nigeria that have this disorder (my brothers used to be part of that group till we moved out of the country) and because there is little (if any) provision for kids with special needs, these kids end up not learning, being written off by impatient teachers and ending up living meaningless lives (unless God intervenes).

In response an individual wrote:

“It’s rather interesting that some people are thinking along with me....specifically I had been thinking about pervasive developmental disorder -autistic spectrum disorder and how people and family with children having these disorders cope. I know fully well that our social service is poorly developed, occupational therapy non-existent and nursing and medical skills nowhere to be found. For Naija people to deal with this problem education is vital as our people are too stigmatised to seek help. Until people start to seek medical help and hospitals see a need for establishing this departments something will start to flow.”

The response given is revealing as it again highlights a medical model approach to viewing learning difficulties where help should, according to the individual quoted above, be sought from hospitals and medical practitioners. Again reference is made to disabled people needing to seek help from society. This is a medical approach to problem solving. Bhanushali (2007) proposes that the medical model defines disability in the clinical framework as disease state, thus providing for a major role for the medical and paramedical professionals to cure this problems in such a way as to make them as normal as possible. A social model approach is one that will encourage society to make necessary adjustments to include individuals with learning difficulties and not the person with the disability having to make the adjustments.
Recognition of invisible disabilities

Although the respondents were not aware of dyslexia as a specific learning difficulty they were able to relate to issues around the lack of awareness because they already had prior knowledge of it through the consent letters given which in addition to outlining research aims gave a brief but in-depth exposition on dyslexia and its effects on learning. Also as part of the briefing process some of the primary schools that participated in the research benefited from a dyslexia workshop which was delivered to create awareness of the learning difficulty/disability (see appendix I). As a result, the respondents were able to relate to dyslexia as a hidden/invisible disability. Interestingly all the respondents agreed that as well as recognising physical disabilities it is equally important to recognise invisible disabilities in schools.

In view of this a headmaster stated:

‘...yes it is very important to recognise it so it will enable the teacher to study the children very well and know the extent to handle them so that they will not regard it as being an ability to stop them from further learning’

In support of this opinion a teacher pointed out:

‘It is important to recognise these disabilities because it is one of the learning disabilities our pupils are involved with so we need to know what it really means and ways to help these pupils out’.

Another headmaster, quite elaborately said:

‘Following the lecture you gave us the other time I think it is very necessary for us to look at that disability from the point of this research because in the cause of my teaching I and some other teachers have always blamed the children who cannot read very well, who cannot spell accurately, who cannot do these things very well, we have always blamed them that they are dull, that they are useless, they cannot do well they are never do well...’
The value of awareness cannot be understated. Awareness could bring about change, innovation and reinforce positive educational practices. It is quite clear from the response by the headmaster and teacher that the awareness of dyslexia and being exposed to the intricate nature of difficulties that characterise dyslexia has the potential to instil a change in attitude with regards the way pupils who experience learning difficulties indicative of dyslexia are regarded. There appears to be a shift from viewing these pupils as those that lack the potential to do well academically, to embracing their neuro-diverse nature. This shift in reasoning is in concurrence with the social model of disability, where a society’s acceptance of neurological difference or diversification and adjustments that emanate as a result to include people with differences/disabilities, is the centre of disability discourse. This also supports arguments that suggest better inclusive practices and a more dyslexia friendly approach to teaching need to be in place.

A social model take on viewing disability issues is of importance to propagating disability rights and also changing the view some societies and individuals in society have of people who have disabilities or differences. Referring to pupils who have learning difficulties as ‘dull’, ‘useless’ and ‘never do well’ as mentioned by the headmaster above takes on a moral model spin, where emphasis is placed on the individual with disabilities as one who is not an active participant in society and who is of very little significance to society. Thomas (2004) proposes that disability can be understood to arise from the interactions between those individuals and groups who are relatively powerful because of their non-impaired social status and those who are relatively powerless because they have been marked out as problematically different, as inferior, because of their physical
or cognitive characteristics. The moral model of disability is the oldest concept embodying the understanding of disability. While perceptions of disability emphasised in the moral model are not glaringly portrayed in disability notions in some societies, a few societies still hold strongly these notions of disability. Historical notions of disability still go on to guide the present notions people without disabilities have of people with disabilities. The lives of those with disabilities are viewed as constrained and controlled by the actions, institutions and social structures constructed by people who do not have disabilities (Thomas, 2004). Even though it may not be obviously stated in educational policy and inclusive practices, the historical basis on which the understanding of disability is built is driven by historical and cultural perceptions which hold that people with disabilities have limited abilities and therefore can make limited contributions to society. Therefore legislation pertaining to disability is limited to the parameters of the understanding of disability in the society. Historically, from a moral model perspective, disability was regarded as resulting from sin and shame and this led to the concealment and exclusion of individuals with disabilities. Although this model is more evident in some societies than others, some societies still take on a more subtle approach to exhibiting notions of disability based on the moral model. It could be argued however that the subtlety of approach does not disguise its existence of practices and understanding which are based on the moral model approach. So whereas the pupils in question are not excluded from the educational system in an obvious manner, they are internally identified and marginalised within the school system as ‘never-do-wells’, ‘useless’ and problematic. The fact that there are no learning support systems in place to include such learners
compounds the problem and raises questions as to what extent it could be argued that they are being included in the school system.

With regards the importance of recognising invisible disabilities a headmaster noted saying:

‘...now that it is discovered that a percentage of these children have this problem I now realise what those children were suffering when I was teaching them I now realise that I in fact I was not doing my best as a teacher because I knew very little. Because I knew very little I had to impact very little. If I knew that the children were suffering I could have tried to device a means of helping them, I didn’t. This type of disability is not known among the teachers in Nigeria. But I have children who are suffering it.’

A teacher quite honestly responded:

‘It is very important because we are experiencing it here though we’ve not paid attention to it most of the children we are training, we have in the class at times you find out that they have the problem but here we say it is from their background that the problem started so it is very important that we look into it to tackle the problem so we could help the children.’

There are two things here that stand out from the comments above; firstly that the children who are dyslexic or who have invisible disabilities have a ‘problem’, ‘suffer’ or are ‘suffering’ (a medical view of learning difficulty which emphasises that something is wrong with the individual). Secondly that learning support provision is necessary as a means to help these pupils participate effectively in school (a social model approach with emphasises placed on educators who need to make reasonable adjustments to approaches to teaching and to the learning environment as a whole to fully integrate dyslexic pupils). This view highlights that concepts of disability prevalent in the society investigated are a mixture of different models all of which are interwoven and expressed through individual interpretations and understanding of how disability issues are approached.
A teacher trainer in expressing the importance of recognising invisible disabilities stressed that:

‘It is very, very important, extremely very important because this is the formative stage of the child. It is only when the foundation is well built that the house can stand effectively.’

The teacher trainer also pointed out that:

‘Although we don’t see it [dyslexia] a physical disability but it is mainly recognised by those who are aware of it and it needs to be made aware fully aware in the Nigerian educational system because it is one of those things that is bringing the standard and the rate of understanding very low’.

In agreeing with the importance of recognising dyslexia a teacher pointed out that:

‘It is very important to recognise because it is one of learning disabilities our pupils are involved with so we need to know what it really means and ways to really help these pupils out’.

A headmaster emphasised that:

‘If one notices that a child has invisible disabilities that will help one tackle the problem but if one does not know that a child has invisible disabilities you can’t treat it so it is good to know the problems a child has so that you can treat him, you’ll know how to treat that child, you’ll know how to pay special attention to that child’.

The point made by the headmaster is very valid as it is very difficult to justify a place in educational policy for a learning difficulty that is not known to exist. Disability known to exist has a place in policy and as such stands a chance of being investigated further. It appears what is desperately needed now is the knowledge of the existence of dyslexia as a portal for national dialogue on how to support learners with dyslexia in schools. In order for dyslexia awareness and learning support provision for dyslexic pupils to move forward in educational
policy the awareness of disabilities that encompass subtle disabilities such as dyslexia first has to be part of the social construct of the society. Society has to have an understanding of it and acknowledge the need to identify with the specific learning difficulty/disability. The general consensus derived from the interviews emphasises that at present this is not the case in the society investigated. However it is evident that a positive socially constructed notion of dyslexia is a necessary platform to propagate the need for the identification and support of these pupils. It based on this that discussions at government policy level will be built and moved forward so that the whole concept is adopted, implemented and wholesomely embraced in inclusive practices within the school and cascaded further in the wider society. Where certain perceptions of disability are not inherently part of the cultural construct of society, such social constructs could still be established through government policy which over time will infiltrate the whole society and become part of the social construct of that society. Disability policies however tend to lean more towards the medical model as it provides what one might consider clear cut scientific reasons or accounts of disability with the aim and focus on curing the individual with the disability and rehabilitating them to fit into society. As is the case with most phenomena in the behavioural sciences, learning difficulties was ultimately a creation of scientific and political forces (Kenneth et al. 1998). As Kavale and Forness (1998) argue, the field of learning disabilities is inherently political because learning difficulties to a significant extent is a political creation and the development and implementation of learning difficulty programmes and services require significant political action which has its basis on scientific foundation which outlines the concept that describes a particular form of a learning problem.
Although the moral model of disability is the oldest paradigm for understanding disability, with the advent of science came the medical model of disability which gained credence as it gave a more apt understanding for the existence of disability and as a result became more accepted. The social model of disability however is a reaction to the medical and moral models where the main focus of these models does not address the rights of the disabled in society. The social model is the total antithesis to the medical model, where the primary focus of analysis has shifted from the deficits of the functional, physiological and cognitive abilities of the impaired individual, to the detrimental and oppressive structure of society, and the negative social attitudes encountered by disabled people throughout their life (Lang 2000). The interview extract below is an instance of where invisible disabilities are referred to as a ‘sickness’, which is very much a medical model view of disability as a defect.

On issues of bringing about desired change a headmaster laid emphasis on teacher training:

‘...the best way to challenge or change something in education policy is through teacher training. So the best thing is go to the teacher training institution add these parts of education, teases qualities you will like them to retain, that will change the face of education, teach the teachers first let the teachers know them first. Like this sickness - invisible disabilities, you are talking about if the teachers know about it they can even start doing something before the government comes in.’

The lack of extensive focus on learning difficulties in government educational and disability policy is questionable. A typical example of this could be found in the goal of the Nigeria Education Sector Diagnosis Report of 2005 which was to:
‘highlight the major issues and challenges of the educational sector that should provide a road map for national policy dialogues and concerted action for the purposeful development of the sector, within the overall context of needs and the on-going reform agenda of Government.’

Documents such as this carry credence and pose as an effective channel for making changes in areas identified to be wanting in the educational system. As one of the issues identified in the primary school sector in Nigeria, the report highlights as a challenge insufficient data/information for timely policy provisions, to address issues at appropriate times. This clearly implies that there is an acknowledged problem with the processes of data collection where it concerns educational practices that should ultimately be a reflection of government policy.

The following extract below based on a survey sample of 970 primary schools spread in rural and urban areas in Nigeria taken from the Nigeria Education Sector Diagnosis Report (2005) speaks volumes with regards the limited mention of disabilities and the impact this has on unidentifed dyslexic pupils in schools. This misrepresentation in many ways significantly makes valid the views of the respondents on the disability awareness levels among stakeholders in the educational system in Nigeria. The fact that dyslexia, an invisible/hidden disability, was not mentioned in the extract below suggests that dyslexia is yet to be identified and recognised as a learning disability worthy of attention in the Nigerian educational system.

The trend towards integration rather than segregation of these children into special schools makes it necessary to know how many of these children are being integrated and how the schools are coping with these. About 39.59% of the head teachers interviewed had special needs in their schools while 66.41% did not have a single one of these children. Those who had special needs children included the categories of hearing
impairment (79 or 8.0%); speech impairment (92 or 9.3%); visual impairment (36 or 3.6%); physical disability (154 or 15.5%); mental disability (34 or 3.4%) and social behaviours deviance (56 or 5.6%).

The complete lack of mention of specific learning difficulties presents a problem. In the words of a few respondents; ‘you can’t solve what you don’t know’ ‘you can’t fight what you don’t know.’ Although it could be argued that the above mentioned survey was conducted six years ago and therefore such statistics should not be used to substantiate an argument, responses given by individuals that participated in interviews on dyslexia awareness suggest otherwise. The respondents’ views on the matter strongly suggest that the lack of dyslexia awareness is a prevalent issue that is yet to come to the full attention of all stakeholders relevant to the Nigerian educational system today.

One of the goals of special education mentioned in the National Policy of Education (NPE) Nigeria (1998) is to: provide adequate education for all people with special needs in order that they may fully contribute their own quota to the development of the nation. The question remains: to what extent is this achievable if there is limited awareness of what constitutes special education needs? The term special needs education (SEN) has a legal definition referring to children who have learning difficulties and disabilities that make it harder for them to access education than most children of the same age. Where does dyslexia factor in the Nigerian system of identifying disabilities that hinder learning?
6.4.2 Theme 2: The influence of cultural perceptions of disability on inclusion in primary schools in Owerri West.

Culture is regarded as the ‘widely shared ideals, values, formation and uses of categories, assumptions about life and goal-directed activities that become unconsciously or subconsciously accepted as ‘right’ and ‘correct’ by people who identify themselves as members of a society’ (Bedford and Hwang 2003). Chang and Hsu (2007) are of the opinion that culture is not a solid, concrete thing that people possess or live inside, but rather it is a dynamic phenomena which is continually being constructed as individuals mix and adapt various and competing discourses in response to specific situations. There is no doubt that culture is subject to change but it is the process of change and speed of progressive change that determines advancement of socially constructed ideas. This requires a shift from practiced inhibited beliefs to beliefs and practices that are more prone to breaking disenabling barriers, promulgating and encouraging inclusion. The findings of this study suggest that positive changes in disability perceptions are occurring at a very slow pace. There is yet to be a wide spread understanding of educational abilities and strengths of the physically and learning disabled within schools as well as among parents and the wider society in Owerri West.

The voices of parents and their involvement in the education of their children have been a positive force in education; as such parent participation is considered to be a vital component in the education of students with disabilities (Yssel et al. 2007). Yip (2005) however in expressing the difficulties experienced by parents with learning disabled children proposed that the disability of a child in a family
could lead to a sense of disequilibrium within the family especially when the child is severely or profoundly learning disabled or multiple disabled. Goler (2007) proposes that even if it presents some uncomfortable questions, the issue of disability awareness cannot be ignored ...in an ideal world, education would respond to disability, race, gender and other areas of equality as a cross curricular theme, picking up and challenging stereotypical beliefs wherever they surface. Unfortunately such an ideal world is farfetched as can be seen through the lenses of the participants. Rachman (2003) suggests that educational development should not be detached from the philosophy of education or the culture of the people. There is a hidden curriculum that emanates from the cultural beliefs of those who work in the schools and those who set policy for them; no teacher explicitly teaches it, no school or community outwardly espouses it, but it is there, displayed through how students are taught, how they are treated, what guidance they receive, and what resources they are allocated (George and Aronson 2003). Ajuwon (2008) however proposes that as an important first step toward ensuring long-lasting success, there is a need to eradicate all forms of superstitious beliefs about disabilities that have for so long inhibited involvement with people with disabilities in education and the community.

The interviews revealed interesting views respondents had on the way cultural influences affect disability awareness in the society. It was generally agreed that cultural beliefs to an extent play a part in disability awareness and one cannot ignore the fact that the cultural beliefs of a society are the integral focus of many significant practices in a society. Findings suggest that at present it appears that existing disability legislation in Nigeria is rooted in what is socially constructed as
disability. There is a need for a shift from what is socially seen as a disability to attaining a wider understanding of disability. This can only be achieved by broadening the scope of present knowledge by carrying out in-depth research and inquiry into the spectrum of learning difficulties and having this information cascaded to the broader society. It is important to emphasise that although dyslexia is an invisible learning difficulty/disability, it is very much present in the classroom. This is an issue that needs to be addressed and the wheels of motion very much depend on a re-enactment of comprehensive disability policy that does not wholesomely rely on present societal and cultural perceptions of disability. Problems are not resolved when policies are designed to reinforce stereotypes that increase social divisions and lack of empathy rather than accomplish goals (Schneider and Ingram, 1993).

In expressing how cultural perceptions of disability influence attitudes towards the disabled a headmaster reported:

‘...in some cultures, disabled people are regarded as outcasts so they don’t welcome them in the society....here in Nigeria particularly around Owerri here in Imo State, people see disabled persons as people who do not, who cannot measure up, who are not well to do they see them as outcasts, in fact they see them as people who are not supposed to be with others so they treat them anyhow even some disabled persons are not sent to school they remain at home, those that are sent to school are not being well cared for’.

The notion of seeing disabled people as outcasts very much suggests that this is a moral model approach to understanding disability. The implication of this perception is that there is very little room for equality debate. Like other minorities, most people with disabilities desire to achieve acceptance and
integration in society (Moore 1998); however, from the perspective of the moral model of disability this is not achievable because in such societies the disabled are not considered as having equal status to those without disabilities and are often considered outcasts. In such a situation people with disabilities are often excluded, stigmatised and discriminated against. The social model in line with the inclusive model however advocates that equal opportunity to education should be made available to all irrespective of one's disability. The social model in this respect presents disability as a consequence of oppression, prejudice and discrimination by the society against disabled people (Bhanushali 2007). In order to take on a humanistic approach to disability issues it is important that schools assume a rights-based approach to making available learning support to pupils with learning difficulties.

Disability can be classified by culture and socially constructed ideas of a disability within a society. Social constructions are characteristic patterns of a particular society toward an issue within that society (McNair and Sanchez, 2008). As Mont (2007) argues people are not identified as having a disability based upon a medical condition, but rather they are classified according to a detailed description of their functioning within various domains. McNair and Sanchez, (2008) further propose that social constructions are prescriptive of behaviour, and social constructions of a society present ideas which may appear to be natural and obvious to those who accept them, but in reality are essentially created by the culture or society. People who believe in the social model are of the view that disability is made and not acquired hence the solution lies in social management by all necessary environmental modification (Bhanushali 2007). In recent
disability theory, a person’s experience of impairment or disability is increasingly understood as moderated by cultural and social expectations and ideas of what is ‘normal’ are seen as constructed (Kudlick 2003).

A respondent reported:

‘Yes cultural disability is also a force that is impeding the people’s learning attitude. That is the make-up of culture.

A teacher in agreeing to the fact that culture is a driving force in disability perceptions however made the distinction between the educated and the uneducated individual attitude towards educating the disabled:

‘It is the culture that influences them, the way they understand it, because they take it as wasting of money and time training that particular child, sending the child to school. Parents who are learned, those that are educated they understand it differently because talent differs. Educated people send their children to school’.

The teacher’s comments suggest that even though culture in many ways lays the foundation on which perceptions of disability are played out in society, education, awareness and exposure to different views on disability are important to the disability rights debate. Although the idea of the role culture plays in disability awareness was not overlooked, it could be seen in the snippets of the interviews that follow some respondents added that the family, government and educators should share responsibility for ensuring the disabled child is educated. It was emphasised that it is the responsibilities of these stakeholders to cascade positive attitudes towards disability in the broader society. If, as Devlieger (2005) suggests, that contemporary societies are being driven by information, there is then room to suggest that present dominant culture embracing disability issues
and the interpreted reality of it is evolving. This evolution could be said to be brought about by and based on factors such as education – a significant source of information and awareness; and the identification of society with language/terminology/labelling associated with disability. Such factors can bring about a change in the way disability is perceived and learning support offered in schools.

A respondent however laid the onus of inclusion and disability awareness on the state government and reported that:

‘Apart from culture, the government. One the government are in charge, the state government are in charge of primary schools and secondary schools. They also created the local government which is an arm of the state government responsible again for primary education in the State.’

In a slight contradiction to the comment above, a headmaster made reference to the lack of education and knowledge as a factor that influences disability awareness:

‘...lack of education on the part of the teachers, lack of knowledge you impart what you know, you teach what you know you fight what you know. If there is a lion in the bush and you know that it is a lion they can go with guns but if it is an ordinary rat you cannot go to fight a rat because it is just a little thing.’

Although it may appear that at present the cultural perceptions of disability do not hugely seem promising, the fact that more people are beginning to be made aware of the abilities of the disabled child as opposed to the inabilities is a stepping
stone towards improved cultural practices in the future. As pointed out by a teacher:

'I will say that it was before these days that a greater number of parents were not doing it. Now they have schools for the disabled so most of them are there, the parents send their children there.'

Speaking favourably about educating the disabled child a headmaster expressed:

'At present what we know as disability are physical disabilities and surely there is no type of culture that is against the disabled or helping the disabled'.

The comment made here makes explicit two things; firstly that there is a lack of awareness of invisible disabilities such as dyslexia. The emphasis of disability is laid on physical disabilities. Secondly, that there is evidence that although a society may have a dominant view/views towards disability issues there are some individuals within the same society that have developed a different interpretation and understanding of disability which influences their understanding of the phenomenon. This creates a scenario where there is a shift from the moral model approach to a somewhat social model approach. In concordance with this point Devlieger (2005) mentions that while one model may be dominant in one context, snippets of our modes of thought intervene so also does the co-existence of models that have in a sense rather than actually succeeding each other co-exist and become dominant in particular places.

The question however remains: if what is known as disability is limited to physical disabilities alone, where does this leave the child with specific learning difficulties whose disability is invisible? With regards to the impact cultural
perceptions of disability will have on primary school children with learning difficulties/disabilities, a teacher pointed out:

‘The way we understand disability affects the way children are treated. For example these ones that are physically disabled there are some schools that they are being placed we called them handicapped children they have their own school whereas these ones that are suffering from this particular word dyslexia from the little I’ve read we don’t match them together with these ones that are physically disabled ...our knowledge of how we understand disability in general affects the way we treat these pupils.’

A headmaster added:

‘The Igbo culture may not see this as disability because it is internal sometimes they regard it as... what do they call them?... this group of people... imbecile, sometimes they regard them as imbeciles whereas some of them are not. Most of the time they are ridiculed some of their classmates laugh at them people laugh at them but teachers discouraged that type of thing bearing in mind individual differences...different ways of understanding’.

Note here that the headmaster uses the word ‘internal’ to make reference to hidden/invisible disabilities like dyslexia. The impression created during the interviews suggested that derogatory expressions like ‘imbecile’ or words like ‘handicapped’ are in no way frowned down on by the society investigated. In the cultural context children with learning disabilities are sometimes perceived as ‘imbeciles’ as opposed to having a learning difficulty/disability. This raises the issue of political incorrectness with regards the use of terminology that is no longer tolerated in schools in some advanced countries. In line with the use of derogatory terminology a headmaster in making reference to two sets of pupils; the ‘dull’ pupils and the ‘talented’ ones pointed out that:
‘No teacher will like to have a **dull** child in the class but with special training and teachers training teachers now allow them to study **under the same environment and the same curriculum or scheme** without special preference to bring them in like the **talented** ones’.

Looking at the interview extract above one might infer that the opportunity given to learn is not deemed a right given to the disabled child rather it is considered more a privilege of sheer good will – almost like something allowed to happen - a tolerance, as opposed to a human right. Goler (2007) proposes that before any meaningful work can be undertaken to improve outcomes for disabled pupils it is vital that this wider understanding of disability is promoted and accepted within all education settings. This insight casts reflections on the differences in the understanding of inclusion and the cultural implications of this. Inclusion has been a major issue in education (Fuchs and Fuchs, 1994) and prevails in the educational policies in many countries (van Kraayenoord, 2003). Although this is so the question remains to what extent do primary schools in Owerri West practise inclusion in practicable terms? How has the understanding of inclusion been inculcated as it concerns the learning disabled child? The need to re-address the teacher training curriculum and that of primary schools for it to meaningfully embrace neuro-diversity in the classroom cannot be overstated. One of the problems however as highlighted by Coleridge (2000) is that many traditional societies do not have an exact equivalent in their own language for the word ‘disabled’, and they can seldom match the three-tier concepts in English of ‘impairment’, ‘handicap’ and ‘disability’ espoused by WHO and disability theorists; they usually do however have words for specific impairments such as ‘deaf’, ‘blind’, ‘lame’, and so on. Coleridge (2000) further emphasises that what is
counted as a ‘disability’ i.e. that which prevents someone from fulfilling the roles normally expected of them, differs from one culture to another.

On issues surrounding creating learning disability awareness in educational settings, a lecturer laid emphasis on the teacher training curriculum as an agent for good inclusive practice:

‘...it is only what the teachers are aware of that they can impact. It is only when the teachers are aware of that that they can impact it to the child. So secondly the government is responsible because the non inclusion of it in the teacher curriculum most teachers in the state don’t even know about dyslexia not to talk of how to impart in the child because they were not taught fully in their training. If it is there in their curriculum it’s silent in the curriculum it is not fully emphasised’.

Curriculum is not static but it changes in order to keep up with the ongoing social development (Browder et al. 2004; Otis-Wilborn, 1995). The ever changing face of curriculum is what is needed in every educational institution to keep abreast with new innovations. However when asked what possible reasons there are for the delay in including dyslexia and other learning disabilities that fall along the specific learning difficulty spectrum in the teacher training curriculum a lecturer responded:

‘... one of the things is use of non professional teachers in planning the school curriculum. Politicians who may not be specialists in education are used as planners of curriculum in secondary and primary education’.

The design and implementation of curriculum has been one of the most crucial topics in education because through its rules, practices and content it transmits societal values in terms of knowledge and culture (Armstrong, 1999). The findings on the matter of poor curriculum content for teacher training where it
concerns specific learning difficulty awareness stands as a concrete reason for the lack of learning support provision for dyslexic pupils in primary schools in Owerri West. In order to meet the new demands of the speedily evolving face of globalisation, educational systems need frequent reform. In the bid to keep abreast with new reform society is driven by shifts in economic, political, technological and cultural dimensions. Moreno (2006) is of the view that educational reform all over the world is increasingly curriculum-based, as mounting pressures and demands for change tend to target and focus on both the structures and the very content of school curricula. How well however is the primary school teacher in Nigeria equipped for this? Adegbesan and Gbadamosi (2009) point out that one of the major problems of the current crises in the Nigerian education system is the failure or inability of the state to ensure adequately supply of qualified teachers to colleges of education. The teacher training curriculum should prepare the teacher for the challenges met in the classroom.

The National Policy on Education [NPE] (2007) identifies that the goal of teacher education is “to provide teacher trainees with both intellectual and professional background adequate for their assignment and to make them adaptable to any changing situation, not only in their country but in the wider world”. The process of constructing the curriculum is unique to each national setting. Every institution prioritises what needs to be learned and deems fit what areas need to be addressed. Ajibola (2008) sees this as a complex outcome of the opinions and solutions that key stakeholders propose for society’s requirements and needs. Very rarely is curriculum addressed outside the needs of society or what is perceived to be true and real in society. Unfortunately Adegbesan and Gbadamosi (2009) point out
that teacher training institutions in Nigeria produce many teachers who are inadequate, inefficient and ineffective in the educational system. It is on these grounds that it is argued that teacher training institutions should strive to create a more rounded primary school teacher who is aware of the uniqueness of neurodiverse pupils that enrol in primary schools on a yearly basis. Experiences of educational reform almost all over the world have shown that curriculum is at the same time a policy and a technical issue, a process and a product, involving a wide range of institutions and actors (Ajibola 2008). Exposure to a broadened teacher training curriculum which includes awareness of the spectrum of learning difficulties will place teachers at a better advantage to address learning difficulties in the classroom, increase teachers’ efficiency and offer them the opportunity to acquire new skills and current knowledge required to teach neurodiverse pupils. The empowerment of teachers through appropriate training and professional development can be considered a way forward in addressing disability matters. A policy framework is needed for the continuing professional development of primary school teachers which should include the initial preparation of teachers and their induction into teaching (Adekola 2007). Osuji (2009) suggests that the government, teacher education institutions and teachers’ professional associations should join hands in teacher education so as to afford opportunities to teachers to constantly up-date their knowledge and skills through different innovative approaches.
6.4.3 Theme 3: Reasons for lack of government dedication and interest in exploring dyslexia

When asked if respondents were of the opinion that disability policy makers were aware of dyslexia, a head of school reported:

‘I don’t think the government is aware of this except in advanced countries like that of London and America because the ones they have observed are provided for in schools but this one…. awareness should be created that’s what I mean, awareness should be created so that the government will tackle it immediately’.

One cannot underestimate the role of government interest in initiating projects or piloting research. When asked if the lack of awareness was related to lack of government funding to investigate this area, or if it was merely the unwillingness of the government to spend funds on embarking on comprehensive research in the area of dyslexia as it relates to inclusion, a head of school responded:

‘...the awareness has not been fully created. It could be lack of finance to fund this project’.

Another headmaster responded:

‘...if the awareness is created the government will handle it without minding what it cost because the government pays important priority in education so if the awareness is created the government will tackle it not minding the money spent on it’.

A headmaster on pointing out the magnitude of embarking on disability research responded:

...to investigate disabilities in children is an enormous task it requires a lot of money but here in Nigeria education is not adequately funded for
this reason people cannot just go and begin to make investigations when they have nothing.

On the other hand another head of school who had quite a different point of view identified other related factors:

‘...lack of knowledge – you can’t explore what you have never heard about. It is not easy... another one is the lack of motivating factor when you are working and you are not being paid. Why would you bother yourself to go and make investigations just to find out the disability in a child, people will look at it as a taboo. You see there are many reasons but this is the first one. Lack of adequate funding for schools it affects the investigation on disability awareness.’

In response to opinions of government dedication to making sure there are working policies in place to address the needs of people with specific learning disabilities/difficulties, a headmaster expressed:

‘...in this educational system they budget for expansion but the money is taken by whoever is on seat. As for making laws to include things there is no law that includes disabilities that are not visible. Invisible disabilities are not recognised here at present so no provision are made for them it is only visible disability like blindness, deaf and dumb, these ones have provision in schools but the other ones no’.

In line with the respondents’ argument, Amusat (2009) argues that the poor perception of disability and people living with it has fuelled the lacklustre attitude of government in terms of policy direction and action. Amusat (2009) further argues that the perception of people with disability has to change, not only within their families and society, but also among the policy makers as the unprejudiced view of people with disability backed with adequate policy directions improve the public perceptions of disability. A rights based approach to ensuring positive policy direction seems to be the answer in this instance. Albert and Hurst (2005)
argue that a rights-based approach is about the removal of physical and social barriers; it is about attitude adjustments for policy makers, employers, teachers, healthcare professionals and even family members. Albert and Hurst suggest that the approach requires government to provide the resources necessary to implement goals and to enforce penalties for those who refuse to cooperate.

Regarding individual effort and support in investigating disability issues a headmaster pointed out that although at present there seems to be a barrier posed by the attitude of the people there could be hope of bringing awareness to limelight if more individuals on their own expressed interest which could probably lead on to a spark of government interest in the area. The headmaster stressed:

‘...our people are not advanced at all. We do not think of improving something at any given point. They can’t imagine change. Some private individuals are trying to start their own. Like this interview that you are doing now if you come here and get money, you may like to start something like that. It is all on your own government may take interest in what you are doing’.

In line with the point raised by the headmaster, Racham (2003) suggests NGOs should work hand in hand with governments to encourage the participation of all people, especially those who are at the grass-root levels, to participate in educational development.

A respondent expressed that the lack of predicted foresight was a possible reason for lack of interest in, and dedication to disability awareness issues. Interestingly a headmaster was of the opinion that the negative attitude of teachers played a role in the present situation. The view expressed was as follows:
‘lack of foresight - our poor interest on children. We have very poor interest in rearing children. Here in Nigeria we don’t think that the rearing of children, bringing up children is very important. No interest in forging ahead going to areas we don’t know about, spending money on things you do not know will be the value when you find it out. Spending money, what for? If you discover that there is a disease like this or a sick like that what the Nigerian teacher will ask you is ‘what then?’ ‘What are you going to do?’ Nothing you are not going to do anything. They do not feel that they can do anything about such a thing they say it is natural’.

In the respondent’s view the cultural orientation of the people cannot be overlooked in this matter. In the respondent’s own words:

‘... our people believe so much in destiny. Their progress is part of their destiny therefore if you cannot learn, you cannot spell, you cannot read, it is your destiny nobody is going into probe into your destiny. They have no time to look at someone who cannot read and write let him stay there he can go and cut the bush, he can learn to mould blocks [for building houses]. Not everyone can speak English according to them. Changing a pattern of something that is there all the time, how can they change it? [Interpretation of segment of interview expressed in vernacular: He isn’t clever. Those that can read let them read those that can’t let them stay so we can see those that will serve]’.

The mention of cultural beliefs of the people and their impact on educating children who have difficulties with learning is very significant in that it lays emphasis on social construction of the understanding of disability and abilities of the disabled in the society. The social model however views the understanding of disability differently. Whereas the respondent has addressed disability as being located within the individual, the social model identifies the environment and society as the disabling factors because the neuro-diverse nature of the individual in question as in the instance given above has not been taken into consideration. The individual is expected to conform to expectations of society and where this is not possible they are excluded from enjoying the ‘pleasures’ made available to the non-disabled – members of society that can fully participate within the society.
Regarding issues pertaining to financial constraints as a possible reason for the lack of government dedication and interest in exploring dyslexia, the following response given by a headmaster reverts back to the point made about how the lack of funds is not an issue rather the whole crux of the problem is related to lack of dyslexia awareness.

‘...if the awareness is created since we have the right of the child, the government will handle it without minding what it cost because the government pays important priority in education so if the awareness is created the government will tackle it not minding the money spent on it’.

In agreeing with the fact that the lack of finance plays a minimal role in reasons for the lack of dyslexia awareness a teacher said:

‘Nigeria is corrupt that is the way I understand it. They don’t want to introduce new things in the education sector. It is not that they don’t know it because you see most of the governors and ministers they do travel even their children are trained abroad it is not that they don’t know these things they do know but it is that corruption that we are talking about, that is what is causing it’.

The following extract taken from a teacher’s interview subtly suggests the possibility that the powers-that-be may be aware of dyslexia as a learning disability but it appears it has, as in a manner of speaking, been ‘swept under the carpet’:

‘The way I understand it is that most of the other countries – European countries they are developed, they are civilized but our own, they are just managing. Another thing is corruption they might have it in mind to do such things then those people that are involved let me say the ministry of education and others they might not be able to. Maybe the government have encouraged them to engage in such things but where is the money? They are looking at the money and then when they see the money they will just misuse it for other things, it is not that they don’t know about it’.
If this be the case, then one might argue that there should be serious legal implications for not acknowledging and supporting pupils with specific learning difficulties but only if there is a place where such has been mentioned in legislation. A typical example of such legislation that schools in the UK are compelled to adhere to is the Disability Discrimination Act (1995) (amended 2005) and the Special Educational Needs and Disability Act (2001) where these Acts make it unlawful to discriminate or treat a person less favourably on the grounds of race, gender or disability in regard to employment, training and education and in the provision of services.

The implication of this Act is that it reinforces the obligation of schools that have admitted and enrolled pupils to provide educational support which takes into account the nature of their learning difficulty. This re-emphasises the importance of labelling as a prerequisite for funding, learning support and disability debates. However much one admits that something is amiss without the presence of identifiable terminology with which one can associate the learning difficulty there appears to be a vacuum as there will be no grounds to engage in debate as to whether or not such a disability or difficulty should be accounted for in the school curriculum. Again this has implications for how this transfers to inclusive practices within a school. The political nature of labelling is that it either creates a platform for where people with disabilities are included or excluded. The existence of a diagnostic label which describes a disability featuring in disability policy creates room for funding and support. The lack of it unfortunately connotes that there is no anchor for debate to substantiate the need for support and funding. As Yeo (2005) points out changes in language and documentation about disability
may be the first step to more practical progress. In many ways there is reason to believe that a medical model approach to viewing disability could to a great extent afford the much needed channel to the recognition of dyslexia because diagnostic labelling is associated with the medical model. A diagnosis of disability implies that one has been medically certified as having a disability. In as much as the medical model is relevant it is equally of paramount importance that a balance is established between labelling one as having a disability/difficulty, hence the need for support, and the acknowledgement of the need for society to make adjustments within the school and other structures for people with disabilities taking into account the unique nature of each disability/difference. This will inevitably require a social model based approach to addressing disability matters where the emphasis is no longer on the expectation that people with disabilities should conform to expectations and norms of the non-disabled in society.

Interestingly, an outstanding opinion was that there is more to it than the lack of funding rather the lack of government interest in research is a major overriding problem. In a lecturer’s words:

‘...it’s not only in funding, government are not interested in researching although that also includes funds but there are some researches that may not include much funding from the government that individuals may be interested.’

Similarly a teacher reported:

‘...to me if I am to say from my own perspective I will say it is just lack of government interest because if it is funding I know that Nigeria has the money to fund their education but it is just lack of interest when you mention funding.’
A teacher pointed out that the problem is more likely associated with the mismanagement and squandering of government funds especially funds allocated specifically to education. In her view she expressed:

‘Talking about Nigerian system of government we do not have trustworthy people in the affairs of government everybody is selfish. Anything at all goes. In terms of funding education I think that the country has the money but people at the top of affairs are not willing to deliver.’

A headmaster pointed out that the lack of government interest in including children with special needs has had a negative impact on primary school children with special needs in the rural areas. The point expressed was as follows:

‘What the government does is this, you see, the government does not cater for children in the rural areas they focus their attention so much on the children in the urban areas so for this the children in the rural areas who have disabilities they suffer a lot.’

Lack of dyslexia awareness in primary schools resulting from insufficient government interest in education as a whole was identified as an attributing factor resulting in a shift from the value of education, originally supposedly the source of power and wealth of the nation, to the acquisition of monetary wealth – a source of power craved by people in position to effect desired changes in the educational system.

A respondent reported:

‘... I have said that the government is not interested in the people. The government talk about themselves alone not for the masses, the development of the masses. When we also look at the nature, the value of Nigerians, we are changing from what the value of education was at the
initial stage when the ‘whites’ came, to a different thing all together today and that is affecting our learning system. More emphasis is made on money rather than the source of making the money which is education.’

It was further expressed that:

‘... they[government] are aware that the instructional materials that are required for exposing the child to formative writing processes identification of figures and letters, formation of words are not produced in Nigeria and need to be imported therefore they [people in government] may not like to spend such amount of money. So they [people in government] prefer even using such money for personal business than investing it for the masses.’

As a possible solution to the problem of how government interest in dyslexia awareness could be stimulated a headmaster expounded:

‘...not all of them [policy makers] are educated in this line. It is very unfortunate that this area of education is not cared for yet, not yet talked about. But if somebody studies it and comes in they will get our people get interested. With the lecture you gave us the other day if I were to be a young man now I could have started going into this area to see what I can do, exploring this area. I’m learning and hearing it. My experience about the type of children I have seen in my teaching career has made me feel very sorry for them that nobody has found about their plight. ... it is education that will bring interest’.

The lack of investigation into educational and disability matters not widely acknowledged in society has had severe knock-back effects on provision for primary school children with unidentified dyslexia. In relation to this a headmaster remarked:

‘...there is no other reason than the government do not find it necessary to spend their money in areas not yet channelled by some other people. They are following normal patterns that other governments have been following, no investigative study anywhere and there is no provision for such investigations. Government do not find it easy to accept that it is
their duty to investigate such things. The state government does not know about the problems of the primary school child’.

6.4.4 Theme 4: Impact of lack of specialist training of primary school teachers on inclusive practices in primary schools.

Following the Warnock Report (1978) compiled in the UK for the Department of Education and Science on students with special educational needs, it is widely accepted by many countries that on average between 15 to 20 per cent of students will have special needs at some time in their school careers. In order for schools to be in a position to adequately cater for the needs of children with special needs there is undoubtedly a need to adequately train teachers. The general consensus of respondents was that at present there is a dearth of qualified teachers to address inclusive practice. A teacher elaborately reported:

‘...lack of training affects teaching in various ways, one the teacher can only give out what he or she knows so in terms of this problem the teacher can’t handle anything at all concerning this particular issue so the problem of solving this problem of dyslexia or all these disabilities the teacher doesn’t even know anything about it so what he or she does is just to give out what he or she has not even checking the interest of the learner.’

The lack of empowerment of teachers to address specific learning difficulties in the classroom through training and the restrictions the lack of training poses on lesson planning and methods of delivery are problematic issues; ones that presently affect the implementation of inclusive education in Nigeria. Teachers cannot address learning difficulty issues in the classroom if they lack the expertise and training to do so. In pointing out the importance of empowerment, Hegarty
(1994) stresses that the ability to successfully instruct students in any setting requires more than training; it requires that teachers feel empowered to apply new skills and competencies. Empowering teachers to cater for the needs of dyslexic learners should begin with dyslexia awareness at national policy level. For this to happen there needs to be explicit interest expressed by the government and stakeholders in education because successful implementation of educational practices at national level cannot exist outside government policy. Acknowledging dyslexia at policy level will create opportunities to enforce and develop a more inclusive curriculum in schools, one that will not only take into account physical disabilities but also the more subtle and ‘invisible’ disabilities such as dyslexia.

With regards dyslexia training a headmaster reported:

‘If teachers are trained to handle this disability I think they will perform well. Lack of training affects teaching and learning because this problem will be drawing the teachers backwards since they (children with dyslexia) are not moving at the same rate with other children, ‘normal children’.

Interestingly, the use of the phrase ‘normal children’ to describe children that are not dyslexic is revealing. Not only does such a phrase tender towards a medical model view of disability, it also has cultural connotations in that it depicts who is deemed a ‘normal’ child and a child who is ‘not normal’ because of experienced differences of ability. Many western nations for instance in taking on a more social model approach to understanding disability have gone beyond referring to children with cognitive disabilities as ‘abnormal’ because of the political incorrectness associated with such terminology. Rather more subtle labelling such as ‘learning difficulty/disability’, ‘learning difference’ and neuro-diverse have replaced such terminology that will today be considered derogatory. Secondly, the
social model of disability has had positive impacts on disability right issues and ways in which disability is now perceived in many societies that have embraced the model.

On the importance of training, a headmaster voiced his opinion as:

‘...learning can be very hard for children because there are no specialists, there is no special training for teachers, in such areas the children are not well taught... children suffering in such areas suffer deep into it, nothing is done to help. If a child cannot learn, spell well we cannot send the child to a specialist teacher. The child leaves school not knowing how to spell. Some children leave school hating areas they couldn’t do well. Not doing well in these areas is not their fault. It is the fault of the government because they could have provided that child with a specialist teacher at least in the primary schools’.

According to a teacher there is more to successful teaching and learning than training. The point emphasised here is that the onus lies on the teacher’s natural flare and passion for teaching rather than training. The teacher emphasised:

‘...the thing is that at times teachers they don’t have the talent. Some people are looking at the money they will get but forgetting that it’s said that the teacher’s wages or reward is from God because they are dealing with human beings. But it is not what some are looking at they are just looking at the money they will get at the end of the month forgetting that whatever they impart in the children is what the children will use in future’.

However on the issue of lack of specialist training needed to address dyslexia the teacher expressed her concerns as:

‘...teachers are not trained adequately to teach them (dyslexic pupils). A subject/topic that you are supposed to teach in one week you find out that it is taking you up to two weeks and apart from that you will not be happy with yourself. Like my very self if I teach a topic and at the end they are
not able to answer the questions I will feel as if I did not do anything so that will make me go back to that topic again instead of moving forward’.

Apart from the lack of specialist training another aspect raised as a barrier to effective teaching and learning was the lack of necessary teaching materials to carry support forward, a lecturer stressed:

‘...few of them who are well trained find it difficult to teach in their working environment because most of the materials are not there, the facilities are not there, the teaching aids and instructional materials are not there and they are not well paid as to improvise... their training environment is not a replica of their working environment’.

Regarding the lack of specialist teacher training and its impact on educating children with disabilities, a head of school expressed the following:

‘...what happens is that you talk of specialist training, here there is no question of specialist training for primary school teachers. All primary school teachers undergo the general learning nobody is sent... of course we don’t have specialist training schools here so every teacher undergoes the normal teacher training and then that’s why when you come out you will not be able to identify a child that is disabled so for the fact that teachers do not receive specialist training here they find it difficult to identify children who have disabilities.’

6.4.5 Theme 5. Extent to which disability legislation supports primary school children with invisible disabilities

In Nigeria, the WHO estimates put the number of people with disability at 19 million or approximately 20% of the country’s population (Lang and Upah, 2008). However, Amusat (2009) argues that there are no credible and robust statistics in
Nigeria about most things, including disability and as such there is a big knowledge gap that needs to be bridged. Respondents were of the view that disability policy needs to be revisited in order for there to be a comprehensive inclusion of other hidden disabilities that are none the less worthy of attention in disability legislation. Making sense of what is socially constructed as the understanding of a disability sheds light on understanding ways in which policy is created to address disability issues in society. Schneider and Ingram (1993) and Ingram and Schneider (1993) postulate that social constructions have an especially important role in understanding the current policy crisis because these constructions are instrumental in determining the policy agenda and the actual design of policy itself.

Regarding changes to existing disability legislation, a head of school commented:

‘There should be some changes. We have to start somewhere. If someone could start from Imo State to change the policies of education and put in some policies that will help these kind of people, gradually other states will pick it up. We cannot leave the current policy as it is.’

The general principles of the Nigerians with Disability Decree (1993) emphasises that the purpose of this Decree is:

- to provide a clear and comprehensive legal protection and security for Nigerians with disability as well as establish standard for enforcement of the rights and privileges guaranteed under this decree and other laws applicable to the disabled in the Federal Republic of Nigeria.

Respondents, however, were of the view that the Disability Decree is not comprehensive enough to address disability issues.
The following interview extracts from different respondents show their views on the need to re-visit and elaborate disability policy:

‘It should be revisited because here in Nigeria the major emphasis is on physical disability not cognitive disability because somebody may be physically in his appearance very, very well moving from one place to another discussing freely with people but intellectually be is deficient, he has a problem so it needs to be revisited and more emphasis be given to it because that is a hob that tries to energise other parts of the body – the cognitive.’

‘The government should expand to accommodate all this, to enable them handle education.’

‘Yes I think it needs to be revisited because there are some certain things that need to be included which are not there so if it is being revisited some certain things that are affecting our pupils now will be enshrined there and thereby it will help to boost the country’s educational system.’

‘I believe it is good to revisit the provisions, the government policy on education particularly as it concerns disabled children you’ll find out that here in Nigeria all these things are being said they are not practiced.’

‘I think that if the policy on education is revisited especially as it concerns the disabled children much will be achieved.’

‘When you look at the number of disabilities people have what the decree is talking about is just about one tenth of it. It should be revised in order to include new discoveries in education. No decree should stand still like that. Things change, human beings change so decrees and policies that rule human beings should change with human beings. So rules and regulations about disabilities and disabled people need to be revised to include the invisible disabilities we have just discovered.’

Schneider and Ingram (1993) propose that ‘citizens have not been educated about social constructions, and have not been able to develop critical lenses that enable them to see through such constructions. As a result, the opportunistic manipulation of social constructions continues to permit legitimating of policies that do not serve the public interest and often are ineffective and inefficient.’
The following opinions expressed by three different respondents suggest the need for a more hands-on approach to disability identification in legislation. It is suggested that this is needed to remedy the current situation in order for there to be positive impacts on provision for primary school children with dyslexia:

‘One is that the legislators have not even identified it as a problem, that is the major issue so it needs a lot of enlightenment to enable the legislators identify it and see it as a major problem then find a way of solving that problem by including it in the Nigerian constitution.’

‘There are no innovations. It’s when you talk about innovation that you talk about changing the policy or revisiting the policy of the government but such things are not practicable or they are not being practiced.’

‘The government have been trying to put in new policies in education but not all of them do work for them. It is due to lack of education very few hands are doing this. Sometimes when they make a policy people that know about the policy are very few they are not even in the school system.’

‘Some of the government policies in education are very good but people who will implement them are very few.’

6.5 Conclusion

Opinions expressed by respondents suggest that Nigeria as a whole and Owerri West in particular is yet to see a breakthrough in the area of learning disability awareness in general. Although moves have been made to address disability issues in schools, there is still an identified need for a more comprehensive approach to support provision for pupils with SpLD in primary schools. It was also suggested that education is a part of culture. Rachman (2003), states that in developing the
educational policies of any country, cultural factors should be taken into account. In support of this proposition, respondents’ views on disability policy and legislation emphasised that education is indeed part of the society’s culture. It was identified that social, political and cultural obstacles are some of the barriers which hinder significant positive disability awareness in Owerri West.

It has also been established in this chapter that there is a co-existence of models of disability that are reflected in disability practices as it concerns inclusion in primary schools in Owerri West. Although there appears to be a dominance of the moral model which is embodied in cultural attitudes towards the disabled and constructed notions of disability prevalent in society, there are also snippets of the medical model in the way disability is understood. Nevertheless, it is argued here that the social model offers a more rights based approach to inclusive practices. It has also been highlighted that views of disability are socially constructed and are grounded in what one might refer to as dominate ideologies of disability. However there appears also to be a back and forth movement of how disability is perceived in Owerri West. On the one hand it could be deduced that respondents are of the view that there are strong moral grounds which propagate disability perceptions and on the other disability perceptions are driven by science as well as human rights all of which play a part in creating the uniqueness of the interpretations of disability given in this study.

The next chapter, chapter seven summarises the study and makes recommendations for the propagation of dyslexia awareness.
CHAPTER 7

Facts which at first seem improbable will, even on scant explanation, drop the cloak which has hidden them and stand forth in naked and simple beauty.

(Galileo Galilei, 1564 - 1642)
7. Conclusion

7.1 Introduction

This study set out to investigate reasons for the lack of dyslexia awareness in Owerri West, Imo State, Nigeria.

The following research questions led the research:

1. What are the forces that drive inclusion in the educational system and how has this impacted on dyslexia awareness and curriculum planning in primary schools in Owerri West, Imo State, Nigeria?

2. To what extent are the conceptions and perceptions of learning difficulties/disabilities as a whole responsible for the lack of dyslexia awareness in Nigeria and how has this impacted on dyslexia awareness in primary schools in Owerri West, Imo State, Nigeria?

Using the social, medical and moral models of disability as a platform to engage in interpretive discussions around disability awareness created an avenue to view disability debates from various angles and possible implications this has for inclusive practices. The subsection of this chapter which addresses the summary sheds more light on this aspect while highlighting the key findings of the study. This chapter summarises the study and makes recommendations as suggestions for propagating dyslexia awareness in primary schools in Owerri West.
It is evidenced in this study that cultural perceptions of disability play a vital role in reasons for the lack of dyslexia awareness in Owerri West. These cultural and historical perceptions of disability are socially constructed and played out in various domains in the society. The way disability and learning support is addressed within the school structure, among families and in disability policy is a reflection of the society’s interpretation of disability. The findings from the interviews in particular show that the constructed understanding of disability does not portray invisible disabilities in a positive light. The study highlights that with regards to inclusive practices in primary schools in Owerri West, dyslexia lacks status because the learning disability/difficulty presently has no medium to promulgate its existence. Dyslexia does not yet feature in government disability policy and also teachers are not trained to support dyslexic children. In addition to this, many families with children who have disabilities which affect their ability to acquire efficient language and literacy skills are disenchanted at the prospect of educating children they believe are uneducable. Schools should take on a rights-based approach to making available learning support to pupils who need it. Unfortunately the society itself does not have an understanding of the learning potentials of dyslexic children and this in itself has created a knock-back effect on the way inclusion is addressed in schools.

This study raises questions as to how inclusive one might argue the present practices on inclusion are if invisible learning difficulties are not catered for in the educational system. The way forward in this matter is hindered because at present it appears there is no place for the much needed dialogue to propagate discussions
around dyslexia because at present dyslexia or the linguistic equivalent is not part of the social construct of disability neither does it feature in disability policy.

The research aims were to:

1. explore possible reasons why very little research has been carried out in the area of dyslexia in Owerri West

2. examine reasons for lack of government attention and recognition of hidden disabilities and explore how this has impacted on policy making in the area of specific learning difficulties

3. investigate how ideologies for acceptance, policy making and funding in the realm of special needs education are inevitably determined by general conceptions and the understanding of special needs in Owerri West, Imo State and Nigeria in general

4. scrutinise reasons why government departments dealing with disability in Imo State Nigeria seem to lack dedication in terms of exploring new avenues to include children with specific learning difficulties

5. investigate how the lack of specialist training in the area of dyslexia awareness impacts on classroom teaching in primary schools in Owerri West, Imo State

7.2 Summary

This study has taken me on an expository journey that has been very enlightening. It has in many ways shed light on issues around the lack of learning disability awareness as a whole and the impact this has on learning support provision in
primary schools in Owerri West. The findings of this research highlight how primary school children with unidentified dyslexia are disadvantaged by a system that does not recognise them. Dyslexia not only makes it difficult for learners to succeed academically in a typical instructional environment that does not cater for their needs but it could also affect the self esteem, self perception and self image of learners. The problem in effect resides with the lack of support provision rather than the ‘problems’ caused by the learning difficulty. These issues if unaddressed could ultimately impact negatively on learners’ future education prospects and career choices. Although dyslexia cannot be eradicated no matter how skilled a teacher is, dyslexic pupils can still enjoy their learning experience if they are supported for their difficulty. Therefore the issue at hand is not merely a question of good teaching delivered at the right time, rather an avocation for learning support delivered at the right time and followed throughout the educational process.

**Research question 1**

What are the forces that drive inclusion in the educational system and how has this impacted on dyslexia awareness and curriculum planning in primary schools in Owerri West, Imo State, Nigeria?

It was suggested by interviewees who participated in this study that the two main forces that influence inclusive practices in primary schools in Owerri West are influential people that drive disability policy and the societal perceptions of disability which are embodied in cultural and historical beliefs. The impact of
these forces is visible through the level of disability awareness in society and societal values of the disabled which permeate school values, school management ideologies and inclusive practices.

This study reveals that inclusive practices in primary schools in Owerri West are mainly limited to physical disabilities. It has been identified that the way inclusion is addressed is subject to what is known to exist as a disability and the available resources on the ground to implement inclusive practices. In the case of this investigation, the evidence presented suggests that inclusion is not fully addressed or implemented in the area of specific learning difficulties due to the lack of disability awareness especially in the area of dyslexia. Perceptions of disability influence the interplay between political and disability rights and this has an impact on the extent to which people with disabilities feel they are fully included as equal participants. It is important that the interests of people with disabilities become a significant part of the discursive process of policy framing, formation and implementation.

This study highlights that the understanding and practice of inclusion in every society is subject to:

- a society’s knowledge of what inclusion entails
- what the society deems necessary to be included in the school curriculum
- what society is aware of that needs to be included in the curriculum
- government clauses as featured in policy on inclusion and inclusive practices
The findings of the study suggest that legislation governing inclusive practice is very much a reflection of societal awareness, views and opinions on disability issues. Ideas, problems and solutions are contextual; they are manifestations of what goes on in society, the resources at hand to deal with situations and the society’s unique way of handling situations given the knowledge and awareness that is available to the society. Examining the different models of disability has provided an insight into systematic approaches that could be applied to understand the causes and contexts of disability. Investigating how the moral and medical models of disability are played out in the society and of how the application of the social model could bring about an improvement of inclusive practices through a shift in direction of thinking is necessary to disability discourse. Taking on a social model approach has great implications for how one might argue the need to and firmly establish disability rights that need to be at the forefront of future practices and debates on inclusion.

The findings of the study also reveal that the inadequate ways in which learning difficulties are addressed in the school curriculum has led to pupils with unidentified dyslexia being placed at a disadvantage in the educational system. As such, there is a potential danger of less academic achievement by these pupils. As an impact on the broader society this could potentially be one of the contributing factors leading to poor literacy rates in Nigeria.

With regards curriculum planning and the inclusion of dyslexic pupils, there is at present no provision made for identifying and supporting children with dyslexia in the primary schools investigated. This is partly due to the lack of specification in
government policy and the lack of address in the teacher training curriculum. This lack of address in the teacher training curriculum has led to the lack of trained dyslexia support staff in primary schools. As a result there is no dyslexia support provision in the form of one to one learning support sessions, small group support sessions or in-class support for dyslexic pupils.

The three forces that influence the curriculum, identified by Breslow et al. (1960) which have been discussed in the literature review are relevant to the study with regards to the way forward. These forces are summarised as: forces generated by special interest pressure groups; social and technology trends and new insights from scholarly fields, all of which are in line with the needs identified and highlighted in the findings of this investigation. The findings of this investigation suggest that there is a desired need for expressed interest in the area of dyslexia support among influential people that can influence change. There is also the need for attention to be paid to the advantages of assistive technology as a means of enhancing learning and providing learning support to pupils with learning difficulties. There is also the need to call on educators with a passion for teaching to broaden their scope of knowledge in the area of specific learning difficulties through staff development training. This should be done with the aim of cascading acquired knowledge and support strategies in the area of specific learning difficulties which it is hoped will transcend beyond the parameters of the classroom into the broader society.
Research question 2

To what extent are the conceptions and perceptions of disabilities and learning difficulties/disabilities as a whole responsible for the lack of dyslexia awareness in Nigeria and how has this impacted on dyslexia awareness in primary schools in Owerri West, Imo State, Nigeria?

The findings of the study highlight that the understanding of disability and support offered to the disabled in society is predominately geared towards physical disabilities. As a result, hidden disabilities go unnoticed in schools, among families and in the broader society. Children who cannot cope with learning are considered dull and are sometimes withdrawn from schools to learn a trade. Disablement has manifested as a result of ignorance, prejudice and discriminatory practices in society. This outlook on disability is in line with the views held strongly in the moral model which this study suggests is still one of the views of disability predominant in Owerri West. The study reveals that negative attitudes towards the disabled are borne out of social interactions and practices that have existed over time and have become part of the constructed ideas that the society holds. As suggested by the social model, these negative perceptions of disability are socially constructed. The way forward to creating a solution to this problem is to reconstruct the perceptions of disability that are prevalent in the society by taking on a more social model approach and secondly to restructure society in a way that barriers to participation are removed because it is the barriers that prevent people from participating that disables them.
The understanding of disability in general plays a great role in determining who is educable and who receives support. The implication of this is that limited awareness of disability will have dire effects on inclusion in primary schools. It could be argued that the lack of awareness of disability and inclusion issues among stakeholders in education has led to poor quality of teaching in primary schools as well as poor address of learning support provision. This presents the danger of poor pupil achievement in schools. One cannot however disregard the role disability policy plays in propagating disability awareness in a nation. The lack of mention of dyslexia in legislation poses a problem because one can only implement what one is aware of. The findings of the study suggest that inclusive practices are a reflection of the society’s understanding of disability which it appears are in tune with the medical and moral models of disability. As such disability issues pertaining to inclusion are not approached to a great extent from a human rights perspective. However a positive outlook on inclusion will be determined by the extent to which ideas promulgated by the social model are embraced.

The study highlights that the understanding of learning difficulty/disability issues are culture bound. The nature of existing educational practices, are a reflection of this. The suitability of any practice will determine how well practices are adopted and adapted. Figuratively speaking, it is not a case of ‘one size fits all’. Policy and implementation is one thing, acceptance and workability is another. The beginning of successful policy implementation should start with awareness of a concept among society as a whole. People need to understand why things are being done and the benefits of what is being done. Dictating what is to be done
without preparing the society and workforce to take on the challenges ahead is not practical.

7.3 Outcomes of the study

This study has highlighted that the factors causing the lack of awareness of dyslexia in primary schools in Owerri West and the negative impacts resulting from this are rooted in societal understanding of disability, cultural perceptions of disability, the lack of reference to invisible/hidden disabilities like dyslexia in national disability policy and legislation. The lack of statistical evidence of the population with dyslexia owing to the lack of extensive investigation of learning disabilities in the country as a whole is also an issue. This research highlights perceptions and views on issues raised around the marginalisation of individuals with learning difficulties, not only in classrooms, but in society as a whole. The research sheds light on the effects lack of dyslexia awareness has on teaching and learning in primary schools in Owerri West, Imo State, Nigeria and the possible impact this has on literacy levels in the country as a whole. The matters arising in the study are related to underpinning theory and models of disability which have been used in this research to create a more explicit understanding of the implications in a wider context. The findings of this research, if taken on board by the driving forces of the school curriculum as well as policy planners, could possibly serve as a pivotal point for presenting strategic ways of bringing about changes in the way learning difficulties as a whole and dyslexia in particular is addressed in the school curriculum.
7.4 Contribution to knowledge

The originality of this study is substantiated through the fact that no research has been done on dyslexia awareness in primary schools in Owerri West. Primary source evidence and first hand information gathered from discussions with respondents, coupled with academic studies on research databases, where nothing was found on dyslexia support provision in primary schools in Owerri West, is evidence of this.

It is anticipated that the issues raised in this research will present a whole new dimension to viewing the much needed additional learning support provision for pupils with specific learning difficulties in Owerri West. It is also hoped that original primary source data derived from the study will help inform ways of effectively catering for learners with specific learning difficulties as a whole, not only in Imo State but also in other states in Nigeria. It is ultimately hoped that the findings of this research will prompt a more thorough investigation into dyslexia awareness in Owerri and effective ways of including children with dyslexia in primary schools.

7.5 Impact on professional practices

There is a need to address shortfalls of inclusive practice and the impact this has on unidentified dyslexic pupils in primary schools in Owerri West. While emphasising the need for teacher training in the area of dyslexia, the study also
suggests various practices as a means of involving stakeholders, policy makers and educators in creating dyslexia friendly primary schools.

The results of the study ultimately form a basis for advocating dyslexia awareness in primary schools. It is hoped that evidence drawn from original primary source data derived from the study will stand as strong arguments for the need explore further the existence of dyslexia in primary schools in Owerri West. One of the goals resulting from this study is to create a pivotal point for addressing the awareness of dyslexia in the society investigated by publishing the research findings. It is hoped that this will be a medium for creating awareness. It is anticipated that the awareness created will extend to various primary schools in other parts of Imo State and impact positively on curriculum planning, teaching and additional learning support.

This study creates an opportunity for teachers and educational practitioners to question current practices that do not favour dyslexic learners. It is anticipated that matters arising from this research will lead on to professional awareness training to better equip primary school teachers not only in Owerri West but Nigeria as a whole.

As a dyslexia support specialist in my current place of work, this study is of great benefit to me as it will enable me support dyslexic learners from various cultural backgrounds more efficiently bearing in mind the possible stigma that is often attached to learning disability/difficulty. Here I make specific reference to students who come from various African backgrounds where there may exist
possible similarities in perceptions and approaches to disability (moral and medical models) which have been highlighted as predominant perceptions in Owerri West. I now have a better understanding of how the lack of early identification of specific learning difficulties could impact negatively on academic performance, especially among students from various African backgrounds where disability is seen in a negative light.

The understanding I have acquired from this investigation will with no doubt place me in a better position to understand why some of the dyslexic learners from Nigerian backgrounds in particular that I come across in my profession feel stigmatised when informed that the underlying difficulties they experience in learning are indicative of dyslexia. While some find being diagnosed as dyslexic liberating and feel a sense of relief knowing that there is nothing ‘wrong’ with them and that support is at hand, others find such a revelation rather daunting because of the stigma attached to disability in the Nigerian cultural context.

7.6 Recommendations

There are two sets of recommendations resulting from this investigation that have been put forward: recommendations made by the respondents who participated in the study (see recommendation extracts from respondent interviews in Appendix A) and recommendations based on the findings of this research.

The rationale for using the ‘voice’ and contributions of the respondents is that this is a study based on the experiences, opinions, feelings and emotions of the people
studied. Therefore respondents’ contributions are very relevant. What they deem as areas in need of improvement, in my opinion should be considered credible as they are the ones living in and experiencing the reality of the society in which they find themselves. They are also the ones who will benefit from the desired changes to the educational system. The following recommendations are based on the findings of this research.

7.6.1 Recommendations based on research findings

In light of the findings of this research I make the following recommendations:

- The importance of surveys should not be underestimated when embarking on educational projects. As well as providing evidence of the existence of dyslexia, carrying out a survey is necessary not only for designing policies for the purpose of inclusion in education but also for political, social, economic and cultural participation. I therefore recommend that the government carry out a comprehensive survey to investigate and provide statistics of people who have dyslexia in Nigeria at national, state and regional level.

- The definition of cognitive, neurological and developmental disabilities should feature clearly in definitions of disability at national policy level. The support provision for learners with the above mentioned disabilities should be written into educational policy and implemented at various levels of education. Doing this is a positive step towards identifying with
inclusion ideology on a broader scale. It will ensure equal opportunities and propagate disability rights of primary school children.

- I further suggest the need for trained manpower to handle the challenges of identifying and supporting pupils with dyslexia and other learning disabilities/difficulties not only in Owerri West, but nationally. I propose that future national policies on disabilities that result from the awareness created be made relevant to the societies concerned. I advocate for government and non-governmental organisations’ involvement in creating awareness and having dyslexia support feature in legislation across the board. I suggest that culture sensitive diagnostic assessments are developed for dyslexia assessment and diagnostic purposes in Owerri West.

- I recommend the allocation of government funds for the implementation of the projects that will result from the above mentioned investigations. I suggest implementation of projects should be kept within the remits of reasonable financial targets that can be maintained and sustained over time. It has been established in this investigation that part of the problem with carrying out educational policies is that the goals set out are both unrealistic and unsuitable for the Nigerian society. Also identified is the problem of allocated funding being too exorbitant to sustain. I recommend that goals set out to ensure support provision of learners with learning disabilities are realistic to the society. It is very important that realistic projections are made.
I recommend that the Ministry of Education should be involved in propagating dyslexia awareness in Imo State. Schools, teacher training colleges, tertiary institutions and stakeholders in education should also be involved in the process of disseminating dyslexia awareness.

I recommend the involvement of NGOs, educational institutions and the media in breaking down disenabling barriers posed by historical traditions, culture and societal perceptions of disability. I recommend that all stakeholders in education, including parents, be involved in decision making processes with regards to special needs learning support provision in schools. Only then will special educational needs and inclusive practices be relevant to the society.

I recommend that the government of Nigeria and NGOs collaborate to fund continuing professional development training of teachers in the area of specific learning difficulties. I also recommend that the teacher training curriculum should be revisited to address dyslexia. Teachers should be trained on how to apply support strategies to enhance the learning experiences of pupils with specific learning difficulties. The use of assistive technology in supporting learners with learning disabilities/difficulties should be included in the teacher training curriculum.

I advocate in-house training in the area of SpLD for primary school teachers in order for them to keep abreast with recent issues in SpLD support provision and also for them to update their already existing
knowledge. There is also the need for schools to be better informed about special educational needs as poor awareness of this places limitations on inclusive practices. The educational system will benefit from encouraging special needs trained teachers to join forces with mainstream teachers as this is crucial to ensuring achievement and positive learning experiences of primary school children with learning disabilities/difficulties.

- I recommend that the government as well as NGOs should collaborate and allocate funding to primary schools in Owerri West in dire need of teaching materials and assistive technology. This will not only benefit the unidentified dyslexic child but also make the learning experience of every child more pleasurable.

7.7 Conclusion

It has been established that the effect dyslexia has on learning is evidenced through difficulties with processing information especially in the areas of reading, writing, spelling and memory retention. Even though there are yet to be available statistics to substantiate the claim that there are dyslexic pupils present in primary schools in Owerri West it can be argued that evidence gathered through primary source data in this study is reason to suggest that dyslexia does exist in primary schools in Owerri West. This stands as strong grounds to argue that further investigation is needed as the extent to which dyslexia exists in Owerri West is not yet known. The implication of this is that there is therefore reason to believe that dyslexic learners are present in primary schools in other states in Nigeria. The
issues highlighted and the findings of the study indicate that there are strong arguments for dyslexia to be given status as a specific leaning difficulty so that dyslexic learners will be catered for in the Nigerian educational system.

Many interesting issues have been raised in this investigation. However, limitations posed by the fact that this investigation was carried out for the purpose of a doctoral thesis has made it is impossible to delve deeper into many interesting issues. Still, aspects that warrant further investigation could be the bases of further research. This study has provided a foundation for future research to be built. It is hoped that the findings of further research will help create a more rounded picture of dyslexia awareness in Nigeria. It is also hoped that further research in the area would have great impact on Nigerian disability policies and as a result, have positive impacts on learning support provision for dyslexic pupils in primary schools in Owerri West.
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Appendix A: Recommendations by respondents

A headmaster identified the unsuitability of the learning environment, poverty, the lack of staff development training and quality supervision as areas that ought to be addressed. In making recommendations to improve on these areas he stated:

- Starting from the environment that is the accommodation the government should provide a very good environment for effective teaching and learning by providing some infrastructures like as tables and chairs.... as you have seen some of them here, making the classrooms standard paying teachers as at when due. Let there be seminars, symposiums, enough supervisor that will go round to monitor effective teaching and learning. Government should provide text books and if possible make primary education free education to elevate the suffering of parents. Some schools don’t have pupil seats some children don’t have textbooks even common exercise books some parents find it difficult to buy exercise books.

A teacher made the following recommendations for improving overall quality of teaching:

- In the aspect of the teachers the government should endeavour that the teachers that are employed to teach the children that they are trained teachers because most of them don’t have the certificate. They came into the system with forged certificates just because they have influence and have people that can back them up. So they should endeavour that teachers are trained teachers. Not only that they have the certificate because you know that in Nigeria you can buy a certificate with money but are they trained? Because it is when you have something that you’ll be able to give it out but if you don’t have what will you give?

- The governor should endeavour, I know it’s not easy, they should try their possible best to create a conducive learning environment for the children. I’m saying this because at times you find out that our government schools, their buildings are dilapidated, children cannot learn under such hot weather. They cannot learn. It if is rainy season it will affect them, dry season it will also affect them, so the school should try their possible best to create a conducive environment for them.

- They (educators) should not wait for the government, they have to organise themselves. Like I said before teaching needs somebody that is talented if that is your field. So you find out that the talented ones should not wait for the government to let them organise themselves because they have targets
they want to achieve at the end of the day. Let them organise themselves and have something like seminars. Like in my school days we don’t wait for lecturers. What we use to do is if you are good in a course you can come and teach.

As a recommendation for identifying dyslexic children in primary schools in Owerri West, a headmaster stated:

- At present we have no statistics we cannot give out what you don’t have neither can you prove what you don’t know that is existing. Here in Nigeria here in Imo Owerri at least there is no statistics even for the physical disability we cannot say that this number children in school are physically disabled. It is just recently that these disabled started making news on their own and it is only the adult disabled men. So the best thing is somebody can start this test and the way I suggest one can start is when the schools are on one can start moving from school to school asking the headmaster or teachers to get him or the teachers to get him the number of students from his school and those who suffer this type of thing for example in my school with the lecture you gave us I can pinpoint about five pupils in my school two boys and three girls who have this serious sickness. Because now I can look at them as having this problem because I know that through this lecture. If we can have this type of lecture and somebody goes round to schools one can get this kind of statistics.

Another headmaster made the following recommendations:

- What I want to say is the government should come in. The government is paying lip service to education in this part of the country. So many factors affect our educational system here and if you believe me that if our educational system is weak or is not being well cared for other aspects of education will suffer even the disabled children will suffer more. What I’m trying to say is that the government should come up and wear a human face. Teachers are not being paid even if you have specialised teachers here they won’t teach because they are not being well paid. Could you believe that some teachers have not been paid for almost three-four months? So the government should pay the teachers, make them happy. I believe that if the teachers are happy they will give their best because they are trained for imparting knowledge and on the part of the teachers I want to advise the teachers to see these children that they teach whether they are disabled or not as their own children and then whether the government is paying them or not they should try as much as they can to teach these children give them the best of what they have these children, when they grow up they will not forget them.
• Creation of awareness is very important that’s where the government comes in now you find out that seminars and workshops are not being organised in this part of the country because if these things are being organised the teachers will learn as you rightly pointed out teachers don’t need to run from here to overseas to learn. There are some specialists even among us who can teach us and these children that have these disabilities. These disabilities are invisible as you’ve pointed out so we need to have that awareness. That awareness needs to be created through workshops and seminars and it is the government that will put that in place. I know workshops and seminars they consume a lot of money they require funding, who will fund them? is it not the government? So 95% of the problem of education in this part of the country lies on the government because the government does not consider education or give it a face lift at all even in the budget you’ll see that the budget of education is very, very low so what we are saying is that the government should organise seminars and workshops for the teachers even on regular basis so that the teachers will update their knowledge and know how to handle the children.

As a recommendation for making positive changes in the educational system the headmaster further stated:

• Well I think for this (change) to be achieved a lot of factors will have to be put in place, the government will be there, the parents, the teachers, even the children themselves. Why I say the children is because some of the disabled children do not value themselves because of the perception of the society on them they now hate themselves and then draw back instead of coming out and struggling to become something in the society so the government should be there the government should revisit the curriculum, change it so it will suit the disabled children. The teachers themselves should be up and doing and there should be special training for the teachers to handle these children. It is not a teacher that has undergone a normal training you ask him to come and handle a disabled child – no.
Appendix B: A comparison of the medical and social models of disability

Table 16

<table>
<thead>
<tr>
<th>Medical model</th>
<th>Social model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child is faulty</td>
<td>Child is valued</td>
</tr>
<tr>
<td>Diagnosis</td>
<td>Strengths and needs defined by self and others</td>
</tr>
<tr>
<td>Labelling</td>
<td>Identify barriers and develop solutions</td>
</tr>
<tr>
<td>Impairment becomes focus of attention</td>
<td>Outcomes-based programs designed</td>
</tr>
<tr>
<td>Assessment, monitoring</td>
<td>Resources made available</td>
</tr>
<tr>
<td>Segregation and alternative services</td>
<td>Training for parents and professionals</td>
</tr>
<tr>
<td>Ordinary needs put on hold</td>
<td>Relationships nurtured</td>
</tr>
<tr>
<td>Re-entry if ‘normal’ enough or permanent exclusion</td>
<td>Diversity welcomed; child is welcomed</td>
</tr>
<tr>
<td>Society remains unchanged</td>
<td>Society evolves</td>
</tr>
</tbody>
</table>

A comparison of the medical and social models of disability. Adapted from Reiser (2001)
Appendix C: Nigerians with Disability Decree 1993 extract

SECTION 5

EDUCATION

(1) Disabled persons shall be provided in all public educational institutions free education at all levels.

(2) Government organs and authorities shall ensure (1) Adequate training for personnel to cater for the educational development of the disabled in educational institutions.

(2) Vocational training to develop skills. (3) Government organs and authorities shall;

(1) Take into consideration the special needs and requirements of the disabled in the formulation, design of educational policies and programs.

(2) Ensure structural adaptation of all educational institutions to the needs of the disabled as much as possible.

(3) Promote specialised institutions that will facilitate research and development of educational of the disabled.

(4) Government shall promote;
(1) The establishment of special schools with appropriate curriculum designed for different disability conditions.

(2) The training and in-service training of teachers suited for different disabilities.

1. Improvement of facilities and equipment in educational institutions to facilitate the education of the disabled.

2. The Establishment of a National Institute of special Education to cope with the increasing research and development in the education of the disabled.

3. The strengthening of cooperation and collaboration among relevant authorities, organs, institutions to ensure early and coordinated education of the disabled.

4. Interaction and exchange between disabled children in special schools and children in ordinary schools.

5. Improvement of university education facilities to ensure maximum benefit of university education for the disabled.

(5) Government shall ensure that not less than 10% of all educational expenditures are committed to the education needs of the disabled at all levels.

Source: GLADNET Collection (2008)
Appendix D: Extract from the Convention of the Rights of the Child
(Published 20 November 1989. Entry into force 2 September 1990)

Article 23

1. States Parties recognise that a mentally or physically disabled child should enjoy a full and decent life, in conditions which ensure dignity, promote self-reliance and facilitate the child's active participation in the community.

2. States Parties recognise the right of the disabled child to special care and shall encourage and ensure the extension, subject to available resources, to the eligible child and those responsible for his or her care, of assistance for which application is made and which is appropriate to the child's condition and to the circumstances of the parents or others caring for the child.

3. Recognizing the special needs of a disabled child, assistance extended in accordance with paragraph 2 of the present article shall be provided free of charge, whenever possible, taking into account the financial resources of the parents or others caring for the child, and shall be designed to ensure that the disabled child has effective access to and receives education, training, health care services, rehabilitation services, preparation for employment and recreation opportunities in a manner conducive to the child's achieving the fullest possible social integration and individual development, including his or her cultural and spiritual development.
4. States Parties shall promote, in the spirit of international cooperation, the exchange of appropriate information in the field of preventive health care and of medical, psychological and functional treatment of disabled children, including dissemination of and access to information concerning methods of rehabilitation, education and vocational services, with the aim of enabling States Parties to improve their capabilities and skills and to widen their experience in these areas. In this regard, particular account shall be taken of the needs of developing countries.

Available at: http://www2.ohchr.org/english/law/crc.htm
Appendix E: Extract from the Convention on the Rights of Persons with Disabilities (Published 13 December 2006. Entry into force 3 May 2008)

Article 24

Education

1. States Parties recognize the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, States Parties shall ensure an inclusive education system at all levels and lifelong learning directed to:

   (a) The full development of human potential and sense of dignity and self-worth, and the strengthening of respect for human rights, fundamental freedoms and human diversity;
   
   (b) The development by persons with disabilities of their personality, talents and creativity, as well as their mental and physical abilities, to their fullest potential;
   
   (c) Enabling persons with disabilities to participate effectively in a free society.

2. In realizing this right, States Parties shall ensure that:

   (a) Persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability:
(b) Persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live;

(c) Reasonable accommodation of the individual's requirements is provided;

(d) Persons with disabilities receive the support required, within the general education system, to facilitate their effective education;

(e) Effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.

3. States Parties shall enable persons with disabilities to learn life and social development skills to facilitate their full and equal participation in education and as members of the community. To this end, States Parties shall take appropriate measures, including:

(a) Facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring;

(b) Facilitating the learning of sign language and the promotion of the linguistic identity of the deaf community;

(c) Ensuring that the education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.
4. In order to help ensure the realization of this right, States Parties shall take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education. Such training shall incorporate disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities.

5. States Parties shall ensure that persons with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others. To this end, States Parties shall ensure that reasonable accommodation is provided to persons with disabilities.

Appendix F: Map of Nigeria

Available at:
Appendix G: Location of Imo State on the map of Nigeria

Source: Office of the Speaker, House of Representatives, Federal Republic of Nigeria) Available at:
http://www.speakersoffice.gov.ng/constituencies_imo.htm
Appendix H: Map of Imo State showing the 3 senatorial zones (Owerri, Okigwe and Orlu) and the constituencies in each senatorial zone

Appendix I: Dyslexia workshop delivered in selected primary schools in Owerri West

Dyslexia

The Invisible Disability

Delivered by: Onyenachi Ada Ajoku-Christopher

Definition of Dyslexia

- "The difficulty is a cognitive one, affecting those language skills associated with the written form, particularly visual to verbal coding, short-term memory, order perception and sequencing." (Thomson and Watkins, 1990)

Definitions of Dyslexia

- The British Dyslexia Association defines dyslexia as a specific learning difficulty which mainly affects the development of literacy and language related skills.
- Dyslexia is an experience that arises out of natural human diversity on the one hand and a world on the other where the early learning of literacy, and good personal organisation and working memory is mistakenly used as a marker of 'intelligence'. The problem here is seeing difference incorrectly as 'deficit' (Cooper 2006).
Simply Put:

- Dyslexia is a neurological difference which may cause academic difficulties and impede learning.
- Dyslexia is a difference in the way individuals process information.
- Our brains are wired differently so we think, understand and learn things differently.

Effects of Dyslexia

The Left and Right Hemispheres of the Brain

- People with dyslexia have right hemisphere strengths
Some Difficulties Associated with Dyslexia

- Reading hesitantly, poor recognition of words.
- Misreading, making understanding difficult.
- Difficulty with sequences, e.g. dates, order of numbers and letters on a page.
- Poor organisation or time management.
- Difficulty organising thoughts clearly, poor short term memory.
- Erratic and poor spelling, difficulties decoding phonetic sounds.
- Visual problems causing eye strain, distortion of print and headaches.
- Difficulty getting intended ideas down in writing.

Example of Auditory Spelling Problems

<table>
<thead>
<tr>
<th>Words</th>
<th>Errors</th>
</tr>
</thead>
<tbody>
<tr>
<td>peculiar</td>
<td>peclier</td>
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<tr>
<td>design</td>
<td>desig</td>
</tr>
<tr>
<td>temperature</td>
<td>tempture</td>
</tr>
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<tr>
<td>surface</td>
<td>curfing</td>
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<tr>
<td>scrambled</td>
<td>egg</td>
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<tr>
<td>region</td>
<td>reggant</td>
</tr>
</tbody>
</table>

Examples of Visual Spelling Problems

<table>
<thead>
<tr>
<th>Words</th>
<th>Errors</th>
</tr>
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<td>was</td>
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<td>surround</td>
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Disability Overview
- Inability to perform physically or mentally
- Deprivation or want of ability
- Absence of competence in physical or intellectual ability
- Incapable of performing duties
- An impairment that limits life activities
- Restriction of ability to perform activities considered normal

Is Dyslexia Then a Disability?
Yes, because:
- It impedes learning.
- It causes those affected to struggle with activities that require literacy skills.
- If not addressed could lead to underachievement and poor performance in school.
- Poor literacy acquisition in our modern society places one at a disadvantage.

Invisibility – A Problem?
Yes because:
- People often associate disability with what they can see.
- Dyslexia is a cognitive disability that can not be physically detected unlike other physical disabilities.
- Dyslexia is a hidden disability and can not be identified until one who is affected is put into a situation requiring literacy skills.
Dyslexia Status in Nigerian

Food for Thought

- How much dyslexia awareness has been created in Nigeria presently?
- Why does dyslexia lack status in Nigeria?
- Is it considered a learning disability in Nigeria?
- What provision is in place for dyslexic learners in Nigerian schools and institutions of higher education?

Making that Change

- Reasonable adjustments need to be made in schools to create a more inclusive learning environment.
- As educators you can make a change.
- What changes would you like to see in the educational system in Nigeria regarding support provision for dyslexic learners?

References

- The British Dyslexia Association. Available at: http://www.bdadyslexia.org.uk/about-dyslexia/further-information/dyslexia-research-information-.html

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Appendix J:

UNIVERSITY RESEARCH ETHICS COMMITTEE

APPLICATION FORM

NOTE FOR APPLICANTS

The University of Greenwich Research Ethics Committee (REC) is responsible for ensuring that any research undertaken by University staff or students, or by other institutions when in collaboration with the university, meets recognised ethical standards. Where ethical issues exist in a research proposal the research should not commence until approval has been obtained from the REC.

Applicants are advised to read the university Research Ethics Policy before completing the form (available online at http://www.gre.ac.uk/policy/rep). In the event of any queries, please consult the secretary to the committee by emailing research_ethics@gre.ac.uk. Guidance on risk assessments is available from the university’s Safety Unit: email safetyunit@gre.ac.uk.

For applicants on an M.Phil, Ph.D or thesis component of a professional doctoral programme: Your research proposal must have been approved by the Research Degrees Committee (RDA1) before your application to the University Research Ethics Committee will be considered.

The information collected on this form will be kept as a record of research proposals, and processed within the terms of the Data Protection Act 1998.

ABOUT THE ATTACHED FORM:-

The form should be word processed. It can be obtained from the Research Ethics website or by emailing research_ethics@gre.ac.uk. Please return one hard copy of the completed form to:
Secretary, University Research Ethics Committee
c/o Vice Chancellor’s Office
Queen Anne Court
University of Greenwich
Old Royal Naval College
Park Row
Greenwich, London SE10 9LS

and send an electronic copy by email to research_ethics@gre.ac.uk.

The closing date for receipt of applications is two weeks prior to the meeting of the Committee. Dates of committee meetings can be found on the university website at http://www.gre.ac.uk/offices/academic-council/university-calendar or by emailing research_ethics@gre.ac.uk

Revised July 2009
Name of Applicant: Onyenachi Ada Ajoku-Christopher

School: Education and Training

Title of Research: Factors Influencing the Lack of Dyslexia Awareness in Primary Schools and Its Impact on Inclusive Learning in Owerri West Local Government Area in Imo State Nigeria

These papers must be attached:

- Completed application form ✓
- Copy of consent form ✓
- Annex I: Participant Information Sheet ✓
- Risk Assessment Form ✓

These papers may be required:

- Letters (to participants, parents/guardians, GPs etc) ✓
- Questionnaire(s) or indicative questions for interviews ✓
- Advertisement / Flyer
- Annex II - Drugs and Medical Devices
- Annex III - Research Involving Human Tissue
- Annex IV - Ionising Radiation

Has the form been signed? YES

Has the risk assessment been signed? YES

Have any annexes been signed where necessary? YES
SECTION 1: DETAILS OF APPLICANT(S)

**Title of Research:**
Factors Influencing the Lack of Dyslexia Awareness and Its Impact on Inclusive Learning in Selected Primary Schools in Owerri West Local Government Area, Imo State, Nigeria.

1. **Applicant**

<table>
<thead>
<tr>
<th>Surname</th>
<th>Forename</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ajoku-Christopher</td>
<td>Onyenachi Ada</td>
<td>Mrs</td>
</tr>
</tbody>
</table>

School/Department: Education and Training

**University address**

University of Greenwich  
Southwood Site  
Avery Hill Road  
Eltham  
London SE9 2UG

University Tel: 020 8331 9101  
Fax: 020 8331 9101  
E-mail: @gre.ac.uk

2. **Are you a student? A member of staff? Other?**  
   Student

Programme of Study (if applicable): **EdD**

MPhil / PhD / EdD / Masters by Research / MSc/ MA/ BSc / BA / DipHE / other *(please specify)*

3. **Details of any other workers and departments/institutions involved**

a. Selected primary schools in Owerri West in Imo State, Nigeria

b.  

c.  
4. Project Supervision

<table>
<thead>
<tr>
<th>Name of Research Supervisor(s) &amp; their contact information:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bill Goddard</td>
</tr>
<tr>
<td>Email: <a href="mailto:w.d.goddard@gre.ac.uk">w.d.goddard@gre.ac.uk</a></td>
</tr>
<tr>
<td>Gordon Ade-Ojo</td>
</tr>
<tr>
<td>Email: <a href="mailto:g.o.ade-ojo@greenwich.ac.uk">g.o.ade-ojo@greenwich.ac.uk</a></td>
</tr>
</tbody>
</table>

5. Experience

What is your personal experience in the field concerned? (In the case of student or non-experienced applicants, please state the name and experience of the supervisor, and the degree of supervision).

I am a full time dyslexia support lecturer at Tower Hamlets College. I screen, assess, diagnose and write reports for dyslexic students as well as support them on a one to one basis. My role also involves liaising with students’ course tutors and other dyslexia support staff to discuss possible strategies for supporting learners on an in-class, one to one or small group basis.
6. Purpose of the research

What is the primary purpose of the Research?

- Educational qualification  YES
- Publicly funded trial or scientific investigation  NO
- Non-externally funded research  NO
- Commercial Product Development  NO
- Other externally funded research (Please specify)  NO
- Other (Please specify)  NO

Please answer the following questions for ALL the investigators involved

7. What are your professional qualifications in the field of study?

I hold a BA.Ed Degree in Education English, a Masters Degree in Modern English, a PGCE in Post Compulsory Education, a Masters Level 7 Certificate in Adult Dyslexia Support, and a Post Graduate Certificate in Adult Dyslexia Diagnosis and Support.

8. Are you a member of any professional, or other, bodies which set ethical standards of behaviour or practice such as the British Psychological Society, Nursing and Midwifery Council, and medical Royal Colleges etc.? If so, please specify.

No

9. Are you a member of a medical protection organisation?  NO

Are you a member of any other protection organisation?  YES
UCU (University and College Union)

Are you provided with insurance by any professional organisation?  NO

(please state which organisation in each case)
### SECTION 2: DETAILS OF THE PROJECT

#### 1. What is/are the principal research question(s) posed by this research?

**No more than 200 words**

This research aims to investigate dyslexia awareness in selected primary schools in Owerri West, Imo State, Nigeria and in doing so seeks to answer the following research questions:

3. What are the forces that drive inclusion in the educational system and how has this impacted on dyslexia awareness and curriculum planning in primary schools in Owerri West, Imo State Nigeria?

4. To what extent are the conceptions and perceptions of learning difficulties/disabilities responsible for the lack of dyslexia awareness in Nigeria and how has this impacted on dyslexia awareness in primary schools in Owerri West, Imo State, Nigeria?

#### 2. Brief outline of the proposed project (a brief description should be given here in lay terms in no more than 200 words.)

This research seeks to investigate the political, social and cultural perceptions of learning difficulties/disabilities which influence government involvement or the lack of it in the area of dyslexia awareness in Owerri West, Imo State, Nigeria. The research aims to:

5. explore why very little research has been carried out in the area of specific learning difficulties/disabilities in Nigeria

6. examine reasons for lack of government attention and recognition and how this has impacted on policy making in the area of specific learning difficulties

7. investigate how ideologies for acceptance, policy making and funding in the realm of special needs education are inevitably determined by general conceptions and understanding of special needs in Owerri West, Imo State

8. scrutinize reasons why government departments dealing with disability in Imo State Nigeria seem to lack dedication in terms of exploring new avenues to include children with specific learning difficulties

9. investigate how the lack of specialist training in the area of dyslexia awareness impacts on classroom teaching in primary schools in Owerri West, Imo State
3. What do you consider to be the main ethical issues or problems that may arise with the proposed study? For example:

- Are there potential adverse effects, risks or hazards for research participants from the interventions?
- Is there any potential for pain, discomfort, distress, inconvenience or changes in lifestyle for research participants?
- Is there any potential for adverse effects, risks, hazards, pain, discomfort, distress or inconvenience for the researcher(s) themselves (if any)?

In determining how inclusive the educational system in primary schools in Owerri West is and the extent to which equal opportunity and access is practiced in primary schools located in the area of study, the research may touch on some sensitive issues which highlight some shortcomings in the educational system in the area of support provision of primary school pupils with unidentified specific learning difficulties in Owerri West, Imo State, Nigeria.

Ethical issues to consider are confidentiality and privacy of information supplied by participants. Also it is important that I am mindful of the power relations between me, the researcher, and the participants. I am aware that my status as researcher could influence participants’ reactions and for this reason I am aware that participants should have the right to choose whether or not to participate. Participants will be made aware that they have the right to decide not to participate in the research or go ahead with interviews at any point in time during the course of data collection.

4. What steps will be taken to address each of the issues involved?

It is vital for me as the researcher to be able to tactfully strike the balance between the rights of participants’ privacy and public’s right to know. It is essential to note that however true the outcome of the research, it is important that it is approached with caution. Although I am obliged to make known findings of the research it is imperative that I understand the power relations between the researcher and the researched and in doing so respect the subjects’ views and their right to privacy. Participants will be made aware of the non-obligatory nature of their participation and their right to refuse to participate from the onset or at any point in time during the inquiry. Participants will be informed that anonymity will be guaranteed to them.
5. Is there a potential benefit for research participants?

It is expected that this research will create a pivotal point for awareness of dyslexia in Owerri West. It is aimed at giving participants, teachers and educational practitioners a voice to question current practices that do not favour dyslexic learners. It is anticipated that matters arising from this research will lead on to professional dyslexia awareness training at Local Government Area level as well as State level which will empower primary school teachers and better equip them to support dyslexic pupils.

6. Will it be necessary for participants to take part in the study without their knowledge and consent at the time (e.g. general public filming/video or recording or covert observation of people)?

Consent will be sought from the participants at all times.
7. Where will the interaction with participants take place, e.g. online, classroom, public facility, laboratory, office, home, etc?

Interaction with participants will take place in selected primary schools in Owerri West Imo State Nigeria. Questionnaires will be administered in the schools. Interviews with teachers and headmasters/headmistresses will be conducted in the schools.

8. Have any collaborating internal or external Schools or institutions or departments whose resources will be needed, been informed and agreed to participate? YES

If so, how have these institutes been informed and how have they given consent (i.e. verbally or written)?

Consent was sought verbally and in writing at the State Universal Basic Education Board (SUBEB) in Owerri Imo State Nigeria, in order to carry out research in the state capital.

Written consent was also sought by headmasters/headmistresses and teachers.

(Please see attached letters)

9. a. What is the proposed start date of the project?

Theoretical work on the background has already begun since the approval of the RDA1. Field work will begin once ethical approval has been given.

b. What is the proposed end date of the project?

The proposed end date is June 2012

10. What is the expected total duration of participation in the study for each participant, e.g. 20 minutes to complete a questionnaire, an hour for an interview, etc?

Questionnaires will take approximately 30 minutes to complete. Interviews however will run between 45 minutes to an hour.

11. What monitoring arrangements will be in place to check if any new ethical and/or risk issues emerge during the project either with the subject(s) to whom the investigation is directed or with the researchers involved?

The project will constantly be monitored by my supervisors.
12. Are any of the following procedures involved?

- Any invasive procedures, e.g. venepuncture: NO
- Any intrusive procedures, e.g. questionnaire(s), interview, diary, focus groups: YES

**Please see attached questionnaire, interview questions and consent letters**

- Physical contact: NO
- Any procedure that may cause mental distress, in particular if dealing with vulnerable participants, e.g. young, mentally ill, elderly, etc.: NO
- Prisoners or others in custodial care: NO
- Adults with incapacity (physical and/or mental): NO
- Children/Young persons (under 18): NO
- Drugs, medicinal products or medical devices (if ‘yes’, complete Annex II): NO
- Working with human tissue (if ‘yes’, complete Annex III): NO
- Working with sources of ionising radiation (if ‘yes’, complete Annex IV): NO
SECTION 3: RECRUITMENT OF PARTICIPANTS/CONSENT

1. How will you approach and recruit participants for the study? Please attach a copy of the advertisement if used.
   
   I will personally visit individual primary schools in Owerri West.

2. How many participants are to take part in this project?
   
   There are currently 66 registered primary schools in Owerri West in Imo State. At least 22 primary schools will be investigated. It is anticipated that at least 15 – 20 headmasters/headmistresses will participate in the interviews.

3. What are the selection criteria?
   
   Primary schools will be randomly selected from the three Wards that make up Owerri West.

4. If you do not propose to issue a Participant Information Sheet how will prospective participants be informed about their role in the project?
   
   Participants will be given letters of consent which will give a general overview of the nature of research. On agreeing to participate in the study participants will be expected to sign as an indication that they have given their consent to use information supplied by them. (See attached letters)

5. Is written consent to be obtained using the REC written consent template? (see Annex I)
   
   Is a form other than the REC written consent template to be used?  
   
   **Please attach a copy**

   Please see attached copies of consent letters to headmasters/headmistresses of primary schools in Owerri West, interviewees and the State Universal Basic Education Board (SUBEB).  *Please note that the consent letter signed by SUBEB bears a stamped embossed seal. The embossed seal does not appear on the electronic copy of this REC application form as the consent letter has been scanned. However the embossed seal appears on the hard copy of this document.

6. Is parent's/guardian's consent necessary under the guidelines for this research to be carried out?  
   (If YES, in what form - verbal, written, witnessed etc? Please
7. Will the child's or young person's assent/consent be sought and if so how? (If YES, in what form - verbal, written, witnessed etc? Please attach a copy of the relevant form. If NO, explain why not.)

| YES/NO | N/A |

8. Will payments be made to participants, e.g. reimbursement of expenses, incentives or benefits? (if YES, please give details)

| NO |

9. What arrangements have been made for participants who might not adequately understand verbal explanations or written information, e.g. where English is not a first language or they have low functional literacy?

English is the language of education and instruction in Nigeria, although there are different variations of spoken English. However should the need for interpretation arise, I will competently be able to translate any instructions or questions as I speak fluent Igbo which is the language spoken in the south eastern part of Nigeria where this research is based.

SECTION 4: INSURANCE/FINANCIAL INTEREST

| YES | YES |

1. Is the project covered by University of Greenwich Public Liability Insurance (i.e. it involves healthy participants and is conducted by a University of Greenwich employee or student)?

| YES |

2. If the project is not covered by University of Greenwich Public Liability insurance, what arrangements have been made to provide liability insurance cover and/or compensation in the event of a claim?
3. Please specify any financial or other direct interest to you or your School arising from this study. **A full declaration** should be included in this space, or on an attached sheet.

None

### SECTION 5: RESEARCH GOVERNANCE

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>Does the project need to comply with the requirements of any Department of Health Research Governance Framework? If so, which?</td>
</tr>
<tr>
<td>2.</td>
<td>Does your funding body require you to comply with any other specific Research Governance Framework/Procedure, e.g. ESRC, Standard Research Council conditions for the award of Grants, etc.?</td>
</tr>
<tr>
<td></td>
<td><strong>N/A</strong></td>
</tr>
<tr>
<td>3.</td>
<td>If “Yes” to either Section 5.1 or 5.2, what arrangements are proposed to ensure compliance?</td>
</tr>
<tr>
<td>4.</td>
<td>Is personal data to be collected during the research?</td>
</tr>
<tr>
<td>5.</td>
<td>If “Yes” to the previous question, what arrangements will be made to ensure compliance with the Data Protection Act 1998? (e.g. consent from participants; maintaining confidentiality and keeping data securely; information provided to participants in a Participant Information Sheet)</td>
</tr>
</tbody>
</table>
# RISK ASSESSMENT FORM

## School/Office
Education

## Title and description of work
Factors Affecting the Lack of Dyslexia Awareness and Its Impact on Inclusive Learning in Selected Primary Schools in Owerri West Local Government Area, Imo State, Nigeria

## Location
Owerri West, Imo State, Nigeria

<table>
<thead>
<tr>
<th><strong>Hazard(s) inherent in the Task or Process</strong></th>
<th><strong>Person(s) at Risk</strong></th>
<th><strong>Precautions (Control Measures)</strong></th>
<th><strong>Residual risks if all precautions are followed</strong></th>
<th><strong>Further precautions required</strong></th>
<th><strong>Action by whom and when (date)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Equipment and physical hazards</strong>&lt;br&gt;e.g. Tools; machinery; vehicles; manual handling; noise; work at height; electricity; fire; vacuum; high pressure; high temperature; ultra violet; laser; vibration Only significant hazards need to be recorded</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td><strong>Chemical hazards</strong>&lt;br&gt;e.g. Toxic by inhalation or ingestion; irritant; corrosive; flammable; explosive; oxidising; radioactive</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>

*All work with radioactive materials MUST be approved*
<table>
<thead>
<tr>
<th>Hazards inherent in the Task or Process</th>
<th>Person(s) at Risk</th>
<th>Precautions (Control Measures)</th>
<th>Residual risks if all precautions are followed</th>
<th>Further precautions required</th>
<th>Action by whom and when (date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Include all the significant hazards that are expected or are foreseeable in the context of the work or process that is being undertaken and where it will be done.</td>
<td></td>
<td>Include precautions for all individuals/groups who may be affected by the hazards you have identified e.g. Staff, students, collaborators, passers by, trainees on courses</td>
<td>High/Medium/Low</td>
<td>If residual risk is judged to be medium or high, further actions must be considered</td>
<td>by the Radiation Protection Supervisor</td>
</tr>
<tr>
<td>Person(s) at Risk</td>
<td>Precautions (Control Measures)</td>
<td>Residual risks if all precautions are followed</td>
<td>Further precautions required</td>
<td>Action by whom and when (date)</td>
<td></td>
</tr>
<tr>
<td>Personal safety e.g. Physical or verbal attack; disability or health problems; delayed access to personal or medical assistance; failure of routine or emergency communications; security of accommodation and support; getting lost, or stranded by transport; cultural or legal differences</td>
<td>Researcher</td>
<td>I have reviewed all cultural issues and I am well aware of them. I am well aware of the culture of the participants involved in this research as I have a Nigerian background. I do not anticipate any physical or verbal attack from the members of society involved in the research. I also know the area well so there is no risk of getting lost or being stranded by transport. I will leave a phone number and schedule of my visits with my supervisor. I will also be covered by the University Insurance. I am trained in correct manual handling techniques. I will take precaution to carry quantities that I am comfortable carrying. If large quantities need to be carried, a trolley will be used to avoid incurring injury.</td>
<td>All precautions to be followed</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>Manual handling – carrying large quantities of questionnaires</td>
<td>Researcher</td>
<td></td>
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<tr>
<td>Biological agent hazards &quot;any micro-organism, cell culture or human endoparasite including any which have been genetically modified, which may cause infection, allergy, toxicity and other hazards to human health&quot;. This includes bacteria, viruses, fungi and parasites</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td><strong>Hazards inherent in the Task or Process</strong></td>
<td><strong>Person(s) at Risk</strong></td>
<td><strong>Precautions (Control Measures)</strong></td>
<td><strong>Residual risks if all precautions are followed</strong></td>
<td><strong>Further precautions required</strong></td>
<td><strong>Action by whom and when (date)</strong></td>
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<tr>
<td>Include all the significant hazards that are expected or are foreseeable in the context of the work or process that is being undertaken and where it will be done.</td>
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<tr>
<td>Routes of exposure should be included e.g. Blood borne infection; skin contact; skin sensitisation; sensitisation by inhalation; toxic by ingestion or inhalation</td>
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<tr>
<td>Work involving Class 2 agents or above must be approved by the University Biological and Genetic Modification Safety Committee before materials are obtained and work commences.</td>
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<tr>
<td>If work involves genetically modified organisms, GMO Risk Assessment form must be completed.</td>
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<tr>
<td>Natural physical hazards e.g. Extreme weather; earthquakes and volcanoes; mountains, cliffs and rock falls; glaciers, crevasses and icefalls; caves, mines and quarries; forests including fire; marshes and quicksand; fresh or seawater, tidal surges</td>
<td>Researcher</td>
<td>Whilst conducting field work, I will avoid staying in the heat for lengthy periods. I will make use of a hand-held fan to reduce heat discomfort. Also sun cream will be used to prevent sun burn. Bottled drinking water is to be available at all times to avoid dehydration.</td>
<td>There is residual risk. All precautions to be followed</td>
<td>None</td>
<td></td>
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<tr>
<td>Extreme heat - exposure to sunlight</td>
<td></td>
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<tr>
<td>Environmental impact e.g. pollution and waste, deposition of rubbish, disturbance of eco-systems, trampling, harm to animals or plants</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td></td>
</tr>
</tbody>
</table>

294
<table>
<thead>
<tr>
<th>Hazards inherent in the Task or Process</th>
<th>Person(s) at Risk</th>
<th>Precautions (Control Measures)</th>
<th>Residual risks if all precautions are followed</th>
<th>Further precautions required</th>
<th>Action by whom and when (date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Include all the significant hazards that are expected or are foreseeable in the context of the work or process that is being undertaken and where it will be done.</td>
<td></td>
<td>Include precautions for all individuals/groups who may be affected by the hazards you have identified e.g. Staff, students, collaborators, passers by, trainees on courses</td>
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<tr>
<td><strong>Other hazards</strong></td>
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<tr>
<td><strong>Damaged classroom floors</strong></td>
<td>Researcher</td>
<td>I will be mindful of and avoid areas where there are damaged floors to prevent injuries caused by tripping and falling.</td>
<td>There is residual risk. All precautions to be followed</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>REVIEW DATE</td>
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<td>--/--/--</td>
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<tr>
<td>Name of reviewer</td>
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<tr>
<td>Signature</td>
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<tr>
<td>No revisions made</td>
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<tr>
<td>Changes to activity, hazards, precautions or risks noted in text.</td>
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</table>
ANNEX I: PARTICIPANT CONSENT TEMPLATE

A Participant Consent Form should normally accompany all applications

- The researcher can adapt this template to suit the needs of the research: for example, so that it can be better understood by young participants or those whose first language is not English.
- For persons under 18 years of age the consent of the parent(s) or guardian(s) must be obtained or an explanation given to the University Research Ethics Committee and the assent of the child/young person should be obtained to the degree possible dependent on the age of the child/young person.
- In some studies witnessed consent may be appropriate.

The consent form must be signed by the actual investigator concerned with the project after having spoken to the participant to explain the project and after having answered his or her questions about the project.

<table>
<thead>
<tr>
<th>To be completed by the participant</th>
<th>To be completed by the parent/guardian if participant is under 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I have read the information sheet about this study</td>
<td>YES/NO</td>
</tr>
<tr>
<td>2. I have had an opportunity to ask questions and discuss this study</td>
<td>YES/NO</td>
</tr>
<tr>
<td>3. I have received satisfactory answers to all my questions</td>
<td>YES/NO</td>
</tr>
<tr>
<td>4. I have received enough information about this study</td>
<td>YES/NO</td>
</tr>
<tr>
<td>5. I understand that I am free to withdraw from this study:</td>
<td>YES/NO</td>
</tr>
<tr>
<td>● at any time</td>
<td></td>
</tr>
<tr>
<td>● without giving a reason for withdrawing</td>
<td></td>
</tr>
<tr>
<td>● (if I am, or intend to become, a student at the University of Greenwich) without affecting my future with the University</td>
<td></td>
</tr>
<tr>
<td>● without affecting any medical or nursing care I may be receiving</td>
<td></td>
</tr>
<tr>
<td>6. I agree to take part in this study</td>
<td>YES/NO</td>
</tr>
</tbody>
</table>

Signed (Participant) Date  Signed (Parent/Guardian) Date

Name in block letters  Name in block letters

Signature of investigator Date  Signature of investigator Date

This Project is Supervised by:
Contact Details (including telephone number and email address):
Dear Sir/Madam

Re: Interview participation

I am a doctorate degree student at the University of Greenwich London and I am writing my doctoral thesis on factors influencing the lack of dyslexia awareness in primary schools and its impact on inclusive learning in Owerri West Local Government Area, Imo State.

My research is being supervised by Dr Bill Goddard (w.d.goddard@gre.ac.uk) and Dr Gordon Ade Ojo (g.o.ade-ojo@greenwich.ac.uk) of the University of Greenwich London Mansion Site Bexley Road Eltham, London SE9 2PQ

The aims of this research are to:

- explore possible reasons why very little research has been carried out in the area of dyslexia in Owerri West
- examine reasons for lack of government attention and recognition of hidden disabilities and explore how this has impacted on policy making in the area of specific learning difficulties
- investigate how ideologies for acceptance, policy making and funding in the realm of special needs education are inevitably determined by general conceptions and the understanding of special needs in Owerri West, Imo State and Nigeria in general
- scrutinise reasons why government departments dealing with disability in Imo State Nigeria seem to lack dedication in terms of exploring new avenues to include children with specific learning difficulties
- investigate how the lack of specialist training in the area of dyslexia awareness impacts on classroom teaching in primary schools in Owerri West, Imo State

The study is important because it is hoped that the findings of the study will serve as a pivotal point for creating dyslexia awareness in Owerri West and in so doing create better learning conditions for dyslexic primary school children.

Dyslexia is a specific learning difficulty that manifests as a problem with particular aspects of learning despite adequate intelligence and general learning skills. It is now widely recognised as being a specific learning disability of neurological origin that does not imply low intelligence or poor educational potential, and which is independent of race
and social background. This specific learning difficulty is characterised by poor spelling, poor reading skills, poor short term memory, poor visual sequencing and difficulty with spatial awareness. Other areas of difficulty caused by dyslexia are; difficulty following instructions, difficulty telling left from right, and clumsiness. These difficulties in learning occur despite normal school experience, socio-economic opportunity, emotional stability and adequate intelligence.

In many West African countries, dyslexia is yet to be acknowledged as a learning difficulty/disability. This is quite contrary to many western countries where there is a continuing interest by special needs educators in interventions which focus on presumed underlying processing difficulties. The lack of identification and acknowledgement of dyslexia in Nigeria is an issue however this cannot stand as a justified reason to believe that the learning difficulty does not exist in Owerri West. If statistical evidence of dyslexia existed in Nigeria there would be strong substantiation to indicate the extent to which people are affected by it. The lack of statistical evidence however proves problematic.

I am particularly interested in political issues that influence disability awareness in general and the lack of dyslexia awareness in Owerri in particular. I am also interested in reasons for the lack of support of dyslexic learners as well as factors that deter inclusive curriculum planning and the inclusion of children with ‘invisible’ disabilities such as dyslexia in primary schools. I look forward to these issues being addressed in the interview.

Please kindly assist me in my research by participating in an interview. I assure you that all information supplied will be completely anonymous and will be treated in strict confidence. Please be aware that the findings of the research may be published. You may choose to opt out at any stage of the interview.

Please sign below to indicate that have read and understood the consent letter and that you are giving me consent to use information supplied by you in my research.

Sign:

________________________________________________________________________

Yours faithfully

Onyenachi Ada Christopher
(Nee Ajoku)
Dear Sir/Madam

Re: Letter of consent to distribute questionnaires to teaching staff

I am a doctorate degree student at the University of Greenwich London and I am writing my doctoral thesis on factors influencing the lack of dyslexia awareness in primary schools and its impact on inclusive learning in Owerri West Local Government Area, Imo State.

My research is being supervised by Dr Bill Goddard (w.d.goddard@gre.ac.uk) and Dr Gordon Ade Ojo (g.o.ade-ojo@greenwich.ac.uk) of the University of Greenwich London Mansion Site Bexley Road Eltham, London SE9 2PQ

Dyslexia is a specific learning difficulty that manifests as a problem with particular aspects of learning despite adequate intelligence and general learning skills. It is now widely recognised as being a specific learning disability of neurological origin that does not imply low intelligence or poor educational potential, and which is independent of race and social background.

The aims of this research are to:

- explore possible reasons why very little research has been carried out in the area of dyslexia in Owerri West
- examine reasons for lack of government attention and recognition of hidden disabilities and explore how this has impacted on policy making in the area of specific learning difficulties
- investigate how ideologies for acceptance, policy making and funding in the realm of special needs education are inevitably determined by general conceptions and the understanding of special needs in Owerri West, Imo State and Nigeria in general
- scrutinise reasons why government departments dealing with disability in Imo State Nigeria seem to lack dedication in terms of exploring new avenues to include children with specific learning difficulties
- investigate how the lack of specialist training in the area of dyslexia awareness impacts on classroom teaching in primary schools in Owerri West, Imo State
The study is important because it is hoped that the findings of the study will serve as a pivotal point for creating dyslexia awareness in Owerri West and in so doing create better learning conditions for dyslexic primary school children.

Please see attached approved consent document authorised by SUBEB (State Universal Basic Education Board). Please kindly assist me by giving me consent to distribute questionnaires to your teaching staff for the purpose of data collection for my research.

All information supplied will be confidential and will in no way bring disrepute to your school.

Please sign below to indicate that have read and understood the consent letter and that you are giving me consent to use information supplied in my research.

Sign

Yours faithfully

Onyenachi Ada Christopher
(Nee Ajoku)
Dear Sir/Madam

**Re: Letter of consent to conduct observations in your primary school**

I am a doctorate degree student at the University of Greenwich London and I am writing my doctoral thesis on factors influencing the lack of dyslexia awareness in primary schools and its impact on inclusive learning in Owerri West Local Government Area, Imo State.

My research is being supervised by Dr Bill Goddard (w.d.goddard@gre.ac.uk) and Dr Gordon Ade Ojo (g.o.ade-ojo@greenwich.ac.uk) of the University of Greenwich London

Mansion Site
Bexley Road
Eltham, London
SE9 2PQ

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The study is important because it is hoped that the findings of the study will serve as a pivotal point for creating dyslexia awareness in Owerri West and in so doing create better learning conditions for dyslexic primary school children.

Please see attached approved consent document authorised by SUBEB (State Universal Basic Education Board). Please kindly assist me by giving me consent to observe classroom teaching and inclusive practices in your school as well as give consent to use photographic evidence for the purpose of data collection for my research. All information supplied will be confidential and will in no way bring disrepute to your school.

Please sign below to indicate that you have read and understood the consent letter and that you are giving me consent to use information supplied in my research.

Sign

________________________________________________________________________________________

Many thanks

Onyenachi Ada Christopher
(Nee Ajoku)
Interview questions

Semi-structured questions used as a guide during interviews to elicit information on the following:

1. Respondents’ knowledge of dyslexia

1b. Level of importance attached to recognition of invisible/hidden disabilities such as dyslexia.

2. Impact off cultural perceptions on inclusion matters.

3. Reasons for what seems to be a lack of government involvement and interest in learning disabilities and impact disability awareness and inclusion.

4. Issues around the lack of specialist teacher training and impact on inclusion in Owerri West.

5. Re-address of government disability policy?

6. Position of the National Policy on Education in disability matters. To what extent does it address the current inclusion issues (hidden/invisible disabilities in primary schools in Owerri West?)
Teacher’s Questionnaire

*Please kindly complete the questionnaire below. The information you supply will be treated in strict confidence. Thank you for your participation.*

1. Please specify the age category of the pupils you teach.

2. Please specify the class of pupils you teach.

3. According to the ‘Nigerians with Disability Decree 1993’ "disabled person" means a person who has received preliminary *(sic)* or permanent certificate of disability to have a condition which is expected to continue permanently or for a considerable length of time which can reasonably be expected to limit the person's functional ability substantially, but not limited to seeing, hearing, thinking, ambulating, climbing, descending, lifting, grasping, rising, any related function or any limitation due to weakness or significantly decreased endurance so that he cannot perform his everyday routine, living and working without significantly increased hardship and vulnerability to everyday obstacles and hazards.’

Using the definition of disability given above coupled with your own understanding, please tick the boxes that apply to learning difficulty and disability:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>a</td>
<td>Physically disability</td>
</tr>
<tr>
<td>b</td>
<td>Hearing impairments</td>
</tr>
<tr>
<td>c</td>
<td>Deafness</td>
</tr>
<tr>
<td>d</td>
<td>Autism</td>
</tr>
<tr>
<td>e</td>
<td>Dyslexia</td>
</tr>
<tr>
<td>f</td>
<td>Asperger’s syndrome</td>
</tr>
<tr>
<td>g</td>
<td>Dyspraxia</td>
</tr>
<tr>
<td>h</td>
<td>Visual impairment</td>
</tr>
<tr>
<td>i</td>
<td>Tourettes syndrome</td>
</tr>
<tr>
<td>j</td>
<td>Serious behavioural problems</td>
</tr>
<tr>
<td>k</td>
<td>Attention deficit disorder</td>
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<tr>
<td>l</td>
<td>Attention deficit hyperactivity disorder</td>
</tr>
<tr>
<td>m</td>
<td>Wheelchair user</td>
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<td>n</td>
<td>Mobility difficulty</td>
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<td>o</td>
<td>Mental health</td>
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<td>p</td>
<td>Down’s syndrome</td>
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<td>q</td>
<td>HIV/AIDS</td>
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<tr>
<td></td>
<td>Questions</td>
</tr>
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<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>4</td>
<td>Do policy definitions play an important role in determining the social construction of disability?                                                                ------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>5</td>
<td>Are the definitions of disability portrayed strongly in education policies and provision for children with disabilities?</td>
</tr>
<tr>
<td>6</td>
<td>Does specific lack of legislation relating to the education of children with learning difficulties/disabilities ultimately impact negatively on support provision for primary school children with learning disabilities?</td>
</tr>
<tr>
<td>7</td>
<td>Do the extent to which definitions of disability vary and the extent to which they are elaborated in policy depend on socio-economic development in Nigeria?</td>
</tr>
<tr>
<td>8</td>
<td>Are you of the view that issues regarding disability policy are not clearly defined in the ‘Nigerians with Disability Decree 1993’ in order to ensure effective implementation in primary schools?</td>
</tr>
<tr>
<td>9</td>
<td>Do you think that the implementation of the national policy on special needs education has been poorly executed?</td>
</tr>
<tr>
<td>10</td>
<td>Are you of the view that perceptions of disability are driven by cultural beliefs which manifest in disability rights?</td>
</tr>
<tr>
<td>11</td>
<td>Does this influence the way disability issues are addressed in society?</td>
</tr>
<tr>
<td>12</td>
<td>Do you believe that the understanding of disability in society today has historical roots which influence attitudes towards the disabled?</td>
</tr>
<tr>
<td>13</td>
<td>Do you think that the Nigerian society and educators have little understanding of disabilities as a human rights issue?</td>
</tr>
<tr>
<td>14</td>
<td>Do you think that the lack of guidance and services available to citizens about learning difficulties/disabilities hinders disability awareness in Owerri?</td>
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<tr>
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</tr>
<tr>
<td>15</td>
<td>Do you have a teaching qualification? <strong>Please specify your highest level of education below.</strong></td>
</tr>
<tr>
<td>16</td>
<td>Do any of your learners have special educational needs? <strong>If yes please specify below what their special needs are.</strong></td>
</tr>
<tr>
<td>17</td>
<td>Do any of the pupils you teach have extreme difficulties with spelling, reading, writing and understanding concepts of taught lessons?</td>
</tr>
<tr>
<td>18</td>
<td>Are these pupils assessed for specific learning difficulties? <strong>If yes please specify below who assesses these pupils.</strong></td>
</tr>
<tr>
<td></td>
<td>If yes please indicate what support is offered to these pupils after they have been assessed.</td>
</tr>
<tr>
<td>19</td>
<td>Have you heard of the term dyslexia? <strong>If yes please explain what dyslexia means below.</strong></td>
</tr>
<tr>
<td>20</td>
<td>Do you teach dyslexic learners?</td>
</tr>
<tr>
<td>21</td>
<td>Are you trained to support dyslexic learners?</td>
</tr>
<tr>
<td>22</td>
<td>Have you ever undertaken any specialist training in the area of specific learning difficulties? <strong>If yes please specify below</strong></td>
</tr>
<tr>
<td>23</td>
<td>If your answer to the question 22 is ‘no’, would you like to receive training in the area of specific learning difficulties?</td>
</tr>
<tr>
<td>Questions</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>24 In your opinion is the identification process of pupils with learning disabilities poorly done?</td>
<td></td>
</tr>
<tr>
<td>25 Do you agree more attention should be paid to the screening, identification and assessment process of learning disabilities in order for students with learning difficulties/disabilities to be adequately supported and included in the educational system?</td>
<td></td>
</tr>
<tr>
<td>26 Do you think the teaching and learning curriculum in universities and colleges of education is not broad enough to adequately address a wide range of learning disabilities found in classrooms?</td>
<td></td>
</tr>
<tr>
<td>27 If this is the case do you think that graduate teachers are sometimes not adequately trained to meet the needs of pupils with learning difficulties/disabilities?</td>
<td></td>
</tr>
<tr>
<td>28 Do you think primary school teachers in the rural areas in Owerri are at a disadvantage with regards government funding for teacher training?</td>
<td></td>
</tr>
<tr>
<td>29 Does lack of government funding impact negatively on opportunities for in-house teacher training and professional development through workshops and seminars etc?</td>
<td></td>
</tr>
<tr>
<td>30 Is inadequate training in the area of learning difficulties/disabilities an issue for teachers?</td>
<td></td>
</tr>
<tr>
<td>31 If inadequate training is an issue, does it impact negatively on inclusive practice in primary schools?</td>
<td></td>
</tr>
<tr>
<td>32 Does inadequate knowledge of specialist teaching and learning strategies place children with learning difficulties/disabilities at a disadvantage?</td>
<td></td>
</tr>
<tr>
<td>33 Do you think that in general there is little awareness of learning difficulties/disabilities and its effects on learning among educators in Owerri?</td>
<td></td>
</tr>
<tr>
<td>34 Should the Federal Ministry of Education engage more in research in the area of learning difficulties/disabilities in order to provide useful statistics on the percentage of people affected in Nigeria in general?</td>
<td></td>
</tr>
<tr>
<td>35 Do you think the educational system in Nigeria as a whole is vulnerable to changes in disability issues?</td>
<td></td>
</tr>
<tr>
<td>36 If you agree do you think this vulnerability is linked to financial constraints?</td>
<td></td>
</tr>
</tbody>
</table>
ANNEX II: DRUGS, MEDICINAL PRODUCTS OR MEDICAL DEVICES

This annex need only be completed if relevant to the research. It should be completed when non-prescription medicines or substances are used, e.g. over-the-counter medicines, herbal preparations, etc, as well as prescribed medicines or experimental drugs.

Title of Research:

<table>
<thead>
<tr>
<th>Question</th>
<th>YES/NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the study initiated/sponsored by a pharmaceutical or other industrial company?</td>
<td>YES/NO</td>
</tr>
<tr>
<td>2. Does the study involve pre-marketing use of a drug/appliance or a new use for a marketed product?</td>
<td>YES/NO</td>
</tr>
<tr>
<td>If NO please go to question 3</td>
<td></td>
</tr>
<tr>
<td>If YES:</td>
<td></td>
</tr>
<tr>
<td>a) Does the company agree to abide by the guidelines on compensation of the Association of British Pharmaceutical Industry (ABPI) (Clinical Trials - compensation for medicine-induced injury) in respect of patients?</td>
<td>YES/NO</td>
</tr>
<tr>
<td>(if YES, a written signed statement from the company to this effect without any qualification clause should be attached)</td>
<td></td>
</tr>
<tr>
<td>b) In a study on healthy participants does the company agree to abide by the current guidelines of the ABPI for healthy subjects?</td>
<td>YES/NO</td>
</tr>
<tr>
<td>(if YES, a copy of the proposed volunteer contract should be attached)</td>
<td></td>
</tr>
<tr>
<td>3. Does the Research comply with the requirements of the UK Medicines for Human Use (Clinical Trials) Regulations 2004? See <a href="http://www.ct-toolkit.ac.uk/">http://www.ct-toolkit.ac.uk/</a></td>
<td>YES/NO</td>
</tr>
<tr>
<td>4. What is the regulatory status of the drug under the Medicines Act 1968 (as amended)?</td>
<td></td>
</tr>
<tr>
<td>a) Does the drug or device have a product licence for the purpose for which it is to be used?</td>
<td>YES/NO</td>
</tr>
<tr>
<td>b) Is any drug or device being supplied by a company with a Clinical Trial Exemption certificate or in response to an investigator with a Clinical Trial Exemption, or Doctors and Dentists Exemption?</td>
<td>YES/NO</td>
</tr>
<tr>
<td>If YES, give details: Clinical Trial Certificate Number (attach a copy of the certificate)</td>
<td></td>
</tr>
<tr>
<td>Clinical Trial Exemption Number (attach a copy of the certificate)</td>
<td></td>
</tr>
<tr>
<td>Doctors &amp; Dentists Exemption Number (attach a copy of the certificate)</td>
<td></td>
</tr>
</tbody>
</table>
5. **Details of the drug or medical device**

<table>
<thead>
<tr>
<th>Approved Name</th>
<th>Strength</th>
<th>Dosage &amp; Frequency</th>
<th>Route</th>
</tr>
</thead>
</table>

6. **Who will administer the drug or fit the device?**

7. **Have arrangements for dispensing drugs/device been agreed?** *(please give details)*
ANNEX III: RESEARCH INVOLVING HUMAN TISSUE
This annex need only be completed if relevant to the research.

Note: The Human Tissue Act 2004 has the broad purpose of regulating the storage and use of human tissue from the living, and the removal, storage and use of tissue from the deceased. Human tissue is material which has come from the human body which consists of, or includes, human cells. Accordingly, non-DNA holding substances (such as plasma) are not covered by the Act. Human tissue which is not stored is similarly not covered by the Act. Cell lines are excluded, as are hair and nail from living people. Live gametes and embryos are covered by the Human Fertilisation and Embryology Act 1990.

Where relevant, applicants are responsible for identifying clearly in their application why a research proposal involving tissue or substances of human origin would not be subject to the Acts referred to above.

All research which involves Gene Manipulation must be approved by a Research Ethics Committee, AND ALSO by the Biological and Genetic Modification Safety Committee. For further details please contact the University Safety Adviser.

<table>
<thead>
<tr>
<th>Title of Research:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Specify the nature of the human tissue involved and quantity required (including if a single cell and associated DNA material)</td>
</tr>
<tr>
<td>2. How do you propose obtaining authorisation to carry out this research, i.e. HTA Licence, NHS REC approval, or through the application of an exemption?</td>
</tr>
<tr>
<td>3. If foetal material, is it from other than suction terminations? Please state:</td>
</tr>
<tr>
<td>a. how soon after the delivery of the foetus will the material need to be obtained? <em>(this form covers spontaneous or therapeutic abortion up to 20 weeks gestation)</em></td>
</tr>
<tr>
<td>b. where and how will the material be obtained?</td>
</tr>
<tr>
<td>c. the way in which parental consent will be obtained? <em>(this must be discussed with the Consultant responsible for the women whose foetuses are sought for research or with a medical member of the Research Ethics Committee)</em></td>
</tr>
</tbody>
</table>
4. In submitting this application you are required to certify that:

   a. you have fully complied with the requirements of the Human Tissue Act and all of its enabling regulations and the rules governing tissue use as detailed by the Human Tissue Authority and other regulatory bodies.
   b. you are not involved in the management of the women whose foetuses will be used for research.
   c. no dissection of the foetus or experiments on the foetus or foetal material will occur in the operation theatre or place of delivery.
   d. there is no monetary exchange for human tissue material.

I acknowledge and agree to observe the above conditions

Signature of applicant
Date

Name (in block capitals)

The person who signs this form should be the same person who signs the general application form

Signature of NHS Consultant/Head of Department agreeing to supply foetal material or other human tissue

Name (in block capitals)
Date

Appointment held

Department/Institution
ANNEX IV: IONISING RADIATION
This annex need only be completed if relevant to the research.

Title of Research:

1. Will any ionising radioactive substances or X-rays be administered to a patient or volunteer? YES/NO

2. Radioactive substances

   a) Details of substances to be administered

<table>
<thead>
<tr>
<th>Investigation</th>
<th>Radionuclide</th>
<th>Chemical Form</th>
<th>Quantity of Radioactivity to be administered</th>
<th>Route</th>
<th>Frequency</th>
</tr>
</thead>
</table>

   b) Estimated effective dose (effective dose equivalent ** mSv)

   c) Absorbed dose to organ or tissues concentrating radioactivity ** (mGy)
      - Specify dose and organ

   d) Administration of Radioactive Substances Advisory Committee (ARSAC) Certificate holder

Name of Person:
Position:
Certificate No:

_I have delegated authority to administer the radioactive substance(s) in this project to_

_and I approve the arrangements that have been made_

Signature of Certificate Holder
Date

** please supply source of reference or attach calculation
3. X-Rays
   a) Details of radiographic procedures

<table>
<thead>
<tr>
<th>Investigation</th>
<th>Organ(s)</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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</tbody>
</table>

   b) Estimated Effective Dose (Effective Dose Equivalent ** mSv)